

BOUSE ELEMENTARY SCHOOL DISTRICT No. 26

P. O. Box "S"
Bouse, Arizona 85325

Telephone: 928-851-2213



FAX: 928-851-2986

APPLICATION FOR CERTIFIED EMPLOYMENT

All sections must be completed. A resume may be submitted in addition to this application.

1. PERSONAL INFORMATION:

Name: _____ Date: _____
Last First Middle

Home Address: _____ Telephone: _____

City: _____ State: _____ Zip Code: _____

e-mail address: _____

Are you legally able to work in the USA? Yes No

2. GENERAL INFORMATION:

Arizona Department of Education Certifications now held:	Arizona Department of Education Certifications applied for:
Type: _____ Exp. _____	Type: _____ Exp. _____ Cert. # _____
Type: _____ Exp. _____	Type: _____ Exp. _____ Cert. # _____

Position(s) for which you are applying:
Regular: _____ Substitute: _____

Subject(s) grade level(s), according to preference:
A. _____ B. _____ C. _____

Other subjects you are qualified to teach, activities to direct, positions to fill. List only those you would be willing to accept, i.e., coaching, dramatics, art, music, computers, health, library.

Has your certificate ever been revoked or suspended? Yes: _____ No: _____

Have you ever been dismissed, asked to resign or non-renewed from any teaching position?
Yes: _____ No: _____

Have you ever been convicted of any crime other than a minor traffic violation?
Yes No

If yes, state here (a) nature of conviction, (b) date and name and address of court convicting you, and (d) whether the conviction has been reversed or vacated.

For each question answered "YES", please explain the circumstances in writing and attach the statement to this form.

3.	EDUCATION	(List each institution attended)		
	INSTITUTION NAME	LOCATION	DATE GRADUATED	MAJOR/ MINOR
Number of semester units (1 quarter unit equals 2/3 semester unit) of graduate work beyond BA or BS _____ MA or MS _____ In what field(s) are units: _____				
My placement papers are on file with the following Placement Office(s) under the name of: _____				
	NAME OF OFFICE	ADDRESS	CITY/STATE	ZIP
4.	EXPERIENCE:			
Please start with your most recent or present employment. Account for all your employment for the past five years, and longer, if there was significant experience to report. If none, report student teaching experience. Indicate type (regular, substitute or student teaching)				
	DATES	SUBJECT/GRADE	SCHOOL DISTRICT	ADDRESS
Total years of teaching: _____				

5. PROFESSIONAL REFERENCE:
 Please list only references who have knowledge of your teaching experience
 (Superintendent, Principal, Supervisors and student teaching Master teachers).

	NAME	POSITION	ADDRESS	TELEPHONE
A.				
B.				
C.				
D.				

6. OTHER:
 List hobbies, special interests, etc.

Awards, Honors or Special Recognition:

What languages do you speak or write fluently?

Professional organizations to which you belong? _____

Why do you wish to teach in the Bouse Elementary School District?
 (Attach additional pages as necessary).

What special characteristics can you offer the students of Bouse Elementary School?

Please describe your philosophy of education (in your own handwriting)

Blank lined area for handwriting the philosophy of education.

Under penalty of prosecution and dismissal, I hereby certify that all statements made herein are true and correct to the best of my knowledge and authorize investigation of all statements herein recorded. Persons and organizations reporting information required by this application are released from any and all liability.

Applicant's signature: _____ Date: _____

Please attach copies of transcripts, valid teaching certificate, official transcripts and valid Arizona Teaching Certificate. Proof of measles immunizations will be required at time of hire.

An equal opportunity employer, all applicants must qualify for Arizona certification prior to employment. The District does not discriminate on the basis of age, race, color, religion, sex, marital status, handicap or national origin.

EXHIBIT

EXHIBIT

PROFESSIONAL STAFF HIRING

CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND RELEASE

I, _____ [applicant's name], have applied for employment with the _____ 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 to determine if I am to be considered for an offer of employment. This investigation may include asking my current employer, any former employer, and any 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.

In light of the preceding paragraph, I waive _____/do not waive _____ (initial only one [1]) 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.

In light of the preceding paragraph, I waive _____/do not waive _____ (initial only one [1]) my right to receive a copy of any written communication furnished to the School District by any employer.

EXHIBIT

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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.

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

DATED this _____ day of _____, 20__.

Witness

Applicant