Rough Rock School Board, Inc.



(928) 728-3705 - P.O. Box 680 - Chinle, AZ 86503 Rough Rock Community School, US Hwy 59, Chinle, AZ 86503

CLASSIFIED EMPLOYMENT APPLICATION

Dear Applicant:

Thank you for seeking employment with Rough Rock Community School, Inc. Attached is the employment application; **please complete ENTIRE application and ALL listed documents.**

- 1. Current Resume
- 2. Letter of Interest
- 3. Three (3) Letters of Recommendation (must be within the past 3 months)
- 4. Current Arizona Dept. of Public Safety Fingerprint Clearance Card
- 5. \$50.00 Money Order payable to: Personnel Security Consultants for FBI Check.
- 6. Current Navajo Nation Background Check (5 years)
- 7. Arizona Motor Vehicle Report (5 years)
- 8. Certificate of Indian Blood (if applicable)
- 9. Copy of High School Diploma or GED Certificate
- 10. College/University Degree and Transcripts (official required at time of hire)
- 11. First Aid/CPR Certificate

Your application packet will be evaluated to ensure you meet the minimum qualifications. Should you meet qualifications; the Human Resources office will contact you to schedule an interview.

Again, thank you for your interest with Rough Rock Community School, Inc. If you have any questions, please contact us at (928) 728-3757.

Sincerely,

Rough Rock Community School, Inc. Human Resources



ROUGH ROCK COMMUNITY SCHOOL, INC.

Post Office Box 680 * