



Alamo Navajo School Board, Inc.

PO Box 5907
 Alamo, NM 87825
 (575) 854-2543 Fax: (575) 854-2545

Prospective employees will receive consideration without discrimination with the exception of those that fall under Navajo Preference and Indian Preference.

APPLICATION FOR EMPLOYMENT

1. Personal			
Last Name: _____ First: _____ Middle: _____		Date: _____	
List any other name(s) under which record may be listed or received: _____			
Mailing Address: _____		Home Phone: () - _____	
		E-mail: _____	
City, State, Zip: _____		Business Phone: () - _____	
Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Month and Year Position: _____		Social Security No. (last four digits): xxx-xx-_____	
Position Desired: <i>(Teacher applicants use preference chart on page four.)</i>		2 nd Choice: _____	
Are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? _____		Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Can you legally work in the United States?	When will you be available to begin work?	Pay Expected: _____	
Are you claiming Indian Preference? <input type="checkbox"/> Yes <input type="checkbox"/> No	Census No. <i>(Must Attach Documentation):</i> _____	Tribal Affiliation: _____	

2. Education					
	Name & Location of School	Major/Minor	Inclusive Dates	Did You Graduate?	Date of Graduation
High School		NA		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/ University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate Work				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (technical, Vocational or Certificate Programs)				<input type="checkbox"/> Yes <input type="checkbox"/> No	
What Language(s) do you Speak Fluently? Read? _____ Write? _____		Typing Speed (W.P.M.) _____			

Routing Information For Official Use Only

Date Sent: _____

Date Received: _____

Business Office
 Community Service
 Early Childhood
 Health Clinic
 KABR
 School

3. MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS

(Exclude those which may disclose your race, color, religion, or national origin)

4. EMPLOYMENT

Please give accurate, complete full-time and part-time employment record for at least the last ten years. Start with present or most recent employer. Account for breaks in employment.

Employer Name	Telephone () -
Address	Employed (Month and Year) From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason for Leaving May we contact this employer? Y/N

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State Job Title and Describe Your Work	Reason for Leaving May we contact this employer? Y/N

Note: We will contact past employers unless you indicate those you do not want us to contact.

5. Military	
Complete this section if you served in the U.S. Armed Forces	Branch of Service:
Describe your duties and any special training:	Period of Active Duty (Month & Year) From: To:
	Rank at Discharge:
	Date of Final Discharge:

6. References. List three persons not related to you, who have definite knowledge of your qualifications and fitness for the position for which you are applying. **Do not repeat supervisors listed in No. 4“EMPLOYMENT”.**

Professional References		
Full Name	Present Business Name, Address and Phone Number	Occupation

Character References		
Full Name	Present Business Name, Address and Phone Number	Occupation

7. For Teaching Applicants Only

Type of New Mexico certificate held _____

Expiration date _____

Authority granting certificate _____

Teaching Area Preference

	K-5 Elementary Grade Preferred	6-8 Mid School Subject Preferred	9-12 High School Subject Preferred
First Choice			
Second Choice			
Third Choice			

Student Teaching Experience

Cooperating Teacher(s)	School(s)	Location	Grade(s) or Subject(s)	Inclusive Dates

Teaching Experience

Begin with your present position, excluding Student Teaching. If you have 10 years or more of cumulative teaching experience, be sure to list them below. If you need more space, use an additional sheet.

No. of Years Teaching	Inclusive Dates	Name of School	City/Town	State	Population	No. of Teachers in System	Grade/Subject Taught

8. Disclosure

Have you ever been arrested for domestic violence upon a household member, to include but not limited to a spouse, child, parent or common law spouse? Yes No

- If yes, what law enforcement agency investigated the incident?

- What was the outcome of the charges? Please explain.

Have you ever been arrested for a crime of violence (application of physical force) upon another person?
Yes No

- If yes, what law enforcement agency investigated the incident?

- What was the outcome of the charges? Please explain.

Have you been convicted of two or more misdemeanor charges? Yes No

- If yes, what law enforcement agency investigated the incident?

- What was the outcome of the charges? Please explain.

Have you were been arrested and if so what was the outcome? Yes No

Were you ever discharged or forced to resign from any position for misconduct or unsatisfactory service?

Yes No

- If yes, please state details.
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9. Documentation of Education, Licensure, and References to Meet Minimum Requirements Must be Included to Complete Your Application.

- High School Transcripts/Diploma/GED (only if you are not submitting college transcripts)
- Official College Transcripts
- Certificate/License applicable to the position (If Applicable)
- Resume`
- 3 Letters of Recommendation
- Letter of Interest for each position you are applying for (Required).
- Teaching Applicants, please also complete Section 7 this application
- **Professional Growth (*Teacher Only*)** - Please write a brief (no more than 2 pages), summarization of your feeling/attitudes toward the following issues:
 1. Your Philosophy toward education.
 2. What is an effective teacher?
 3. How you will meet the needs of individual students.
 4. Why you should be hired for this position.
- Certificate of Completion – 16 hours Employability Skills Training (if no college degree)

10. Agreement, Authorization, Waiver, And Release

I hereby certify that the information contained in my application is true, accurate and complete, to the best of my knowledge and belief. I understand and agree that any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of my application or for termination of my employment, regardless of when discovered.

I hereby authorize the Alamo Navajo School Board and its agents to investigate my work history and education history and to conduct personal inquiries.

I hereby authorize the party receiving a copy of this signed form (including photocopy or facsimile copy) to provide and release complete information as may be requested, and I hereby waive any claim of confidentiality I might have with regard to such information.

I hereby release any person or entity providing information or records in accordance with this Agreement, Authorization, Waiver, and Release from any and all claims or liability for compliance.

I also waive any right of action, cause of action, or other means of redress I may have against any person or entity supplying employment-related information, including but not limited to information concerning my background, work, history, and disciplinary history, to ANSB under a guarantee of confidentiality.

I understand and agree that I will submit to a criminal background investigation, including mandatory fingerprinting, to determine my acceptability for continued employment. Criminal convictions shall not automatically bar an applicant from obtaining employment with the Alamo Navajo School Board, but in accordance with the Criminal Offender Employment Act of New Mexico (NMSA 1973. #28-2-1 .et seq.), such convictions may be the basis for refusing employment. I understand that continued employment is contingent upon the satisfactory completion of all background checks.

I understand that the information contained in my application and the information submitted by me or obtained pursuant to this agreement and authorization is confidential, for the exclusive use of the ANSB and its agents for

employment decision and will not be transferred to any other entity without my written authorization unless required to be disclosed upon by either New Mexico or Federal Law.

I understand that my social media posts may be used to screen my application. If my posts are found to be derogatory toward the Alamo Navajo School Board, its employees, and the Board of Trustees and/or display illegal, questionable, discriminatory and/or offensive behavior that reflects poorly on my character, my application may not be considered for employment.

I understand that all offers of employment are subject to the approval of the Board of Trustees and that I should not rely upon an offer of employment without the written approval of the Executive Director.

Signature

Date

Failure to sign your application will result in the application not being processed.