OWENS WHITNEY ELEMENTARY DISTRICT #6

APPLICATION FOR CLASSIFIED EMPLOYMENT

The Owens Whitney Elementary District #6 intends to comply with the spirit of the law and regulations and will not discriminate on the basis of race, religion, color, national origin, ancestry, disability, medical condition, marital status, sex, age, sexual orientation or any other unlawful basis in its educational programs, activities, or employment policies as required by Title IX of the 1972 Education amendments, Section 504 of the Rehabilitation act of 1973, the Americans with Disabilities Act, and any other applicable laws and regulations.

Name:	Date:	Date:				
Phone Number:						
Address:						
City:	State:	Zip code:				

- The Application for Classified Employment must be completed in full to be considered for employment. Please make sure to read all sections.
- The section marked conviction report must be completed. Any "yes" answers must be fully explained.
- If you are selected to become an employee of Owens Whitney School District #6, you will be required to provide
 fingerprints, in accordance with the Arizona Revised Statutes Section 15-512. Failure to be fingerprinted within the
 specified time is a violation of statute and will result in termination procedures. Employees are responsible for the
 cost of the fingerprint check.
- If you have any problems or questions regarding the accurate completion of your application, please ask. We will be glad to help you.
- I have read and understand the above information

Signature:

OWESD
An equal opportunity organization

OWENS WHITNEY ELEMENTARY DISTRICT # 6

Classified Employment Application



APPLICANT INFORMATION																				
Last Nam	ne							First						1.I.		DO	В			
Address								Mailing address												
City								State					Z	ΊΡ						
Phone					E-1	mail Addres	ss:	: Driver's license #:												
Date Available						Social Se	ecurity No.						Desi	Desired Salary						
Position A	Applied	d for						☐ Full-time ☐ Part-time ☐ Temporary												
Are you a	a citize	en of	the U	Jnited Sta	ites?	YES	NC) 🗌	If no, a	If no, are you authorized to			to w	ork in	the U.	.S.?	YES	5 🗆	N	10 🗆
Have you	ı ever	work	ed fo	r this con	mpany?	YES	NC) [If so, w	If so, when?										
In case o	of Eme	rgeno	су Со	ntact:																
EDUCA	TION	ı																		
High Sch	ool						Ad	dress												
From			То		Did you g	graduate?	YE	S 🗌	NO 🗆	D	Degree									
College					Ad	dress														
From			То		Did you g	graduate?	YE	s 🗌	NO 🗆	NO Degree										
Other			·		Ad	dress														
From		To Did you graduate?		YE	s 🗆	NO 🗆	NO Degree													
Describe professio					ted above	(i.e. busine	ess so	chool, e	tc), list a	iny Ce	rtific	cates, lic	enses	s, or o	ther p	roof c	of te	chnica	l or	
REFERI	FNCF	S																		
Please lis			fessio	onal refer	rences.															
Full Name	e	•								Relati	onsh	hip								
Company	,									Phone	9									
Address																				
Full Name	e									Relati	onsh	hip								
Company	,									Phone	2									
Address																				
Full Name	e	Relationship																		
Company	,									Phone	9									
Address																				

PREVIOUS	EMPLOYM	IENT												
Company								Phone						
Address			Superviso	r										
Job Title	Starting Salary						\$ Ending Salary				\$			
Responsibilities														
From	То		Reason fo	or Leaving	9									
May we contact your previous supervisor for a reference?														
Company Phone														
Address							Superviso	r						
Job Title					Sta	rting Salary	\$		Ending Salary)	\$			
Responsibilities	5				1		L							
From	То		Reason fo	or Leaving	9									
May we contact	ct your previ	ous super	visor for a re	eference?)	YES	NO 🗌							
Company							Phone							
Address							Supervisor							
Job Title	Job Title Starting Salary					rting Salary	\$ Ending \$ Salary							
Responsibilities	5										1			
From	То		Reason fo	or Leaving	3									
May we contact	ct your previ	ous super	visor for a re	eference?	•	YES	NO 🗆							
						l								
PROFESSIO						au tuainina								
Check any iten	g/Accountin	you nave r	iad 12 moni	Food					Secret	ary/mar	nual dictation			
Gardener	ig/Accountin	9				Woodworking]			Secretary/manual dictation Heavy Equipment Operator				
Clerk Typist	t			Comp			2				Receiving			
Mechanical				Custo					Painting					
	Word Processing Data Processing (other t								Payrol					
	Receptionist Plumbing						Electrical Work							
Electrical Technician Other: Other:														
Can you perfor	m the esser	ntial functi	ons of the jo	ob for wh	ich y	ou are apply	ng? Please	explair	1.					

DISCLAIMER AND SIGNATURE
I certify that my answers are true and complete to the best of my knowledge. I agree that the District shall not be held liable in any respect if my employment is terminated because of false or misleading information in my application or interview. I authorize Owens Whitney Elementary District #6 to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation or governmental agency to disclose to Owens Whitney District any information they may have regarding me. In consideration of the School District's review of this application, I hereby release the district as well as all providers of information from any liability and any damage which may result from the furnishing and receiving of this information. A copy of this authorization and release is as valid as the original and should be recognized as such. NOTE: Any misstatements of material fact in your application may be cause for dismissal.
Signature of Date

Applicant

*Your application will remain in our active file approximately for one year.

CONVICTION REPORT

Because of the responsibility the *Owens Whitney School District #6* has to its school children and community, the following information is needed from all applicants and employees regarding 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. In conjunction with this, if you were not fingerprinted by the Arizona Department of Education when you received your certificate, you will submit fingerprints for a background check.

Please read carefully and answer every question. <u>Please print clearly. Use additional paper if needed.</u>

Name Last First		Midd	lle
Other names used	Date of Use:		
Have you ever been convicted of a minor offense other than violations? (A DUI conviction is not considered a minor traffic offense) Have you ever been convicted of a felony?** Are you now awaiting trial on a felony charge?	YES	NO	
Have you ever been convicted of a sex or drug related offen Have you ever admitted or been convicted of a dangerous of children as defined in A.R.S. 13-7052***	se? rime against		

being first duly sworn upon my oath, hereby state the following: That I am 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 following criminal offenses in Arizona or similar offenses in another jurisdiction. *Conviction means the final judgment on a verdict or a finding of guilty, a plea of guilty, or a plea of no contest 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. 13-705. 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)

- · Sexual abuse of a minor
- Incest
- First or second degree murder
- Kidnapping
- Arson
- Sexual assault
- · Sexual exploitation of a minor
- Felony offenses involving contributing to the delinquency of a minor
- Commercial exploitation of a minor
- Felony offenses involving sale, distribution, transportation of, or offer to; sell transport of or distribution of marijuana or dangerous or narcotic drugs
- 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
- · Burglary in the first degree
- · Burglary in the second or third degree
- Aggravated or armed robbery
- Robbery
- A dangerous crime against children as defined in section 13-604.01***
- Child abuse
- Sexual conduct with a minor
- Molestation of a child
- Voluntary manslaughter
- Aggravated assault
- Assault
- Exploitation of minors involving drug offenses

***A.R.S. 13-705: "Dangerous Crime Against Children" means any of the following committed against a minor under the age of fifteen (15) years of age:

- Second Degree Murder
- Aggravated assault resulting in serious physical injury or committed by the use of a deadly weapon or dangerous instrument.
- Sexual assault
- Molestation of a child
- Sexual conduct with a minor
- Commercial sexual exploitation of a minor
- Child abuse as defined in 13-3623, subsection B
- Kidnapping
- Sexual abuse
- Taking a child for the purpose of prostitution
- · Child prostitution
- Involving or using minors in drug offenses

	CONVICT	 	
1. Conviction Charge		Date of Conviction:	Court of Conviction
City	State	Amount of Fine	Length of Jail Term
Remarks:			