

# CERTIFIED APPLICATION



WHITERIVER UNIFIED SCHOOL DISTRICT NO. 20

959 S. Chief Avenue

P.O. Box 190

Whiteriver, AZ 85941

phone: 928 358-5800 fax: 928 358-5801 website: [www.wusd.us](http://www.wusd.us)

Position for which you are applying: \_\_\_\_\_

## 1. PERSONAL INFORMATION:

Name (First, Middle, Last) \_\_\_\_\_

Mailing Address \_\_\_\_\_ Telephone \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

In what languages are you fluent? \_\_\_\_\_

2. PRESENT POSITION: Please respond to each item. If you are currently unemployed, list such as title. Please provide as much information as possible.

Currently Position Title \_\_\_\_\_

Employed by \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Length of Present Employment \_\_\_\_\_

Reason for leaving present position \_\_\_\_\_

Date available \_\_\_\_\_ Immediate or last Supervisor \_\_\_\_\_

What valid certificates do you hold? \_\_\_\_\_

3. REFERENCES: List the names of persons who are familiar with your character and work experience. Please request three of these (non-relatives) to forward a current letter of reference/recommendation concerning your qualifications for the position for which you are applying.

Name	Position Title	Telephone (Work)	Telephone (Home)

**4. EXPERIENCE:** List in consecutive order beginning with the next most recent position following the position listed in section 2. Note any NON-educational experience with an asterisk\*. If additional space is needed please attach a separate sheet of paper.

Date	Position, Institution & Location	Supervisor Name and Title	Supervisor's Phone
To: From:			Business: ( ) Home: ( )
Reason for leaving (please be specific):			
Date	Position, Institution & Location	Supervisor Name and Title	Supervisor's Phone
To: From:			Business: ( ) Home: ( )
Reason for leaving (please be specific):			
Date	Position, Institution & Location	Supervisor Name and Title	Supervisor's Phone
To: From:			Business: ( ) Home: ( )
Reason for leaving (please be specific):			

**5. EDUCATION:** List all graduate and undergraduate work and degrees earned.

Name of School and Location	Degree, Diploma or Hours	Major	Minor
High School:			
Undergraduate Institution (s)			
Graduate Institution (s)			

**6. HONORS AND DISTINCTIONS:** List degrees, honors, awards commendation, elective or appointive offices held, or other distinctions received.

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**7. EXTRA CURRICULAR EXPERIENCE:** List and note leadership roles.

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**8. COMMUNITY ACTIVITIES:** List each activity and specify the community.

Activity	Community

**9. BACKGROUND:** Have you ever been convicted of any crime other than a minor traffic violation?      Yes ☐      No ☐

If yes, state here (A) the nature of the conviction, (B) the date of the conviction, (C) the name and address of the court where you were convicted, and (D) whether the conviction has been reversed or vacated.

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**10. CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND RELEASE:**

I, \_\_\_\_\_ (applicant's name), have applied for employment with the Whiteriver 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, if I am considered for an offer of employment. This investigation may include asking my current and any former employer and educational institutions I have attended about my education, training, experience, qualifications, 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 the right to see most educational records that are maintained by any educational institution.

I waive \_\_\_\_/do not waive \_\_\_\_ (initial one) my right to see any written reference or other information provided to the School District by any education 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 maybe so confidentially, without revealing the references to the employee, and that the School District will no further consider my application if it cannot complete its background investigation.

I waive \_\_\_\_/do not waive \_\_\_\_ (initial one) my right to receive a copy of any written communications 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 education institutions, I release, hold harmless and agree not to sue or file any claim of any kind against my current or former employer or educational institution, any officer or employee of either, that in good faith furnishes written or oral references requested by the School District to complete background investigation.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (year)

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant

**11. REQUIRED NARRATIVE ITEMS:** In your own handwriting please respond to the following items.

- A. Give a historical sketch of your experience in education.
- B. Describe what makes you the best person for this position.
- C. Describe how you will influence students to be successful in the classroom.

**12. STATED REQUIREMENTS AND INFORMATION:**

- Candidates must have a high level of energy.
- Candidates must have official transcripts forwarded to the Superintendent prior to a recommendation for hire being presented to the Governing Board.
- Candidates must have or must qualify for Arizona Certification or endorsement as required for the position.

Address all communication to:

*Whiteriver Unified School District No. 20  
P.O. Box 190  
Whiteriver, AZ 85941*

**ACKNOWLEDGEMENT OF APPLICANT**

Read this paragraph before signing application

Every response I have provided on this application is both complete and truthful. I understand and agree that (1) if any information is omitted from or not completed on this Application, or if any false information is furnished, the District will reject my application, (2) if any false information is furnished, I will be ineligible for any future consideration for employment and may be subject to criminal prosecution, and (3) if I am employed by the District, I may be dismissed from employment, criminally prosecuted, and if certified, my certificate may be revoked, if it is later determined that I have furnished false information on this application.

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Signature

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Date

**The Whiteriver Unified School District is an Equal Employment Opportunity Employer and prohibits discrimination against an otherwise qualified individual with a disability or any individual by reason of race, color, religion, sex, age, or national origin.**