### WILLCOX UNIFIED SCHOOL DISTRICT NO. 13 480 North Bisbee Avenue

Willcox, Arizona 85643 (520) 384-8600 FAX (520) 384-4401 www.wusd13.org

Date

# APPLICATION FOR PROFESSIONAL EMPLOYMENT (Teaching and Administrative Positions)

| Last Name  |                            | First                       |      | Middle    |        | Social S | ecurity # (opt) |
|------------|----------------------------|-----------------------------|------|-----------|--------|----------|-----------------|
| Other Nam  | e(s) Used                  |                             |      | _ Date(s) | of Use |          |                 |
| Present Ad | Idress:                    |                             |      |           |        |          |                 |
|            | Street                     |                             |      | City      |        | State    | zip code        |
| Home Pho   | ne                         | Message Phone               |      |           |        |          |                 |
| Permanent  | Address                    |                             |      |           |        |          |                 |
|            | Street                     |                             | City |           | State  | Zip      |                 |
|            |                            |                             |      |           |        |          |                 |
|            |                            |                             |      |           |        |          |                 |
|            | Email address              |                             |      |           |        |          |                 |
|            | POSITION DESIRED           |                             |      |           |        |          |                 |
|            | Grades K-3. List in ord    | ler of preference.          |      |           |        |          |                 |
|            | 1                          | •                           |      |           | 3      |          |                 |
|            | Grades 4-6. List in ord    | er of preference.           |      |           |        |          |                 |
|            | 1                          | 2                           |      |           | 3      |          |                 |
|            | Grades 7-8. List subje     |                             |      |           | _      |          |                 |
|            | 1                          | 2                           |      |           | 3      |          |                 |
|            | Grades 9-12. List subject  | ect matter preference.<br>2 |      |           | 3      |          |                 |
|            |                            |                             |      |           |        |          |                 |
|            | Special Subject Area.      |                             |      |           |        |          |                 |
|            | Special Education.         |                             |      |           |        |          |                 |
|            | Administrative.            |                             |      |           |        |          |                 |
|            | Substitute Teacher         |                             |      |           |        |          |                 |
|            | Submission of resume recom | nmended, not required, exce | · -  |           |        |          |                 |

completed without reference to resume. Attach supplemental sheet(s) if necessary, identifying question(s) to which you are responding. Applications will be retained for 2 years.

## TEACHING AND ADMINISTRATIVE WORK EXPERIENCES (List most recent experience first for at least ten (10) years)

|                                       |  | Complete Name/Address and  | Position  | Reason for  |
|---------------------------------------|--|--|---|---|
| Dates:                                | Mo./                                       | Phone Number   | Grade/Subject   | Leaving   |
|                                       | Yr.  | of School District/Institution   |   |   |
| From                                  |  |  |   |   |
| То                                    |  |  |   |   |
| From                                  |  |  |   |   |
| То                                    |  |  |   |   |
| From                                  |  |  |   |   |
| То                                    |  |  |   |   |
| From                                  |  |  |   |   |
| То                                    |  |  |   |   |
| From                                  |  |  |   |   |
| То                                    |  |  |   |   |
|                                       |  | following 3 questions will not necess  |   |   |
| "YES answ                             | vers to the                                | following 3 questions will not necess  | arily result in denial of e   | employment. The District will   |
|                                       |  | nstances, including the date and nat   |   |   |
| described I                           | below. You                                 | ur written explanation will assist the I   | District in determining yo  | our eligibility and suitability   |
| for employ                            | ment.                                      |  |   |   |
| charges ag<br>the matter<br>you answe | gainst you o<br>was later ro<br>r "YES" yo | dismissed (fired) from any job, or resor an investigation of your behavior vesolved with any form of settlement or must provide the date of termination and a statement of the alleged | vas pending? You mustor severance agreement on of employment, the n | t answer "YES" even if the<br>tt, regardless of its terms. If<br>ame, address and telephone |
| YES                                   | NO   | Explanation:   |   |   |
|                                       |  | ny license or certificate of any kind (t   |   |   |
| licensing, of provide the             | certification<br>e dates of p              | ou in any way been sanctioned by, or other regulatory agency or body, roceedings, name, address and telece, a statement of the accusations ag  | public or private? If you phone number of the ag                    | u answer "YES", you must<br>gency or body where   |
| YES                                   | NO   | Explanation:   |   |   |
| licensing, o                          | certification                              | vestigated for any alleged misconductor or other regulatory body (state certiff you answer "YES" you must provide  | fication or otherwise) or   | by any current or any   |

