



## Red Rock Elementary School District No. 5

20854 E. Homestead Dr. Red Rock, AZ 85145

Phone: 520-682-3331 Fax: 520-917-7310

### Classified Application

Dear Support Staff Applicant:

We are happy you have expressed an interest in joining the support staff in the Red Rock Elementary School District! We request a complete application file, which consists of:

- Application for Classified Employment
- Consent to conduct background investigation and release form
- Copy of Fingerprint Clearance Card
- "Consent for Information from Previous Employers on Alcohol and Controlled Substances Testing"
  - Transportation Applicants
- Degree/Course Work/Academic Ability Attestation – Instructional Aide Applicants

Once your application file is complete and background checks are satisfactory, you will be contacted for an initial interview.

If you have any questions, please call us at 520-682-3331.

Sincerely,

Stacey LeFager  
Principal

# Red Rock Elementary School District No. 5

## APPLICATION FOR CLASSIFIED EMPLOYMENT

### THIS APPLICATION IS NOT CONTRACT OF EMPLOYMENT

Classified **CONTRACT POSITIONS** are one-year only. The contract employee has no reasonable expectation of continued employment beyond the term of the written contract. The employment of any **NON-CONTRACT** employee is on an "at-will" basis, meaning the employment relationship may be terminated at any time by either the employee, or the district, for any reason not prohibited by law. Any oral or written representation to the contrary is not authorized, is not binding on the district and should not be relied upon by any prospective employee.

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Social Security Number \_\_\_\_\_

Address \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Previous Address \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Message Home \_\_\_\_\_ Date of Application \_\_\_\_\_

Are you currently receiving benefits from the Arizona State Retirement System?  
 Yes  No

Are you legally eligible to work in the United States?  
 Yes  No

Do you presently have work authorization that would allow you to begin working at Red Rock Public Schools immediately?  
 Yes  No

Languages Spoken Fluently (other than English) \_\_\_\_\_

### TYPE OF POSITION DESIRED (Check all that apply)

**All positions require a high school diploma or GED**

- Accounting  Clerical  Secretarial  Attendance  Maintenance  Groundskeeper  
 Custodian  Library  Health Assistant  Security  Technology  
 Classroom Instructional Aide  Transportation  Other \_\_\_\_\_

**DRUG FREE WORKPLACE** Red Rock School District #5 maintains a drug-free workplace and reserves the right to test employees for use of alcohol or drugs whenever reasonable suspicion exists that the employee has violated the drug-free workplace policy. In addition, bus drivers and other employees required to have a Commercial Driver's license shall be tested as a part of the initial and annual physical examination required for certification by state law. In compliance with federal law, bus drivers and other employees required to have a Commercial Driver's License shall also be tested upon application, post accident, and at random.

**AN EQUAL OPPORTUNITY ORGANIZATION** The District does not discriminate on the basis of age, race, color, religion, sex, marital status, handicap/disability, or national origin.

**REASONABLE ACCOMMODATION** Any applicant with a disability who needs reasonable accommodation in any step of the application process should notify a representative in the District Office.

For Official Use Only

Fingerprints \_\_\_\_\_ Background Release \_\_\_\_\_ Transcripts/Ability \_\_\_\_\_ ACST \_\_\_\_\_

**DRIVING STATUS** (Please type or print)

1. Do you have a driver's license?  Yes  No  
 License Number \_\_\_\_\_ Issuing State \_\_\_\_\_
2. Do you have a Commercial driver's license?  Yes  No  
 What Class? \_\_\_\_\_ Issuing State \_\_\_\_\_

**WORK EXPERIENCE**

3. List current and/or previous employers – put most recent experience first. The district will contact your current employer for a reference. *(Applicants for positions in Transportation must list ALL employers for the past two years prior to the date of this application. If you need additional space, please ask for a supplementary form. Transportation applicants must also sign a "Consent for information from Previous Employers on Alcohol and Controlled Substances Testing" form.)*

Dates Employed	Employer's Name (include address)	Phone	Supervisor's Name	Reason for Leaving	Your Position Title & Salary
From _____ To _____	-----				----- \$
From _____ To _____	-----				----- \$
From _____ To _____	-----				----- \$
From _____ To _____	-----				----- \$
From _____ To _____	-----				----- \$

