

TSÉ NITSAA DEEZ'ÁHÍ DINÉ BI'ÓLTA'
ROCK POINT COMMUNITY SCHOOL



HIGHWAY 191
ROCK POINT, ARIZONA 86545
TELEPHONE (928) 659-4221
FAX (928) 659-4235

APPLICATION PROCESS

Your interest in applying for a position with Rock Point Community School is appreciated. Enclosed is an application packet.

Your complete application **MUST** include the following, if applicable:

1. Letter of interest
2. Completed RPCS application form
3. Resume
4. Three (3) Reference Letters from previous employers prepared in the last six months.
5. High School Diploma/GED Certificate / Associates Degree, if applicable to position
6. Copy or Official Transcript (Official copy will be needed upon hire)
7. A copy of Valid Arizona Teaching Certificate
8. Certification certificates (i.e. food handlers permit, CPR, First Aid, Bus Driver certification, boiler certification, etc.)
9. Release form- for Employment Verification
10. A copy of your Driver License (Front and Back)
11. Completed Federal and/or AZ State Fingerprint Clearance Card and Navajo Nation Criminal Background Check.

Your application will become the property of Rock Point Community School upon receipt by the Human Resources Manager and will be kept on file for one (1) year past the date submission. Your application will be evaluated according to the requirements of the vacant position. An interview may be scheduled if you are a qualified applicant.

NOTE:

1. *Applications to be considered are those who submit all above applicable documentations.*
2. *An incomplete application packet will not be considered an applicant for a job interview and/or employment application documents will be returned.*

Questions regarding Arizona certification should be directed to 602-542-4367 or www.ade.state.az.us/certification for information regarding certification within our state.

Please complete and return the status of Arizona Certification form.

Have you ever been terminated or asked to resign from a position? If so, please explain the circumstances.

Work/Teaching Experience:							<i>Start with your present or last job.</i>		Do not indicate see Resume-Use form.	
Employer:				Dates Employed			Work Performed			
Type of Business				From	To					
Address										
Job Title				Hourly Rate/Salary						
Telephone				Starting	Final					
Supervisor										
Reason for Leaving				Employment Full Time? Y N			May We Contact? Y N			
School Year	From	To	Number of Years	Grade Level	Subjects			Extra Curricula Activities		
SY										

Work/Teaching Experience:							<i>Start with your present or last job.</i>		Do not indicate see Resume-Use form.	
Employer:				Dates Employed			Work Performed			
Type of Business				From	To					
Address										
Job Title				Hourly Rate/Salary						
Telephone				Starting	Final					
Supervisor										
Reason for Leaving				Employment Full Time? Y N			May We Contact? Y N			
School Year	From	To	Number of Years	Grade Level	Subjects			Extra Curricula Activities		
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Type of Business				From	To					
Address										
Job Title				Hourly Rate/Salary						
Telephone				Starting	Final					
Supervisor										
Reason for Leaving				Employment Full Time? Y N			May We Contact? Y N			
School Year	From	To	Number of Years	Grade Level	Subjects			Extra Curricula Activities		
SY										

Describe the experiences you have working with Navajo and Native American Students?

Education:	Name and address of school	Course of study	Diploma/ Degree		Date received
School					
High school			Graduated?	Y N	
			G.E.D	Y N	
Undergraduate College					
Graduate/ Professional					
Other (specify)					
List any other Education, training, Special skills or Certificates/Licenses that you possess related to this job:					

Certification		1	2	3
Are you certified?	Y N If yes,	State		
Please Provide proper certification for the position. (Teaching, Endorsement, food handler permit, CPR, First Aid, Boiler Certificate ,Bus driver , ect.)		Type		
		Expire Date		
		Endorsement		
		Other		
		Other		
		Other		
		If No, Are you in the process of getting certified? Y N		

List any languages other than English that you fluently:

Speaks: _____ Reads: _____ Writes: _____

Driver License:

Do you have a valid driver's license?

Y N

License No. _____ State : _____

PERSONAL/ PROFESSIONAL REFERENCES (Do not include family members)			
Name	Address	Phone Number	Occupation
1).			
2).			
3).			

APPLICANT'S CERTIFICATION

I hereby certify that the information on this application is true, accurate and complete to the best of my knowledge. I authorize the investigation of all statements contained herein and understand that my document relevant to this information may be viewed by the agents of the Rock Point Community School. I authorize the Rock Point Community School to make reference checks prior to employment, and I will execute documentation to facilitate this investigation. I understand that my employment is not finalized until the background investigation has been completed and the school board has officially approved my employment. I understand that mis-representation or omission of pertinent facts may be cause for dismissal.

In the event of employment, I agree that: I will obtain a copy of and become familiar with the Personnel Policy Code of Rock Point Community School and that I will be held responsible for compliance therewith during my employment.