\_\_\_\_YES \_\_\_\_NO Explanation: \_\_\_\_

of the employer or licensing body and a statement of the accusations against you.

## EDUCATION AND PROFESSIONAL PREPARATION (List schools attended and special training received)

| Name of HS, Univ. or | Locati | on    | Dates<br>Attended | Major Fi | eld of | Diplomas,<br>Degree |        | Grad. |
|----------------------|--------|-------|-------------------|----------|--------|---------------------|--------|-------|
| College Attended     | City   | State | From/To           | Concent  | ration | &/or Sem.<br>Hours  | G.P.A. | Date  |
|                      |        |       |                   |          |        |                     |        |       |
|                      |        |       |                   |          |        |                     |        |       |
|                      |        |       |                   |          |        |                     |        |       |
|                      |        |       |                   |          |        |                     |        |       |
|                      |        |       |                   |          |        |                     |        |       |
|                      |        |       |                   |          |        |                     |        |       |

Describe additional education not listed above i.e., graduate hours beyond highest degree earned.

| Undergraduate<br>Major:  | Minor:                 |
|--|------------------------|
| List honors you have received.                                   |                        |
| List professional organizations to which you belong.             |                        |
| List leadership positions in organizations.                      |                        |
| Describe special abilities or talents applicable to student inst | ruction or activities. |
| What extra curricular activities would you be interested in su   | pervising?             |

### TEACHING/ADMINISTRATIVE CERTIFICATES

| Certificate<br>Title | Subject/ A<br>Specia |  |  |  | State<br>Where | Date | Issued | Expiration | Date |
|----------------------|----------------------|--|--|--|----------------|------|--------|------------|------|
|                      |                      |  |  |  | Issued         | Мо   | Yr.    | Mo.        | Yr.  |
|                      |                      |  |  |  |                |      |        |            |      |
|                      |                      |  |  |  |                |      |        |            |      |
|                      |                      |  |  |  |                |      |        |            |      |
|                      |                      |  |  |  |                |      |        |            |      |

### PROFESSIONAL REFERENCES

Give names, complete addresses and phone numbers (area code plus number, include home and business telephone numbers) of at least two persons (immediate supervisor and another person who directly or indirectly supervised you) for your current or most recent positions for teaching and/or administrative work experience. List references for the past ten (10) years. You must also submit three (3) letters of reference. (Two of the letters may be from those persons listed below. One must be from another source.)

| Name   | Address-City-Zip                 | Phone Number                | Official Position |  |  |  |  |
|--|----------------------------------|-----------------------------|-------------------|--|--|--|--|
|  |                                  |                             | -                 |  |  |  |  |
|  |                                  |                             |                   |  |  |  |  |
|  |                                  |                             |                   |  |  |  |  |
|  |                                  |                             | -                 |  |  |  |  |
| If you are being considered for employment   | , the District will contact your | current and past employers. |                   |  |  |  |  |
| Location of placement records/files  | s: (Give complete addre          | ess.)                       | _                 |  |  |  |  |
|  |                                  |                             |                   |  |  |  |  |
|  |                                  |                             |                   |  |  |  |  |
| Professional/civic/recreational activities: (Include names of professional organizations and other organizations of which you are now a member excluding organizations, the name or character of which indicates your race, religion, age, color, national origin or disability status.) |                                  |                             |                   |  |  |  |  |
| List community and civic activities in which you have been involved. (Indicate leadership positions held.)   |                                  |                             |                   |  |  |  |  |
| List recognition you have receive  | red.                             |                             |                   |  |  |  |  |
| List extensive travel you have done.   |                                  |                             |                   |  |  |  |  |
| List languages, including English,   | in which you are profici         | ent.                        |                   |  |  |  |  |
| a  | b                                | C                           | <del></del>       |  |  |  |  |
| Speak<br>Read  | Speak<br>Read                    | Spe<br>Rea                  |                   |  |  |  |  |
| Write  | Write                            |                             |                   |  |  |  |  |
|  | GENERAL INFORMAT                 | TION                        |                   |  |  |  |  |
| Are you legally authorized to work Do you have a driver's license? Expiration Date(s):   | Commercial Driver                | 's License?Type?            |                   |  |  |  |  |
| When will you be available?  |                                  |                             |                   |  |  |  |  |
| Present Position:  |                                  |                             |                   |  |  |  |  |
| Reason for leaving present position  | n:                               |                             |                   |  |  |  |  |