**EDUCATIONAL**

4. List schools attended and special training received:

Circle highest year completed – High School GED College 13 14 15 16

	Name	Location	Dates Attended	Year Graduated	Diploma Degree	GED
High School						
College/ Technical School						

Indicate college hours completed or degree awarded \_\_\_\_\_

**PROFESSIONAL EXPERIENCE OR TRAINING**

5. Describe additional training not listed above (i.e., trade school, business schools, etc.) \_\_\_\_\_  
\_\_\_\_\_
6. Please explain any gaps in employment of over 30 days \_\_\_\_\_  
\_\_\_\_\_
7. Have you ever been dismissed from a position?  Yes  No  
If yes, explain \_\_\_\_\_  
\_\_\_\_\_
8. Have you ever been asked to resign from a position?  Yes  No  
If yes, explain \_\_\_\_\_  
\_\_\_\_\_
9. Have you ever resigned from a position rather than being dismissed?  Yes  No  
If yes, explain \_\_\_\_\_  
\_\_\_\_\_
10. Have you ever resigned rather than face disciplinary action and/or non-renewal by an employer?  Yes  No  
If yes, explain \_\_\_\_\_  
\_\_\_\_\_
11. Have you ever been disciplined for any reason which resulted in suspension from work (with or without pay)?  Yes  No  
If yes, please explain reason for discipline and conditions of suspension \_\_\_\_\_  
\_\_\_\_\_

12. List any relative currently employed by the Red Rock Public Schools.

Name	Relationship	Department or School

**PERSONAL REFERENCES**

13. Give names and complete addresses of three references who are familiar with your personality, character and work habits. (Do not use relatives as references). Please give numbers of references that can be contacted Monday – Friday between 9:00 a.m. and 5:00 p.m.

Name	Years Known	Official Position	Adress			
			Street	City	State	Phone

**SELECTIVE SERVICE REGISTRATION** *(In compliance with A.R.S. §38-201)*

14. Are you required to be registered with the Selective Service System?  Yes  No

If yes, please state the place of registration indicating the following:

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Local Board Number

Selective Service Number \_\_\_\_\_

**INSTRUCTIONAL (PARAPROFESSIONAL)  
AIDE APPLICANTS  
DEGREE/COURSE WORK/  
ACADEMIC ABILITY ATTESTATION**

According to the No Child Left Behind Act, all Title I instructional paraprofessionals must meet one of three requirements. The paraprofessional must either:

- Obtain an Associates Degree or higher.
- Complete two years of coursework at an institution of higher education, or
- Meet a rigorous standard of quality and demonstrate, through a formal state of local academic assessment, knowledge of, and the ability to assist in instructing reading, writing, and mathematics.

I certify and will provide documentation to support I have met or will meet requirement number \_\_\_\_\_, within six months of employment. Failure to meet one of the three requirements listed above will be cause for my dismissal as an instructional (paraprofessional) aide.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**STATEMENT OF QUALIFICATIONS**

Name: \_\_\_\_\_ Application for \_\_\_\_\_  
(please indicate job title)

Current Red Rock School Employee:  No  Yes, Position & Location \_\_\_\_\_

Former Red Rock School Employee:  No  Yes, Dates Employed \_\_\_\_\_

Current Application on file:  No  Yes, Date Submitted \_\_\_\_\_

1. Why are you interested in this position? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What qualifications do you possess will be of benefit to this position. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Summarize special job-related skills and qualifications acquired from employment or other experience. If listing computer experience, please include types of software you are familiar with. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# CRIMINAL ACTIVITY REPORT

Because of the responsibility Red Rock School District has to its school children and community, the following information is needed from all applicants and employees. A record of arrest or conviction\* does not prohibit employment; however, failure to complete this form accurately and completely may mean disqualification from consideration of employment, or may be cause for dismissal if employed. Failure to disclose all information may result in prosecution for filing false information with a public agency. Applicants and employees must report any convictions and arrests that occur subsequent to the time they initially completed this form. Questions regarding this information should be directed to the Superintendent of Red Rock Elementary School District.

