

QUARTZSITE ELEMENTARY SCHOOL DISTRICT NO. 4

P.O. BOX 130, EHRENBERG, AZ 85334

(928) 923-7907 FAX (928) 923-8908

AN EQUAL OPPORTUNITY EMPLOYER IN COMPLIANCE WITH ALL STATE AND FEDERAL NON-DISCRIMINATION AND AFFIRMATIVE ACTION GUIDELINES

APPLICATION FOR CLASSIFIED EMPLOYMENT

State position for which you are applying: \_\_\_\_\_

Applications are kept on active file for two (2) years. Please indicate by √ after each type of employment listed for which you wish to be considered:

Clerical \_\_\_\_\_ Instructional Aide \_\_\_\_\_ Maintenance \_\_\_\_\_ Custodial/Bus Driver \_\_\_\_\_ Cafeteria \_\_\_\_\_

Please indicate by √ if you will accept: Temporary \_\_\_\_\_ 10-Month Position \_\_\_\_\_ 12-Month Position \_\_\_\_\_

1. PERSONAL INFORMATION:

Name \_\_\_\_\_ Date \_\_\_\_\_
Last First Middle

Home Address \_\_\_\_\_ Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Are you a U.S. Citizen?  Yes  No

2. GENERAL INFORMATION:

List any machines/equipment with which you have training and/or experience: \_\_\_\_\_

Are you fluent in languages other than English?  Yes  No If yes, list language(s) \_\_\_\_\_

Have you ever: been bonded?  Yes  No refused a bond  Yes  No

Are you aware of any reason you would not be able to perform the duties required of the position for which you are making an application?  Yes  No

If yes, please attach a confidential letter of explanation.

3. EDUCATION:

Starting with High School, please list each institution attended.

Table with 4 columns: SCHOOL OR INSTITUTION NAME AND LOCATION, DATE OF GRADUATION, DEGREE, DIPLOMA OR HOURS, MAJOR/MINOR. Rows include High School, Undergraduate Institution(s), and Graduate Institution(s).

**4. EXPERIENCE:**

List below, starting with your most recent or present employment. Account for you employment for the last five years, or longer.

| Dates                                       | Employer Name and Location              | Supervisor Name and Title | Supervisor's Phone |
|---|---|---------------------------|--------------------|
| To:   |   |                           |                    |
| From:                                       |   |                           |                    |
| Reason for Leaving<br>(Please be specific): |   |                           |                    |
| Dates                                       | Position, Institution Name and Location | Supervisor Name and Title | Supervisor's Phone |
| To:   |   |                           |                    |
| From:                                       |   |                           |                    |
| Reason for Leaving<br>(Please be specific): |   |                           |                    |
| Dates                                       | Position, Institution Name and Location | Supervisor Name and Title | Supervisor's Phone |
| To:   |   |                           |                    |
| From:                                       |   |                           |                    |
| Reason for Leaving<br>(Please be specific): |   |                           |                    |
| Dates                                       | Position, Institution Name and Location | Supervisor Name and Title | Supervisor's Phone |
| To:   |   |                           |                    |
| From:                                       |   |                           |                    |
| Reason for Leaving<br>(Please be specific): |   |                           |                    |
| Dates                                       | Position, Institution Name and Location | Supervisor Name and Title | Supervisor's Phone |
| To:   |   |                           |                    |
| From:                                       |   |                           |                    |
| Reason for Leaving<br>(Please be specific): |   |                           |                    |

**5. REFERENCES:**

Please list persons not previously included in this application who are familiar with your character, work, personality and work habits.

| Name and Position | Address and Phone Number |
|-------------------|--------------------------|
|                   |                          |
|                   |                          |
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**6. COMMENTS:**

Please list any other pertinent information which you would like us to consider.

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**7. ARREST AND CONVICTION REPORT:**

Because of the tremendous responsibility Quartzsite School District has to its school children and the community, the following information is needed from all applicants and employees regarding convictions. "YES" answers to the following 4 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. Attach additional sheets if necessary.

A. Have you ever been arrested for or convicted of, admitted committing, or are you awaiting trial for any crime (excluding only minor traffic violations not involving any allegation of drug or alcohol impairment)? You must answer "YES" even if the matter was later dismissed, deferred, vacated or expunged. If you answer "YES" you must provide dates of the proceedings, the court where the proceedings occurred, a statement of the accusation against you and the final disposition of the case(s).  YES  NO

Explanation: \_\_\_\_\_

B. 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: \_\_\_\_\_

C. Have you ever had any license or certificate of any kind (teaching certificate or otherwise) revoked or suspended, or have you in any way been sanctioned by, or is any charge or complaint now pending 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: \_\_\_\_\_

D. Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any licensing, certification or other regulatory body (teacher 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: \_\_\_\_\_

**8. ACKNOWLEDGMENT OF APPLICANT: READ THIS PARAGRAPH BEFORE SIGNING THIS APPLICATION.**

Every answer I have provided on this application is both 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 information is furnished, the District will reject my application, (2) if any false 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 furnished false information of this Application.

I authorize investigation of all statements on the application form and other materials provided as part of my application for this position.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND RELEASE**

**QUARTZSITE SCHOOL DISTRICT NUMBER 4**

I, \_\_\_\_\_ [applicant's name], have applied for employment with this School District to work as a \_\_\_\_\_ [job title]. I understand that in order for the School District to determine my eligibility, qualifications and suitability for employment, the School District will conduct a background investigation if I am considered for an offer of employment. This investigation may include asking my current and any former employer and educational institution I have attended about my education, training, experience, qualifications, job performance, professional conduct and evaluations, as well as confirming my dates of employment or enrollment, position(s) held, reason(s) for leaving employment, whether I could be rehired, reasons for not rehiring (if applicable) and similar information.

I hereby give my consent for any employer or educational institution to release any information requested in connection with this background investigation.

According to the Family Educational Rights and Privacy Act, I understand that I have a right to see most education records that are maintained by any educational institution.

I waive \_\_\_\_\_ / do not waive \_\_\_\_\_ (initial only one) my right to see any written reference or other information provided to the School District by any educational institution.

According to Arizona Revised Statutes Section 23-1361, any employer that provides a written communication to the School District regarding my current or past employment must send me a copy at my last known address. I acknowledge that some employers are unwilling to provide factual written references concerning a current or past employee unless they may do so confidentially, without revealing the references to the employee, and that the School district will not further consider my application if it cannot complete its background investigation.

I waive \_\_\_\_\_ / do not waive \_\_\_\_\_ (initial only one) my right to receive a copy of any written communication furnished to the School District by any employer.

Whether or not I have waived my right to see or to receive copies of written references furnished to the School District by employers or educational institutions, I release, hold harmless and agree not to sue or file any claim of any kind against my current or former employer or educational institution, and any officer or employee of either, that in good faith furnishes written or oral references requested by this School District to complete its background investigation.

A photocopy of facsimile ("fax") copy of this form that shows my signature shall be as valid as an original.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
month year

\_\_\_\_\_  
Witness' Signature

\_\_\_\_\_  
Applicant's Signature