#### CONVICTION REPORT

Because of the responsibility the Willcox Unified School District No. I3 has to its school children and community, the following information is needed from all applicants and employees regarding background and convictions.\* A record of conviction does not necessarily disqualify applicant from consideration; however, failure to complete this form accurately and completely may mean disqualification from consideration for employment or may be cause for consideration of dismissal if employed and may result in prosecution for filing false information with a public agency. Applicants and employees must report any convictions that occur subsequent to the time they initially completed this form. Questions regarding this information should be directed to the Superintendent's Office.

Please read carefully and answer every question.

| Last   | First                      | Middle                                       |                                     |        |    |
|--|----------------------------|--|-------------------------------------|--------|----|
| ther Names Used  |                            | Dates of Usage                               |                                     |        |    |
| Have you ever been convid                                      | cted of, admitted to comm  | nitting, plea bargained or are you awaiting  | trial for any crime (excluding only |        |    |
|  | 0 , 0                      | ug or alcohol impairment)? A DUI convict     |                                     |        |    |
|  |                            | as later dismissed, held, vacated or exp     | unged.                              | Yes    | No |
| Have you ever been convicted of a felony? **                   |                            |  |                                     |        |    |
| . Are you now awaiting trial on a felony charge?               |                            |  |                                     |        |    |
| Have you ever been convicted of a sex or drug related offense? |                            |  |                                     |        | No |
| Have you ever admitted or                                      | been convicted of a dang   | gerous crime against children as             |                                     |        |    |
| defined in A.R.S. §13-604.                                     |                            |  |                                     | Yes    | No |
| ANY BOXES ABOVE ARE  |                            | N INFORMATION BELOW AND ATTACI               | H LETTER OF EXPLANATION             |        |    |
|  | CONV                       | CTION INFORMATION                            |                                     |        |    |
| Conviction Charge  |                            | Date of Conviction                           | Court of Conviction                 |        |    |
| y S  | State                      | Amt. of Fine                                 | Length of Jail Term                 |        |    |
| ctual Details or Other Rema                                    | arks:                      |  | Length and Terms of Pro             | bation |    |
| Conviction Charge  |                            | Date of Conviction                           | Court of Conviction                 |        |    |
|  | State                      | Amt. of Fine                                 | Length of Jail Term                 |        |    |
| ty   | arks:                      |  | Length and Terms of Pro             | bation |    |
| 7  |                            |  |                                     |        |    |
| actual Details or Other Rema                                   |                            | oplication that you should disclose to the D | District so                         |        |    |
| Is there any other informati                                   | ion not required by this a | oplication that you should disclose to the D | istrict so                          | Yes    | No |

### 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 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 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 agents of the Willcox School District. I authorize the Willcox 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 | Page 5 |  |
|-----------|------|--------|--|

#### **DEFINITIONS**

\*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 judgment 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.§ 15-534(F) and A.R.S. §13-604.01. In conjunction with this will submit fingerprints for a background check. The crimes required to be disclosed on the affidavit are:

#### A.R.S. §15-534(F)

- 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.
- 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.
- 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.
- 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. Mansalughter.
- 22. Assault or Aggravated assault.
- 23. Exploitation of minors involving drug offenses.