1. Name \_\_\_\_\_ SSN \_\_\_\_\_

Other names used \_\_\_\_\_

**ANSWER THESE QUESTIONS TRUTHFULLY EVEN IF THE CONDITION WAS ULTIMATELY EXPUNGED, REVERSED OR OTHERWISE SET ASIDE. IF ANY OF THE BOXES ARE MARKED "YES," FILL IN THE INFORMATION BELOW AND ATTACH A LETTER OF EXPLANATION.**

2. Have you ever been convicted of any misdemeanor offense(s) other than traffic violation(s)?.....  Yes  No
3. Have you ever been convicted of a DUI offense?.....  Yes  No
4. Have you ever been convicted of a felony? ..... Yes  No
5. Have you ever been convicted of a sex or drug related offense?....  Yes  No
6. Have you ever been convicted of a dangerous crime against children as defined in A.R.S. § 13.614.01?\*\*\* ..... Yes  No
7. Have you ever been arrested for any offense which has not yet been resolved?..... Yes  No

## CONVICTION INFORMATION

1. Conviction Charge		Date of Conviction	Court of Conviction
City	State	Amount of Fine	Length of Jail Term
Factual Details or Other Remarks:		Length and Term of Probation:	
2. Conviction Charge		Date of Conviction	Court of Conviction
City	State	Amount of Fiine	Length of Jail Term
Factual Details or Other Remarks:		Length and Terms of Probation:	

\* **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.  
 \*\*A.R.S. §13-3716 requires applicants to give notice of any conviction for dangerous crimes against children. These crimes are defined in A.R.S. §13.604.01 as second degree murder, aggravated assault, sexual assault, molestation of a child, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping and sexual abuse, if any of these crimes are committed against a minor under 15 years of age.  
 Confidential references which become a part of this record will not be revealed to me. I certify that I am free of pulmonary T.B. and I understand I must submit certified proof of eligibility to work in the United States, with a completed INS-9. If born after 1/1/42, I must provide proof of immunity to rubella. If born after 1/1/57, I must provide proof of immunity to measles.  
 Under penalty of criminal prosecution and dismissal, I hereby certify the information presented in this application is true, accurate and complete. I understand and agree misrepresentation or omission of relevant facts would be good cause for rejection of my application or, if I have been employed, for immediate termination of my employment.

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

# RED ROCK SCHOOL DISTRICT NO. 5

## CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND RELEASE

*This form must be completed and signed in order to be considered for employment.*

I, \_\_\_\_\_, (applicant's name), have applied for employment with the Red Rock School District to work as a \_\_\_\_\_ (job title). I understand 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, qualifications, job performance, professional conduct, and evaluations, as well as confirming my dates of employment of 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 I have a right to see most education records 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 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 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 receive a copy of 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 furnishes written or oral references requested by this School District to complete its background investigation.

A photocopy or facsimile copy of this form that shows my signature shall be as valid as an original.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant



**Red Rock Elementary School District No. 5**

*"Working Together We Do Better!"*

**NOTICE TO CONSUMERS**

This is to advise you the Red Rock School District may obtain a consumer report concerning you for purposes of evaluating your employment, promotion, reassignment, or retention as an employee. Unless you are otherwise notified in writing, the District will limit its request for consumer information to criminal history.

This notice is provided pursuant to the federal Fair Credit Reporting Act, which gives you specific rights in dealing with consumer reporting agencies and users of consumer reports. You may request a copy of "A Summary of Your Rights Under the Fair Credit Reporting Act" from the District. This request should be in writing and sent to Superintendent, Red Rock Elementary School District, P.O. Box 1010, Red Rock, Arizona 85245.

\*\*\*\*\*

**AUTHORIZATION**

By signing below, I authorize the Red Rock School District to procure a consumer report in accordance with the above Notice to Consumer

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date

**CONSENT  
FOR INFORMATION FROM PREVIOUS EMPLOYER(S)  
ON ALCOHOL AND CONTROLLED SUBSTANCES TESTING**

*AS A CONDITION OF EMPLOYMENT AND IN COMPLIANCE WITH 49 C.F.R. & 382.413, ANY INDIVIDUAL SEEKING EMPLOYMENT IN A POSITION COVERED BY THE FEDERAL OMNIBUS TRANSPORTATION EMPLOYEE TESTING ACT OF 1991 SHALL PROVIDE RED ROCK ELEMENTARY SCHOOL DISTRICT #5 WRITTEN CONSENT THAT ANY PREVIOUS EMPLOYER(S) DISCLOSE TO THE DISTRICT INFORMATION OF ANY ALCOHOL TEST WITH A CONCENTRATION RESULT OF 0.04 OR GREATER, POSITIVE CONTROLLED SUBSTANCES TEST RESULTS, AND REFUSALS TO BE TESTED WITHIN THE PRECEDING TWO YEARS. IN SEEKING THE REQUESTED INFORMATION, THE DISTRICT WILL PROVIDE THE PREVIOUS EMPLOYER(S) WITH A COPY OF THIS CONSENT TO DISCLOSURE.*

