

**PINE STRAWBERRY SCHOOL DISTRICT #12**  
**P.O. BOX 1150**  
**PINE, ARIZONA 85544**  
**(928) 476-3283 (928) 476-2506 – FAX**

**APPLICATION FOR CLASSIFIED EMPLOYMENT**

<b>Last Name</b>	<b>First</b>	<b>Middle</b>	
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Home Phone</b>	<b>Message Phone</b>		<b>E-mail</b>

**POSITION(S) DESIRED**  
 Indicate one or more an order of preference

<input type="checkbox"/> Office Worker (Clerical/secretarial/bookkeeping) <input type="checkbox"/> Paraprofessional/Teacher Aide <input type="checkbox"/> Special Ed Aide <input type="checkbox"/> Cafeteria Manager <input type="checkbox"/> Bus Driver	<input type="checkbox"/> Maintenance <input type="checkbox"/> Custodian <input type="checkbox"/> After School Program Director <input type="checkbox"/> Food Service Worker <input type="checkbox"/> Other _____
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*Submission of resume' is recommended, but not required  
 Application will be retained for one year.*

**An Equal Opportunity Organization**

Pine Strawberry Elementary School District is an Equal Opportunity Employer. It is our policy to make all personnel decisions without discriminating on the basis of race, color, creed, religion, sex, physical disability, mental disability, age, marital status, sexual orientation, citizenship status, national or ethnic origin, and any other protected status.

**PERSONAL DATA**

1. When will you be able to work? \_\_\_\_\_
2. Other names used (include maiden name) \_\_\_\_\_ Date of Use \_\_\_\_\_
3. Previous Mailing Address \_\_\_\_\_  

Street	City	State	Zip
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4. Do you have a driver's license?       Yes       No      Driver's License # \_\_\_\_\_  

State _____	Expiration Date _____	Type _____	Commercial License?   Y   N
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**WORK EXPERIENCE**

*(Provide Information Below of Employment for Last Ten years with Most Recent Experience First)*

<b>Dates of Employed</b>	<b>Employer's Name, Address &amp; Phone #</b>	<b>Supervisor's Name</b>	<b>Reason for Leaving</b>	<b>Position Held</b>
<b>From:</b>  <b>To:</b>				
<b>From:</b>  <b>To:</b>				
<b>From:</b>  <b>To:</b>				
<b>From:</b>  <b>To:</b>				

*You are required to provide the month and year for each date required. If you are being considered for employment, the District will contact your current and past employers. Attach supplemental sheet if necessary. Identify question(s) to which you are responding.*

5. Please explain any gaps in employment of over 30 days. (For the past 10 years) Attach supplemental sheet if necessary. Identify question(s) to which you are responding.

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6. If employed now, may we make inquiries of your present employer?  Yes  No

7. Have you ever been dismissed from a position?  Yes  No

If yes, explain: \_\_\_\_\_

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Have you ever been asked to resign from a position?  Yes  No

If yes, explain: \_\_\_\_\_

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Have you ever resigned from a position rather than being dismissed?  Yes  No

If yes, explain: \_\_\_\_\_

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## EDUCATION AND TRAINING

8. List school(s) attended and special training received:

High School	Address & Phone	Dates Attended	Year Graduated	Degree	Major or Strength
College	Address & Phone	Dates Attended	Year Graduated	Degree	Major or Strength

Circle highest year completed:      High School    8   9   10   11   12      College      1 yr. 2 yrs. 3yrs. 4 yrs.

Describe additional training not listed above (i.e., trade schools, business schools, etc.)

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## PROFESSIONAL EXPERIENCE OR TRAINING

9. Check items in which you have had 12 months experience or training.

<input type="checkbox"/>	Analyst/Programmer	<input type="checkbox"/>	Electronic Technician	<input type="checkbox"/>	Plumbing/Pipefitting
<input type="checkbox"/>	Audio-Visual	<input type="checkbox"/>	Engine Repair	<input type="checkbox"/>	Photo Typesetter/Past Up
<input type="checkbox"/>	Auto/Truck Service	<input type="checkbox"/>	Food Service	<input type="checkbox"/>	Printer/Photographer
<input type="checkbox"/>	Bookkeeper/Accounting	<input type="checkbox"/>	Gardner	<input type="checkbox"/>	Purchasing/Buyer
<input type="checkbox"/>	Brail/Interpreter	<input type="checkbox"/>	Heavy Equipment Operator	<input type="checkbox"/>	Refrigeration Repair
<input type="checkbox"/>	Bus or Truck Driver	<input type="checkbox"/>	Keypunch/Verifier	<input type="checkbox"/>	Roofer
<input type="checkbox"/>	Carpenter Woodworking	<input type="checkbox"/>	Library/Bookstore	<input type="checkbox"/>	Secretary
<input type="checkbox"/>	Clerk/Typist	<input type="checkbox"/>	Locksmith	<input type="checkbox"/>	Security/Messenger/Guard
<input type="checkbox"/>	Computer	<input type="checkbox"/>	Masonry	<input type="checkbox"/>	Sheet Metal
<input type="checkbox"/>	Concrete/Block Work	<input type="checkbox"/>	Mechanical Work	<input type="checkbox"/>	Steam Fitter
<input type="checkbox"/>	Custodial	<input type="checkbox"/>	Nutritionist	<input type="checkbox"/>	Upholster
<input type="checkbox"/>	Data Processing	<input type="checkbox"/>	Office Machine Repair	<input type="checkbox"/>	Warehouse/Receiving
<input type="checkbox"/>	Diesel/Gas Mechanic	<input type="checkbox"/>	Painting	<input type="checkbox"/>	Word Processing
<input type="checkbox"/>	Electrical Work	<input type="checkbox"/>	Payroll	<input type="checkbox"/>	Other:

10. Give names, addresses and phone numbers of three (3) references who are familiar with your personality, character and work habits. (DO NOT use relatives as a reference.)

Name	Dates Known	Occupation	Address	Phone
	From: To:			
	From: To:			
	From: To:			

**CONVICTION REPORT**

11. Because of the responsibility Pine Strawberry School District #12 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 considerations that occur subsequent to the time they initially completed this form. Questions regarding this information should be directed to the District Personnel Clerk. Please read carefully and answer every question. PLEASE PRINT CLEARLY.

NAME \_\_\_\_\_  

Last
First
Middle

Other Names Used: \_\_\_\_\_ Date of Usage \_\_\_\_\_

- a) Social Security Number # \_\_\_\_\_
- b) Have you ever been convicted of a minor offense other than a traffic violation? \_\_\_\_\_ Yes      \_\_\_\_\_ No
- c) Have you ever been convicted of a felony? \_\_\_\_\_ Yes      \_\_\_\_\_ No
- d) Are you now awaiting trial on a felony charge? \_\_\_\_\_ Yes      \_\_\_\_\_ No
- e) Have you ever been convicted of a sex or drug related offense? \_\_\_\_\_ Yes      \_\_\_\_\_ No
- f) Have you ever admitted or been convicted of a dangerous crime against children as defined in A.R.S. 13-604-01? \*\* \_\_\_\_\_ Yes      \_\_\_\_\_ No

IF YOU ANSWERED YES TO ANY OF QUESTIONS B THROUGH F, ATTACH SUPPLEMENTAL CONVICTION INFORMATION FORM – (AVAILABLE FROM THE DISTRICT OFFICE.)

12. Is there any other information not required by this application that you should disclose to the District, so that it may accurately evaluate your fitness to work in a position of public trust with minor students? \_\_\_\_\_ Yes      \_\_\_\_\_ No  
 (If you are uncertain as to the relevance or necessity to disclose a matter, trait, etc. disclose it and the District will determine whether the information is pertinent.) If your answer is anything other than NO, explain fully.

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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 if all statements contained herein and understand that any document relevant to this information may be reviewed by the agents of Pine strawberry School District #12.

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 misrepresentation or omission of pertinent facts may be cause for dismissal.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CONVICTION** means the final judgment on a verdict or a finding of guilty, or a plea of nolo contendere, in any court or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be pending. 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, provided by the district, attesting to the fact that you have neither admitted or committed the crimes listed in A.R.S. 15-512D and A.R.S. 13-604.01. 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. 13-604.01: "DANGEROUS CRIME AGAINST CHILDREN" means any of the following committed against a minor under fifteen (15) years of age:**

- |     |  |     |  |
|-----|--|-----|--|
| 1.  | Second Degree Murder   | 13. | Misdemeanor offenses involving the possession use of marijuana or dangerous drugs. |
| 2.  | Aggravated assault resulting in serious Physical injury or committed by the use of a deadly weapon or dangerous instrument | 14. | Burglary in the first degree   |
| 3.  | Sexual Assault   | 15. | Burglary in the second or third degree   |
| 4.  | Molestation of a child   | 16. | Aggravated or armed robbery  |
| 5.  | Sexual conduct with a minor  | 17. | Robbery  |
| 6.  | Commercial sexual exploitation of a minor  | 18. | A dangerous crime against as defined in 13-604.02                                  |
| 7.  | Child abuse as defined in 13-3623, subsection B, paragraph #1  | 19. | Sexual conduct with a minor  |
| 8.  | Kidnapping   | 20. | Voluntary manslaughter   |
| 9.  | Sexual abuse   | 21. | Aggravated assault   |
| 10. | Taking a child for the purpose of prostitution   | 22. | Assault  |
| 11. | Child prostitution   | 23. | Exploitation of minors involving drug offense                                      |
| 12. | Involving or using minors in drug offense  |     |  |

**A.R.S. 15-512 (D)**

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 offense involving sale, distribution or transportation of, offer to sell, transport or distribute marijuana or dangerous narcotic drugs.

**"PLEASE NOTE THAT SUCCESSFUL CANDIDATES WILL BE REQUIRED TO SIGN AN EMPLOYEE AUTHORIZATION FOR RELEASE OF RECORDS FROM THE INDUSTRIAL COMMISSION OF ARIZONA."**

PINE STRAWBERRY SCHOOL DISTRICT #12  
MILITARY SELECTIVE SERVICE ACT  
**(Mandatory – Please complete)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Month/day/year

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- I certify that I am registered with Selective Service.
  - I certify that I am not required to be registered with Selective Services because:
  - I am female;
  - I am in the services of active duty; (NOTE: Members of the Reserves and National Guard are not considered on active duty.)
  - I have reached my 18<sup>th</sup> birthday;
  - I have passed by 26<sup>th</sup> birthday;
  - I am a permanent resident of the Trust Territory of the Public Island or the Northern Mariana Islands;
  - I am a member of the United States Armed Forces Reserves of National Guard.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date