

APPLICATION FOR CLASSIFIED EMPLOYMENT

Mr./Mrs./Miss/Ms.

Date: _____

Name: _____
Last First Middle Name

Address: _____
Street City State Zip

Phone Number: _____
Home Phone Cell Phone Message Phone

Mailing Address: _____
Street City State Zip

E-Mail Address: _____

Position(s) Desired (indicate one or more)

Full-Time Part-Time Temporary Volunteer

a. _____ b. _____ c. _____

Please complete application in full and answer all questions. Submission of resume is recommended, but not required. This application must be completed without reference to resume. Attach recommendation letters. Attach supplemental sheet if necessary, identifying question(s) to which you are responding. Applications will be retained for 2.5 years.

PERSONAL DATA (Please type or print)

1. Are you legally authorized to work in the United States of America? **Yes** **No**

2. When will you be available? _____

3. Other names used _____ Date(s) of use _____

4. Previous mailing address: _____
Street City State Zip

5. If between 16 and 18 years of age, state your birthdate: _____

6. Indicate type and expiration date of driver's license(s). _____

7. List languages, including English, in which you are proficient.

- | | | |
|--------------------------------|--------------------------------|--------------------------------|
| a. _____ | b. _____ | c. _____ |
| <input type="checkbox"/> Speak | <input type="checkbox"/> Speak | <input type="checkbox"/> Speak |
| <input type="checkbox"/> Read | <input type="checkbox"/> Read | <input type="checkbox"/> Read |
| <input type="checkbox"/> Write | <input type="checkbox"/> Write | <input type="checkbox"/> Write |

WORK EXPERIENCE

8. Provide information below for employer for at least last ten years with most recent experience first. List employer's phone number. This section must be completed without reference to resume.

*Dates Employed Month / Yr	Employer's Name (Include Address / Phone)	Supervisor's Name	Position / Title	Reason for Leaving
From To				

* You are required to provide the month and year for each date required. If you are being considered for employment, the District will contact your current and past employers. Attach supplemental sheet if necessary. Identify question(s) to which you are responding.

9. Please explain any gaps in employment of over 30 days. (For the past 10 years)
Attach supplemental sheet if necessary. Identify question(s) to which you are responding.

10. "Yes" answers to the following 3 questions will not necessarily result in denial of employment. The District will consider all the circumstances, including the date and nature of events which have led to the actions described below. Your written explanation will assist the District in determining your eligibility and suitability for employment.

Have you ever been dismissed (fired) from any job, or resigned at the request of your employer, or while charges against you or an investigation of your behavior was pending? You must answer "Yes" even if the matter was later resolved with any form of settlement or severance agreement, regardless of its terms. If you answer "Yes" you must provide the date of termination of employment, the name, address and telephone number of the employer(s) and a statement of the alleged reasons for termination.

_____ Yes _____ No Explanation: _____

Have you ever had any license or certificate of any kind (state certificate or otherwise) revoked or suspended, or have you in any way been sanctioned by, or is any charge or complaint against you before any licensing, certification or other regulatory agency or body, public or private? If you answer "Yes" you must provide the dates of proceedings, name, address and telephone number of the agency or body where proceedings took place, a statement of the accusations against you and the final disposition.

_____ Yes _____ No Explanation: _____

Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any licensing, certification or other regulatory body (state certification or otherwise) or by your current or any previous employer? If you answer "Yes" you must provide the name, address and telephone number of the employer or licensing body and a statement of the accusations against you.

_____ Yes _____ No Explanation: _____

EDUCATION AND TRAINING

11. List schools attended and special training received.

Circle highest year completed

High School: 7 8 9 10 11 12

Location:

Trade/Business School	NAME	LOCATION	DATES	YR. GRADUATED	DEGREE	MAJOR AREA OF STUDY
College						

Describe additional training not listed above.

Describe special abilities or talents applicable to position requested.