*THE DISTRICT SHALL NOT CONSIDER AN APPLICANT FOR EMPLOYMENT IF ANY SUCH RESULTS/REFUSAL EXISTS IN THE TWO YEARS PRECEDING THE DATE INDICATED ON THIS CONSENT. THE DISTRICT MAY NOT CONSIDER AN APPLICANT FOR EMPLOYMENT IF ANY PREVIOUS EMPLOYER DECLINES TO PROVIDE THE REQUIRED INFORMATION.*

*I, \_\_\_\_\_, HEREBY GIVE MY CONSENT*

*THAT ANY EMPLOYER FOR WHOM I HAVE WORKED WITH IN THE PRECEDING TWO YEARS DISCLOSE TO THE DIRECTOR OF TRANSPORTATION OR DESIGNEE, RED ROCK ELEMENTARY SCHOOL DISTRICT #5, THE FOLLOWING INFORMATION FROM MY PRIOR EMPLOYMENT:*

- ANY ALCOHOL TEST WITH A CONCENTRATION RESULT OF 0.04 OR GREATER,*
- ANY POSITIVE CONTROLLED SUBSTANCES TEST RESULT, AND*
- ANY REFUSAL TO BE TESTED WITHIN THE PRECEDING TWO YEARS.*

*I UNDERSTAND THAT THE INFORMATION WILL BE DISCLOSED WITHIN THE DISTRICT ON A NEED-TO-KNOW BASIS ONLY.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**49 C.F.R. §382.413 RELEASE OF ALCOHOL AND CONTROLLED SUBSTANCES TEST INFORMATION BY PREVIOUS EMPLOYER.**

- a) *An employer may obtain, pursuant to a driver's written consent, any of the information concerning the driver which is maintained under this part by the driver's previous employers.*
- b) *An employer shall obtain, pursuant to a driver's consent, information on the driver's alcohol tests with a concentration result of 0.04 or greater, positive controlled substances test results, and refusal to be tested, within the preceding two years, which are maintained by the driver's previous employers under 382.401(b)(1)(i) through (iii)*
- c) *The information in paragraph (b) of this section must be obtained and reviewed by the employer no later than 14 calendar days after the first time a driver performs safety-sensitive functions for an employer, if it is not feasible to obtain the information prior to the driver performing safety-sensitive functions. An employer may not permit a driver to perform a safety-sensitive function after 14 days without obtaining the information.*
- d) *If the driver stops performing safety-sensitive functions for the employer before expiration of the 14 day period or before the employer has obtained the information in paragraph (b) of this section, the employer must still obtain the information.*
- e) *The prospective employer must provide to each of the driver's employers within the two preceding years the driver's specific, written authorization for release of the information in paragraph (b).*
- f) *The release of any information under this part may take the form of personal interviews, telephone interviews, letters, or any other method of obtaining information that ensures confidentiality. Each employer must maintain a written, confidential record with respect to each past employer contacted.*
- g) *An employer may not use a driver to perform safety-sensitive functions if the employer obtains information on the driver's alcohol test with a concentration of 0.04 or greater, verified positive controlled substances test result, or refusal to be tested, by the driver, without obtaining information on a subsequent substance abuse professional evaluation and/or determination under §382.401(c)(4) and compliance with § 382.309.*

**49 C.F.R. §382.405 ACCESS TO FACILITIES AND RECORDS**

- h) *Records should be available to a subsequent employer upon receipt of a written request from a driver. Disclosure by the subsequent employer is permitted only as expressly authorized by the terms of the driver's request.*
- i) *An employer shall release information regarding driver's records as directed by the specific, written consent of the driver authorizing release of the information to an identified person. Release of such information by the person receiving the information is permitted only in accordance with the terms of the employee's consent.*