



Queen Creek Schools

Queen Creek Unified School District #95
20740 S. Ellsworth Road • Queen Creek, Arizona 85242
Phone (480) 987-5935 • Fax (480) 987-9714

APPLICATION FOR ADMINISTRATIVE POSITION

Date of Application _____ Date of Availability _____

Last Name _____ First _____ Middle _____ Social Security Number _____

PERSONAL DATA (Please type or print)

1. Home mailing address: Drivers License No. _____
Street _____ Issuing State _____
City _____ State _____ Expiration Date _____
Zip _____ Phone _____ Message Phone/Web Address _____

2. 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 Queen Creek Schools immediately?
[] Yes [] No

3. Languages spoken fluently (other than English) _____

4. Are you currently receiving benefits from the Arizona State Retirement System? [] Yes [] No

POSITION DESIRED (Please check qualified areas and indicate preference)

- 5. [] Principal (Senior High School) [] Assistant Principal (Senior High School)
[] Principal (Middle School) [] Assistant Principal (Middle School)
[] Principal (Elementary)
[] Director of _____ Specify _____ Other _____ Specify _____

IMPORTANT: Before final consideration for employment, the following must be on file in the Human Resources Department: completed application, complete set of transcripts, three recommendation letters, and a current and valid Arizona teaching certificate.

AN EQUAL OPPORTUNITY EMPLOYER: The district does not discriminate on the basis of age, race, color, religion, sex, marital status, handicap/disability, national origin or any other legally protected status.

DRUG-FREE WORKPLACE: Queen Creek Unified District #95 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.

REASONABLE ACCOMODATION: Any applicant with a disability who needs reasonable accommodation in any step of the application process should notify a representative in the Human Resources Department

EDUCATIONAL PREPARATION

17. List educational institutions attended: ("See Resume" is not sufficient.)

DEGREE(S) Circle Degree(s)	NAME OF INSTITUTION	LOCATION, CITY, STATE	GRADUATION YEAR	MAJOR	MINOR	GPA
<input type="checkbox"/> BS <input type="checkbox"/> BA <input type="checkbox"/> MS <input type="checkbox"/> MA <input type="checkbox"/> MED <input type="checkbox"/> EDS <input type="checkbox"/> PHD <input type="checkbox"/> EDD						

Title of Master's Thesis and/or Dissertation Topic: _____

PROFESSIONAL EXPERIENCE

18. ADMINISTRATIVE EXPERIENCE: List most recent experience first ("See Resume" is not sufficient)

Position:	Grade/Subject:	Dates: From: _____ To: _____
Name of School:	Complete Address	Student Enrollment
Supervisor's Name:	Telephone:	Reason for Leaving:
Position:	Grade/Subject:	Dates: From: _____ To: _____
Name of School:	Complete Address	Student Enrollment
Supervisor's Name:	Telephone:	Reason for Leaving:
Position:	Grade/Subject:	Dates: From: _____ To: _____
Name of School:	Complete Address	Student Enrollment
Supervisor's Name:	Telephone:	Reason for Leaving:
Position:	Grade/Subject:	Dates: From: _____ To: _____
Name of School:	Complete Address	Student Enrollment
Supervisor's Name:	Telephone:	Reason for Leaving:

19. TEACHING EXPERIENCE: List most recent full-time contractual experience first ("See Resume" is not sufficient):

Position:	Grade/Subject:	Date: From: _____ To: _____
Name of School:	Complete Address:	Student Enrollment:
Supervisor's Name:	Telephone:	Reason for Leaving:
Position:	Grade/Subject:	Date: From: _____ To: _____
Name of School:	Complete Address:	Student Enrollment:
Supervisor's Name:	Telephone:	Reason for Leaving:

20. Please explain any gaps in employment: _____

CERTIFICATION

21. Do you hold a valid and current Arizona administrative certificate?..... Yes No
 If YES, please complete item 22. If NO, proceed to item 23.
22. Arizona certificates/endorsements now held:

SPECIFIC TITLE OF CERTIFICATE/ENDORSEMENT	DATE ISSUED	DATE OF EXPIRATION

23. Have you applied to the Arizona State Board of Education, Certification Unit, for an administrative certificate?
 Yes No If YES, date applied _____

24. Have you completed the fingerprint requirement for the Arizona administrative certificate?
 Yes No If YES, date applied _____

25. Arizona certificates/endorsements for which now eligible: _____

26. Do you hold a valid and current administrative certificate from another state?
 Yes No If YES, name of state _____
 Title/type of certificate(s) _____

Inquiries regarding certification should be directed to the Arizona State Board of Education, Certification Unit, 1535 West Jefferson Street, Phoenix, Arizona 85007, (602) 542-4367, or visit their website at www.ade.state.az.us/certification. Make contact immediately as certification procedures may cause up to a 4-month delay in a certificate being issued.

PROFESSIONAL REFERENCES

27. Give names and phone numbers of three professional references who have knowledge of your educational/administrative experiences. (Do not include family/relatives)

NAME	YEARS KNOWN	OFFICIAL POSITION	WORK PHONE	HOME PHONE

28. Name any relatives now employed by Queen Creek Schools and their position/site: _____

CRIMINAL ACTIVITY REPORT

Because of the responsibility Queen Creek 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 for 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 Director of Personnel.

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. § 13.604.01?*** 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 Terms of Probation	
2. Conviction Charge		Date of Conviction	Court of Conviction
City	State	Amount of Fine	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.

Under penalty of criminal prosecution and dismissal, I hereby certify that the information presented in this application is true, accurate, and complete. I understand and agree that 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.

I understand that, if I am considered for an offer of employment, the Queen Creek School District may conduct a background investigation for the District to determine my eligibility, qualifications and suitability for employment. I hereby give my consent for any employer or educational institution to release any information requested for this background investigation. Also, I waive any rights I have under state or federal law to review or obtain a copy of such information. 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 release, hold harmless and agree not to sue or file any claim of any kind against any current or former employer or educational institution, or any officer or employee of either, that in good faith furnishes written or oral references requested by the District to complete its background investigation. A photocopy or facsimile copy of this form that shows my signature shall be valid as an original. **Furthermore, I understand that I have no right of access to any materials submitted or information gathered by the District during the application process and that such materials and information are considered the sole property of the Queen Creek Unified School District #95.**

X _____
 Signature _____ Date _____