PROFESSIONAL EXPERIENCE OR TRAINING:

12. Check items in which you have had 12 months' experience or training:

- | | | |
|---|---|---|
| <input type="checkbox"/> 1. Analyst/Programmer | <input type="checkbox"/> 15. Electronic Technician | <input type="checkbox"/> 30. Plumbing/Pipefitting |
| <input type="checkbox"/> 2. Audio-Visual | <input type="checkbox"/> 16. Engine Repair | <input type="checkbox"/> 31. Phototypesetter/Paste-up |
| <input type="checkbox"/> 3. Auto/Truck Service | <input type="checkbox"/> 17. Food Services | <input type="checkbox"/> 32. Printer/Photographer |
| <input type="checkbox"/> 4. Bookkeeper/Accounting | <input type="checkbox"/> 18. Gardener | <input type="checkbox"/> 33. Purchasing/Buyer |
| <input type="checkbox"/> 5. Brailist/Interpreter | <input type="checkbox"/> 19. Heavy Equipment Operator | <input type="checkbox"/> 34. Refrigeration Repair |
| <input type="checkbox"/> 6. Bus or Truck Driver | <input type="checkbox"/> 20. Keypunch/Verifier | <input type="checkbox"/> 35. Roofer |
| <input type="checkbox"/> 7. Carpentry, Woodworking | <input type="checkbox"/> 21. Library/Bookstore | <input type="checkbox"/> 36. Secretary/Manual Dictation |
| <input type="checkbox"/> 8. Clerk/Typist | <input type="checkbox"/> 22. Locksmith | <input type="checkbox"/> 37. Security/Messenger/Guard |
| <input type="checkbox"/> 9. Computer | <input type="checkbox"/> 23. Masonry | <input type="checkbox"/> 38. Sheet Metal |
| <input type="checkbox"/> 10. Concrete/Blockwork | <input type="checkbox"/> 24. Mechanical Work | <input type="checkbox"/> 39. Steamfitter |
| <input type="checkbox"/> 11. Custodial | <input type="checkbox"/> 25. Nutritionist | <input type="checkbox"/> 40. Upholsterer |
| <input type="checkbox"/> 12. Data Processing
(other than keypunch) | <input type="checkbox"/> 26. Office Machine Repair | <input type="checkbox"/> 41. Warehouse/Receiving |
| <input type="checkbox"/> 13. Diesel/Gas Mechanic | <input type="checkbox"/> 27. Painting | <input type="checkbox"/> 42. Welding |
| <input type="checkbox"/> 14. Electrical Work | <input type="checkbox"/> 28. Payroll | <input type="checkbox"/> 43. Work Processing |
| | <input type="checkbox"/> 29. PBX Receptionist | <input type="checkbox"/> 44. Other: _____ |

IF YOU ANSWERED YES TO ANY QUESTION 1 THROUGH 5, COMPLETE SUPPLEMENTAL CONVICTION INFORMATION

1. Is there any other information not required by this application that you should disclose to the District so it may accurately evaluate your fitness in a position of public trust with minor students?

Yes No

(If you are uncertain as to the relevance or necessity to disclose a matter, trait, etc. disclose and the District will determine whether the information is pertinent. If your answer is Yes, fully explain. (Use separate sheet of paper if necessary).

***CONVICTION** means the final judgment on a verdict or a finding of guilty, a plea of guilty, or a plea of nolo contendere, in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken. Conviction does **not** include a final judgement which has been expunged by pardon, reversed, set aside or otherwise rendered invalid.

**** Please note** that prior to hiring, you must submit a notarized statement attesting to the fact that you are not now awaiting trial on or have ever been convicted of or admitted in open court or pursuant to a plea agreement committing any of the crimes listed in A.R.S. § 15-512D and A.R.S. §13-604.01. In conjunction with this you will submit fingerprints for a background check. The crimes required to be disclosed on the affidavit are:

A.R.S. §15-512(D)

1. Sexual abuse of a minor.
2. Incest.
3. First or second degree murder.
4. Kidnapping.
5. Arson.
6. Sexual assault.
7. Sexual exploitation of a minor.
8. Felony offenses involving contributing to the delinquency of a minor.
9. Commercial sexual exploitation of a minor.
10. Felony offenses involving sale, distribution, or transportation of, offer to sell, transport or distribute or conspiracy to sell, transport or distribute marijuana or dangerous or narcotic drugs.
11. Felony offenses involving the possession or use of marijuana, dangerous drugs or narcotic drugs.
12. Misdemeanor offenses involving the possession or use of marijuana or dangerous drugs.
13. Burglary in the first degree.
14. Burglary in the second or third degree.
15. Aggravated or armed robbery.
16. Robbery.
17. A dangerous crime against children as defined in section 13-604.01.***
18. Child abuse.
19. Sexual conduct with a minor.
20. Molestation of a child.
21. Manslaughter.
22. Aggravated assault.
23. Assault.
24. Exploitation of minors involving drug offenses.

***A.R.S. §13-604.01: prohibits any of the following committed against a minor under the age of 15.

1. Second Degree Murder.
2. Aggravated assault resulting in serious physical injury or involving the discharge, use or threatening exhibition of a deadly weapon or dangerous instrument.
3. Sexual assault.
4. Molestation of a child.
5. Sexual conduct with a minor.
6. Commercial sexual exploitation of a minor.
7. Child abuse as defined in §13-3623, subsection B, paragraph 1.
8. Kidnapping.
9. Sexual abuse.
10. Taking a child for the purpose of prostitution as defined in §13-3206.
11. Child prostitution as defined in §13-3212.
12. Involving or using minors in drug offenses.
13. Continuous sexual abuse of a child.

CONVICTION INFORMATION

1. Conviction Charge		Date of Conviction	Court of Conviction
City	State	Amount of Fine	Length of Jail Term
Remarks:			
Length of Terms of Probation			
2. Conviction Charge		Date of Conviction	Court of Conviction
City	State	Amount of Fine	Length of Jail Term
Remarks:			
Length and Terms of Probation			

ACKNOWLEDGEMENT OF APPLICANT READ CAREFULLY BEFORE SIGNING THIS APPLICATION

Every answer I have provided in this application consisting of 6 pages is complete and truthful. I understand and agree that (1) if any information is omitted from or not filled in on this application, or if any false or misleading information is furnished, the District will reject my application, (2) if any false or misleading information is furnished, I will be ineligible for any future consideration for employment and may be subject to criminal prosecution, and (3) if I am employed by the District, I may be dismissed from employment, criminally prosecuted and if certified, my certificate may be revoked, if it is later determined that I have omitted relevant or furnished false or misleading information on this application.

Under penalty of prosecution and dismissal, I hereby certify that the information presented on this application is true, accurate and complete.

I authorize the investigation of all statements contained herein and understand that any document relevant to this information may be reviewed by the agents of Stanfield Elementary School District.

I authorize the Stanfield Elementary School District to make reference checks regarding my fitness for employment and I will execute such documents to facilitate this investigation. I understand that my employment is not finalized until the background investigation has been completed and the Governing Board has officially approved my employment. I understand that misrepresentation or omission of pertinent facts may be cause for dismissal.

Signature

Date

An Equal Opportunity Organization. The District does not discriminate on the basis of age, race, color, religion, sex, marital status, disability or national origin.

Notice to Applicant: If you are offered a position with the Stanfield Elementary School District No. 24, the offer and continued employment will be contingent upon you providing the following information and the background investigation, not developing any information that would demonstrate that you are not qualified to work at the District. **(The following information is not required until you receive that contingent offer.)**

Last Name, First Name, Middle Name: _____

Street Address: _____

Social Security No. _____

Date of Birth: _____

Driver's License No. _____

State of Issuance: _____