

WILLCOX UNIFIED SCHOOL DISTRICT NO. 13
480 North Bisbee Avenue
Willcox, Arizona 85643
(520) 384-8600
FAX (520) 384-4401

APPLICATION FOR CLASSIFIED EMPLOYMENT
(All Positions)

Mr. _____
Mrs. _____
Miss _____ Last _____ First _____ Social Sec. No. (Optional) _____
Ms. _____
Dr. _____

Other Name(s) Used _____ Date(s) of Use _____

Present Address _____
Street _____ City _____ State _____ Zip _____

Home Phone _____ Message Phone _____ Date _____

Permanent Address _____
Street _____ City _____ State _____ Zip _____

Home Phone _____ Message Phone _____ Date _____

Email address _____

POSITION(s) DESIRED (*indicate one or more*) _____ Full time _____ Part time _____ Temporary

- | | |
|---------------------------|-------------------------|
| _____ Automotive mechanic | _____ Grounds |
| _____ Bus Driver | _____ Maintenance |
| _____ Clerical | _____ Secretarial |
| _____ Custodial | _____ Teacher Assistant |

If teacher assistant, which grade level do you prefer? _____

This application must be completed and all questions answered. No references such as "see resume" will be accepted. Attach supplemental sheet(s) if necessary, identifying question(s) to which you are responding. Applications will be retained for 2 years.

Submission of resume recommended, not required.

DRUG FREE WORKPLACE

Willcox Unified School District maintains a drug-free workplace. Bus drivers and other employees required to have a Commercial Driver's license shall be tested as a part of the initial and annual physical examination required for certification by state law. In compliance with federal law, bus drivers and other employees required to have a Commercial Driver's license shall also be tested upon application, post-accident, and at random.

REASONABLE ACCOMMODATION: Any applicant with a disability who needs reasonable accommodation in any step of the application process should notify a representative in the Personnel Office.

An Equal Opportunity Organization
This District does not discriminate on the basis of age, race, color, religion,
sex, marital status, disabling condition, or national origin.
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WORK EXPERIENCE

(Provide information below for employer(s) for at least the last 10 years with most recent experience first.)

Dates:	Mo./ Yr.	Employer's Name (Include Address and Phone No.)	Supervisor's Name	Position You Held	Reason For Leaving
From					
To					
From					
To					
From					
To					
From					
To					
From					
To					

Please explain any gaps in employment of over 30 days. (For the past 10 years).

"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 lead 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 the dates of proceedings, name, address and telephone number of the agency or body where the 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:

QUALIFICATIONS

Name: _____ Date: _____

Position Applying For: _____

Current Phone Number: _____ Current Application Submitted ____ No ____ Yes Date _____

In reference to the position that you are applying for, please provide the following information:

1. Describe how your previous work experience has prepared you for this position.

2. What previous jobs or work experience has required you to perform similar job duties.

3. Please explain what qualities or abilities you have that you feel will contribute to the Willcox Schools

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

- | | | |
|--|---|---|
| <input type="checkbox"/> Analyst/Programmer | <input type="checkbox"/> Engine Repair | <input type="checkbox"/> Purchasing/Buyer |
| <input type="checkbox"/> Audio-Visual | <input type="checkbox"/> Food Services | <input type="checkbox"/> Refrigeration Repair |
| <input type="checkbox"/> Auto/Truck Service Worker | <input type="checkbox"/> Gardener | <input type="checkbox"/> Roofer |
| <input type="checkbox"/> Bookkeeper/Accounting | <input type="checkbox"/> Heavy Equipment Operator | <input type="checkbox"/> Secretary/Manual Dictation |
| <input type="checkbox"/> Brailist/Interpreter | <input type="checkbox"/> Library/Bookstore | <input type="checkbox"/> Secretary - Executive |
| <input type="checkbox"/> Bus or Truck Driver | <input type="checkbox"/> Locksmith | <input type="checkbox"/> Secretary - Admin./Ass't |
| <input type="checkbox"/> Carpentry/Woodworking | <input type="checkbox"/> Masonry | <input type="checkbox"/> Sheet Metal |
| <input type="checkbox"/> Clerk/Typist | <input type="checkbox"/> Mechanical Work | <input type="checkbox"/> Supervisor/Manager |
| <input type="checkbox"/> Computer Operator | <input type="checkbox"/> Nutritionist | <input type="checkbox"/> Teacher Assistant |
| <input type="checkbox"/> Custodial | <input type="checkbox"/> Office Machine Repair | <input type="checkbox"/> Upholsterer |
| <input type="checkbox"/> Data Processing | <input type="checkbox"/> Painting | <input type="checkbox"/> Warehouse/Receiving |
| <input type="checkbox"/> Diesel/Gas Mechanic | <input type="checkbox"/> Payroll | <input type="checkbox"/> Welding |
| <input type="checkbox"/> Electrical Work | <input type="checkbox"/> Plumbing/Pipefitting | <input type="checkbox"/> Word Processing |
| <input type="checkbox"/> Electronic Technician | <input type="checkbox"/> Printer/Photographer | <input type="checkbox"/> Other: |

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.
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. 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.
- b. 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, subsection B, paragraph 1.
- i. Kidnapping.
- j. Sexual abuse.
- k. Taking a child for the purpose of prostitution as defined in 13-3206.
- l. 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

I, _____ (Applicant's Name), have applied for employment with this school district to work as _____ (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. This investigation may include asking my current and any former employer(s) and educational institution(s) 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, reason(s) for not rehiring, if applicable, along with the reasons for termination of past employment from previous employers and similar information.

1. I voluntarily and knowingly, without reservation, authorize each and every present and past employer or supervisor, college, or university, or other institute of learning, administrator, law enforcement agency, state agency, federal agency, finance bureau/office, collection agency, private business, military branch or the National Personnel Records Center, personal references and/or other persons to give records of information they may have concerning my criminal conviction history, health, character and employment records or another information requested to the school district or its authorized agent.

According to the Family Educational Rights and Privacy Act, I understand I have the 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.

I understand that according to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my perspective employer from a Consumer Reporting Agency. Upon written request, I will be informed whether an investigative consumer report was requested and will be given full information as to the nature and scope of this investigation, as well as the name of the reporting agency or sources of information.

2. According to Arizona Revised Statutes Section 23-1361, any employer who 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 can not 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 any 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.

3. This authorization and release shall be valid until the _____ day of _____, 20__ and a photographic or facsimile transmitted copy of this authorization shall be as valid as the original.

Dated this _____ day of _____, 20__.

Witness

Applicant/Employee

(Notice to Applicant: If you are offered a position with the Willcox Unified School District #13, 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 initial: _____

Street Address: _____

Social Security No. _____

Date of Birth _____

Driver's License No.: _____

State Issued _____

Please save a copy of this application for your records.

Click on the "Submit" button to email this application to the Willcox Unified School District office. Be sure to check your "sent" box to be sure it sent correctly.

Thank you for your interest.