- \*\*\*A.R.S. §13-604.01: "Dangerous crime against children" means any of the following committed against a minor under the age of 15.
- a. Second dDegree murder.
- Aggravated assault resulting in serious physical injury or involving the discharge, use or threatening exhibition of a deadly weapon or dangerous instrument.
- c. Sexual assault.
- d. Molestation of a child.
- e. Sexual conduct with a minor.
- f. Commercial sexual exploitation of a minor.
- g. Sexual exploitation of a minor.
- h. Child abuse as defined in §13-3623, subsectionB, paragraph 1.
- i. Kidnapping.
- j. Sexual abuse.
- k. Taking a child for the purpose of prostitution as defined in 13-3206.
- I. Child prostitution as defined in §13-3212.
- m. Involving or using minors in drug offenses.
- n. Continuous sexual abuse of a child.
- o. Attempted first degree murder.

# CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND RELEASE Willcox Unified School District No. 13

| l,   | (Applicant's Name), have applied for employment with this school district to work   |
|--|---|
| suitability for em<br>current and any<br>qualifications, jo<br>position(s) held, | (job title). I understand that in order for the school district to determine my eligibility, qualifications and apployment, the school district will conduct a background investigation. This investigation may include asking my former employer(s) and educational institution(s) I have attended about my education, training, experience, to performance, professional conduct and evaluations, as well as confirming my dates of employment or enrollment, reason(s) for leaving employment, whether I could be rehired, reason(s) for not rehiring, if applicable, along with termination of past employment from previous employers and similar information. |
| university, or oth<br>collection agend<br>to give records o                      | and knowingly, without reservation, authorize each and every present and past employer or supervisor, college, or ner institute of learning, administrator, law enforcement agency, state agency, federal agency, finance bureau/office, by, private business, military branch or the National Personnel Records Center, personal references and/or other persons of information they may have concerning my criminal conviction history, health, character and employment records or tion requested to the school district or its authorized agent.  |
| _  | e Family Educational Rights and Privacy Act, I understand I have the right to see most education records that are ny educational institution.   |
|  | o not waive (initial only one) my right to see any written reference or other information provided to the school ducational institution.  |
| obtained by my<br>investigative cor  | at according to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information perspective employer from a Consumer Reporting Agency. Upon written request, I will be informed whether an ansumer report was requested and will be given full information as to the nature and scope of this investigation, as well as reporting agency or sources of information.   |
| regarding my cu<br>unwilling to prov   | Arizona Revised Statutes Section 23-1361, any employer who provides a written communication to the school district urrent or past employment must send me a copy at my last known address. I acknowledge that some employers are ride factual written references concerning a current or past employee unless they may do so confidentially, without ferences to the employee, and that the school district will not further consider my application if it can not complete its estigation.   |
| I waive/do<br>district by any e  | not waiveinitial only one) my right to receive a copy of any written communication furnished to the school mployer.   |
| educational inst<br>or educational ir  | have waived my right to see or to receive copies of written references furnished to the school district by employers or itutions, I release, hold harmless and agree not to sue or file any claim of any kind against any current or former employenstitution, and any officer or employee of either, that in good faith furnishes written or oral references requested by this complete its background investigation.  |
|  | ration and release shall be valid until the day of, 20 and a photographic or facsimile transmitted norization shall be as valid as the original.  |
| Dated this   | day of, 20  |
| Witness  | Applicant/Employee  |

|  | he Willcox Unified School District #13, the offer and continued following information and the background investigation not |
|--|--|
| developing any information that would demonstrate that     | nt you are not qualified to work at the District. The following  |
| information is not required until you receive that conting | gent offer.)   |
| Last name, First name, Middle initial:                     |  |
|  |  |
| Social Security No   | Date of Birth  |
| Driver's License No.:                                      | State Issued   |

Please save a copy of this application for your records. Click the "Submit" button to email your application to the WUSD district office. Be sure to check your "sent" emails to be sure it sent correctly.

Thank you for you interest.