Applicant Signature: _____

Date: _____

BACKGROUND INFORMATION

Your answers should include convictions from a plea of nolo conte are (no contest), but omit (1) traffic fines of \$300 or less, (2) any violation of law committed before your 16th birthday, (3) any violation of law committed before your 18th birthday if finally decided in juvenile court or under a Youth Offender law, (4) any conviction set aside under the Federal Youth Corrections Act or similar State Law, and (5) any conviction whose record was expunged under Federal and State Law.

Section 231 of the Crime Control Act of 1990, Public Law 101-674, requires that employment application for Federal child care position have applicants sign a receipt for notice that a crime records check will be conducted.

1. Have you ever been arrested for or charged with a crime involving a child? If yes, provide the date, explanation of the violation, disposition of the arrest or charge, place or occurrence and the name and address of the police department or court involved. Yes _____ No _____ Section 408 of the Miscellaneous Indian Legislation, Public Law 101-647, requires criminal records check for positions with regular contract with, or control over Indian children.
2. Have you ever (1) been arrested for or charged with a crime involving a child, and/or (2) been found guilty of, or entered a plea of nolo contend ere or guilty to, any offenses under Federal, State, or Tribal Law involving crimes of violence: sexual assault, molestation exploitation, contact or restitution; or crimes against persons? If yes, provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence and the name and address of the police department or court involved. Yes _____ No _____
3. During the last 10 years, have you been convicted, been imprisoned, been on probation, or been on parole? (Include felonies, firearms or explosives violations, misdemeanors, and all other offenses). If yes, provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence and the name and address of the police department or court involved. Yes _____ No _____
4. Have you ever been convicted by a military court-martial in the past 10 years? (If no military service, answer "No"), If yes, use additional space to provide the date, explanation of the violations, , place of occurrence and the name and address of the military authority or court involved. Yes _____ No _____
5. Are you now under charges for any violation of law? If yes, use additional space to provide the date, explanation of the violations, place of occurrence and the name and address of the police department or court involved. Yes _____ No _____
6. During the last 5 years, were you fired from any job for any reasons, did you quit after being told that you would be fired, did you leave any job by mutual agreement because of specific problems, or were you debarred from Federal employment by the Office of Personnel Management? If yes, use additional space to provide the date, explanation of the violations, place of occurrence and the name and address of the police department or court involved. Yes _____ No _____
7. Are you delinquent on any Federal debt? (Include delinquencies arising from Federal taxes, loans, overpayment of benefits, and other debts to the U.S. Government, plus defaults of Federally guaranteed or insured loans such as student and home mortgage loans). If yes, use additional space to provide the type, length, and amount of the delinquency or default and steps that you are taking to correct the error or repay the debt. Yes _____ No _____

I certify that my response to these questions is made under Federal penalty of perjury, which is punishable for fines or imprisonment, and that I have received notice that criminal check will be conducted. I understand my right to challenge the accuracy and completeness of any information contained in the report.

Signature of Applicant

Date

Rock Point Community School is an equal opportunity employer and gives preference in hiring qualified Navajos and Native Americans.

STATUS OF ARIZONA CERTIFICATION

APPLICANT'S NAME	DATE
TYPE OF ARIZONA CERTIFICATION YOU NOW HOLD	EXPIRATION DATE

If you do not hold a valid Arizona Certificate, please complete the remainder of this form.

Type of Arizona Certification for which you are eligible: _____

CURRENT CERTIFICATION

I hold a valid certificate in another state.

Name of State: _____

Type of Certificate: _____

CRIMINAL CLEARANCE CARD (FINGERPRINTS)

I have already received my criminal clearance card from the Department of Public Safety (D.P.S.)

I sent my fingerprints to D.P.S. and am waiting for my card to be returned

Date for application and card sent to D.P.S. _____

ARIZONA TEACHER PROFICIENCY ASSESSMENT (ATPA)

I have taken my Subject Knowledge Test Date of Test: _____

I have taken the Professional Knowledge Test Date of Test: _____

I am scheduled to take the test on Date of Test: _____

I have already submitted my original fingerprints clearance card, ATP A test scores, official transcripts and other documents along with my application for Arizona Certification and am awaiting receipt of my certificate.

Date of application sent to ADE: _____

Comments/ Information pertinent to your Arizona Certification.

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FOR H.R. USE ONLY (EARLY RELEASE) – APPLICANT: DO NOT WRITE BELOW THIS LINE

FINGER PRINTED	CRIMINAL CLEARANCE (PREVIOUS STATE)	EMPLOYMENT (5 YEARS)	APPLICATION CLEARANCE
<input type="checkbox"/> SENT	<input type="checkbox"/> SENT	<input type="checkbox"/> COMPLETE	<input type="checkbox"/> COPY
<input type="checkbox"/> CLEARED	<input type="checkbox"/> CLEARED		<input type="checkbox"/> CLEARED