**VITA**

(Chehalis School District #302, 310 SW 16th Street, Chehalis WA 98532)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address

Home Phone ( ) Work Phone ( )

Current Employer Position

Work Address

Degree Awarding Institution

Degree Awarding Institution

Degree Awarding Institution

*Professional Experience and Activities*

*Professional Memberships:*

*References* (Please include phone numbers):

Once submitted, this document will remain on file with Chehalis School District #302

(VITA must be updated every five years)