



**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.*

**APPLICATION FOR CERTIFIED EMPLOYMENT**

The Williams Unified School District operates according to policy adopted by the Governing Board. The Policy Manual is available for review at each school office and the district office, as well as online through the District website [www.wusd2.org](http://www.wusd2.org) or on the webpage of The Arizona School Boards Association [www.azsba.com](http://www.azsba.com)

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 (home address) (City) (State) (Zip)

ADDRESS: \_\_\_\_\_  
 (mailing address) (City) (State) (Zip)

HOME PHONE: \_\_\_\_\_ MESSAGE PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

POSITION(S) APPLIED FOR: *list in order of preference*

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_ d. \_\_\_\_\_ e. \_\_\_\_\_

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

**PERSONAL DATA**

1. When will you be available? \_\_\_\_\_
2. Previous mailing address: \_\_\_\_\_
3. List Arizona Certificate(s) now held, including expiration date(s): \_\_\_\_\_
4. If you do not have a current Arizona Teaching Certificate, are you eligible to receive one: \_\_\_\_\_
5. List honors you have received: \_\_\_\_\_
6. List professional organizations to which you belong: \_\_\_\_\_
7. List leadership positions you have held in professional organizations: \_\_\_\_\_
8. List your special abilities and/or talents that are applicable to student instruction or activities: \_\_\_\_\_

**EDUCATION AND PROFESSIONAL PREPARATION**

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

Location	Dates Attended	Year Graduated	Degree	Major/Minor	GPA
High School					
College					

Describe additional education not listed above. (i.e, graduate hours beyond highest degree earned)

---

---

**Please include a copy of your current Arizona Certificate and valid Arizona Fingerprint Clearance Card with this application.**

**PROFESSIONAL AND OTHER WORK EXPERIENCE**

Required information

DATES	EMPLOYER'S NAME (INCLUDE ADDRESS/PHONE)	SUPERVISOR'S NAME	REASON FOR LEAVING	POSITION HELD
-------	--	----------------------	--------------------	---------------

FROM:

TO:

---

FROM:

TO:

---

FROM:

TO:

---

FROM:

TO:

---

FROM:

TO:

\*\*\*\*\*

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

1. Please explain any gaps in employment of over 30 days. (For the past 10 years) Attach supplemental sheet if necessary.

---

---

2. Have you ever been dismissed from a position?  yes  no If yes, please explain:

---

---

3. Have you ever been asked to resign from a position?  yes  no If yes, please explain:

---

---

4. Have you ever resigned from a position rather than be: (a) non-renewed or dismissed (b) disciplined

yes  no If yes, please explain: \_\_\_\_\_

---

---

**PROFESSIONAL REFERENCES**

Give names and complete addresses of three people who are familiar with your personality, character and work habits. (Please do not use relatives as references)

Name	*Dates known	Occupation	Address	Telephone
1.				
2.				
3.				

\*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.

I GIVE PERMISSION FOR AN OFFICIAL FROM WILLIAMS USD #2 TO CONTACT MY CURRENT EMPLOYER.

\_\_\_\_\_ YES      \_\_\_\_\_ NO      (please initial your choice)

I VERIFY THAT I HAVE REVIEWED THE STATEMENTS PRESENTED ON THIS APPLICATION AND THAT ALL INFORMATION PROVIDED BY ME IS TRUE AND ACCURATE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

~ HOME OF THE VIKINGS~

## 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 ever been convicted of a minor offense other than a traffic violation?  Yes  No
- d. Have you ever 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 ever admitted or 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 AVAILABLE AT THE DISTRICT OFFICE.

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 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, or conspiracy 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, signed and dated by applicant and witness in order for the applicant to be considered for employment)***