



**WILLIAMS UNIFIED SCHOOL DISTRICT #2**  
**P. O. BOX 427 802 S. 6<sup>TH</sup> STREET**  
**WILLIAMS, ARIZONA 86046**  
**928-635-4473 FAX 928-635-4767**

*The vision of the Williams Unified School District is to place each child in the best position to succeed intellectually, academically, emotionally, physically, and socially.*

**CERTIFIED ADMINISTRATOR APPLICATION**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Message Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

***SUBMISSION OF A RESUMÉ IS RECOMMENDED.***  
***THIS APPLICATION MUST BE SUBMITTED WITHOUT REFERENCE TO RESUMÉ.***

Please accept my application for the position of:

\*\*\*\*\*

**EDUCATION**

List schools attended and special training received: "See Resume" is not responsive.

College/University	Location	Major	Degree	Dates
College/University	Location	Major	Degree	Dates
College/University	Location	Major	Degree	Dates

**EMPLOYMENT HISTORY**

List most recent position first

Dates Employed Month/Yr	Employer's Name (Include address/phone)	Supervisor's Name	Reason for Leaving	Position Held
From  To				
From  To				
From  To				
From  To				
From  To				

use additional sheets if necessary

Please include a copy of your most recent resume

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**ARIZONA CERTIFICATION INFORMATION**

(ENCLOSE COPY OF CURRENT AZ CERTIFICATIONS AND VALID FINGERPRINT CLEARANCE CARD)

TYPE \_\_\_\_\_ EXP. DATE \_\_\_\_\_ TYPE \_\_\_\_\_ EXP DATE: \_\_\_\_\_

TYPE \_\_\_\_\_ EXP. DATE \_\_\_\_\_ TYPE \_\_\_\_\_ EXP DATE: \_\_\_\_\_

WHERE ARE YOUR CREDENTIALS ON FILE? \_\_\_\_\_

If you do not currently have Arizona Certification, please indicate your process and timeline for acquiring this certification.

## PROFESSIONAL REFERENCES

List the names, complete addresses, and phone number of three references that are familiar with your personality, character and work habits. **(Please do not use a relative as a reference)**

Name	Dates Known Month/Yr	Occupation	Address	Phone
	From  To			
	From  To			
	From  To			

\*Provide Month and Year

***WILLIAMS UNIFIED SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER***

The Williams Unified School District affirms that it does not discriminate on the basis of race, color, national origin, religion, marital status, gender, age or disability in admission or access to, or treatment or employment in its educational programs or activities.

During the background check process, Williams Unified School District has my permission to contact my current employer?

Yes     No    \_\_\_\_\_ **(please initial)**

I certify that the information provided by me on this application is true and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_

Applications are accepted by:

Fax:        928-635-4767  
 Mail:      Williams Unified School District #2  
             PO Box 427  
             Williams, AZ 86046

Use additional sheets of paper if necessary

**1. OUTLINE YOUR PHILOSOPHY OF LEADERSHIP.**

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**2. EXPLAIN YOUR MANAGEMENT STYLE FOR USE WITHIN THE PUBLIC SCHOOL SETTING.**

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**3. WHAT DO YOU BELIEVE TO BE THE ESSENTIAL COMPONENTS OF AN EFFECTIVE SCHOOL?**

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## CONVICTION REPORT

Because of the responsibility the Williams Unified School District 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 an 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 complete this form. Questions regarding this information should be directed to the superintendent's office. Please read carefully and answer every question. (Please print clearly)

- a. Name: \_\_\_\_\_
- b. Have you ever been employed under another name? If so, what was that name \_\_\_\_\_
- c. Have you even been convicted of a minor offense other than a traffic violation?     Yes     No
- d. Have you even been convicted of a felony? \*\*     Yes     No
- e. Are you now awaiting trial on a felony charge?     Yes     No
- f. Have you ever been convicted of a sex or drug related offense?     Yes     No
- g. Have you even been convicted of a dangerous crime against children as defined in A.R.S. 13-604-01? \*\*\*     Yes     No

IF YOU HAVE ANSWERED **YES** TO ANY QUESTION C-G, ATTACH THE SUPPLEMENTAL CONVICTION INFORMATION FORM.

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 of the relevance or necessity to disclose a matter, trait, etc., disclose and the District will determine whether the information is pertinent. If your answer is anything other than **NO** explain fully. (Use a separate piece of paper if necessary)

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 of all statements contained herein and understand that any document relevant to this information may be reviewed by the agents of Williams School District.

I authorize the Williams Unified School District to make reference checks prior to employment and I will execute such documents to facilitate this investigation. 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 that misrepresentation or omission of pertinent facts may be cause for dismissal.

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

\***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.

\*\*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 to in open court or pursuant to a plea agreement, to committing any of the crimes listed in A.R.S. 15-521D. In conjunction with

\*\*\*See next page

**\*\*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 offense involving contributing to the delinquency of a minor
9. Commercial exploitation of a minor
10. Felony offenses involving the sale, distribution, transportation of, offer to sell, transport, or distribute marijuana or dangerous or narcotic drugs
11. Felony offenses involving the possession or use of marijuana, dangerous drugs or narcotics drugs.
12. Misdemeanor offenses involving the possession or use of marijuana or dangerous drugs.
13. Burglary in the first, second or third degree
14. Aggravated or armed robbery
15. Robbery
16. A dangerous crime against children as defined in section 13-604.01
17. Child abuse
18. Sexual conduct with a minor
19. Molestation of a child
20. Voluntary manslaughter
21. Aggravated assault
22. Assault
23. Exploitation of minors involving drug offenses

**\*\*\*A.R.S. 13-604.01 Dangerous Crimes against Children**

**Prohibits any of the following with a minor Under the age of 15**

1. Second degree murder.
2. Aggravated assault resulting in a serious physical injury or involving the discharge, use or threatening exhibition of a deadly weapon or dangerous instrument.
3. Sexual assault.
4. Molestation of a child.
5. Sexual conduct with a minor.
6. Commercial sexual exploitation of a minor.
7. Sexual exploitation of a minor.
8. Child abuse as prescribed in section 13-3623, subsection A, paragraph 1.
9. Kidnapping
10. Sexual abuse
11. Taking a child for the purpose of prostitution
12. Child prostitution
13. Involving or using minors in drug offenses.
14. Continuous sexual abuse of a child
15. Attempted first degree murder
16. Sex trafficking
17. Manufacturing dangerous drugs under circumstances that cause physical injury to a minor.

**PROFESSIONAL STAFF HIRING**  
**CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND RELEASE**

I, \_\_\_\_\_ (applicant name), have applied for employment with the Williams Unified 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, qualification, 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) 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) my right to see 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, furnished 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 the original.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed name \_\_\_\_\_

Witness \_\_\_\_\_

Date \_\_\_\_\_

**(This page must be completely filled out and signed and dated by applicant and witness in order for the applicant to be considered for employment)**