

**ELOY ELEMENTARY SCHOOLS**

**CONSENT TO CONDUCT BACKGROUND INVESTIGATION  
AND RELEASE**

I, \_\_\_\_\_, have applied for employment with this School District to work as a \_\_\_\_\_. 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 institution 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 a right to see most education records that are maintained by any educational institution.

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.

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 institutional, or 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 of facsimile(fax) copy of this form that shows my signature shall be as valid as an original.

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

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant

**ELOY ELEMENTARY SCHOOLS**

1011 N. Sunshine Blvd. Eloy, Arizona 85231	Phone: (520) 466-2100 Fax: (520) 466-2101
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**APPLICATION FOR CERTIFIED PERSONNEL**

Date: \_\_\_\_\_ (This application will be kept on file for one year from this date. It may be renewed by written request.)

**ACKNOWLEDGEMENT OF APPLICANT**  
READ THIS PARAGRAPH BEFORE SIGNING THIS APPLICATION.

Every answer 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 filled in 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 the application.

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Social Security #: \_\_\_\_\_

**POSITION DESIRED:**

- A. Administrative
- B. Special Education
- C. Elementary Teacher
- D. Other \_\_\_\_\_

**PERSONAL HISTORY:**

Are you a U.S. citizen or eligible to work in the U.S.? Yes \_\_\_ No \_\_\_

Have you ever worked for this District? Yes \_\_\_ No \_\_\_

Do you hold a valid Driver's License? Yes \_\_\_ No \_\_\_

If yes, Commercial \_\_\_ Regular \_\_\_

Have you served in the U.S. Armed Forces? Yes \_\_\_ No \_\_\_

Have you have been convicted of, admitted committing, or are you awaiting trial for any crime (excluding only minor traffic violations not allegations of drug or alcohol impairment)? You must answer "YES" even if the matter was later dismissed, deferred, vacated or expunged. If you answer "YES" you must provide dates of the proceedings, the court where the proceedings occurred, a statement of the accusation against you and the final disposition of the case(s).

Yes \_\_\_ No \_\_\_ Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been dismissed (fired) from any job, or resigned at the request of your employer, or while charges against you or an investigation of your behavior was pending? You must answer "YES" even if the matter was later resolved with any form of settlement or severance agreement, regardless of its terms. If you answer "YES" you must provide the date of termination of employment, the name, address and telephone number of the employer(s) and a statement of the alleged reasons for termination.

Yes \_\_\_ No \_\_\_ Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever had any license or certificate of any kind (teaching certificate or otherwise) revoked or suspended, or have you in any way been sanctioned by, or is any charge or complaint now pending against you before any licensing, certification or other regulatory agency or body, public or private? If you answer "YES" you must provide the dates of proceeding, name, address and telephone number of the agency or body where proceedings took place, a statement of the accusations against you and the final disposition.

Yes \_\_\_ No \_\_\_ Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any licensing, certification or other regulatory body (teacher certification or otherwise) or by your current or any previous employer? If you answer "YES" you must provide the name, address and telephone number of the employer or licensing body and a statement of the accusation against you.

Yes \_\_\_ No \_\_\_ Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION:** List starting with high school

School Name & Location	Date of Degree	Diploma	Major	Minor
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**EXPERIENCE:** Educational-List in order beginning with present position.

School & District	Dates	Type of Position	Reason for leaving
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**MEMBERSHIPS & AFFILIATIONS:**

Professional Organizations	Leadership Role	Remarks
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**COMMUNITY ACTIVITIES:** Please specify community

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL WORK REFERENCES:** List only persons we may contact at this time

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Title: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Title: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Title: \_\_\_\_\_ Business Phone: \_\_\_\_\_

**INCLUDE ANY OTHER DOCUMENTATION THAT SUPPORTS THE SPECIAL QUALIFICATIONS YOU FEEL YOU BRING TO THIS POSITION.**

**DESCRIBE YOUR EDUCATIONAL PHILOSOPHY:** Use separate sheet if needed:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## AGREEMENT

I hereby apply for employment with the Eloy Elementary School District (EESD) and state that: The information contained in this application is true to the best of my knowledge and belief and I understand and agree that any misrepresentation or false statement by me in connection with the application will constitute justifiable cause for EESD not to employ me or, if employed, to terminate my employment for cause.

I understand and agree that all information furnished in this application maybe verified by EESD or its authorized representative. I hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give EESD all information relative to such verification and hereby release such individuals, organizations, and EESD from many and all liability for any claim or damage resulting therefrom.

I understand that, if I am employed by EESD and as a condition of my continued employment by EESD, I may be required to furnish proof of age. In addition, in compliance with the Immigration Reform & Control Act of 1986, I will be required to furnish proof of my identity and eligibility to be employed in the U.S. All job offers extended are contingent upon the ability to verify such status.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

ELOY ELEMENTARY SCHOOLS is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to race, religion, color, sex, national origin, age, handicap, or status as a disabled or Vietnam era veteran.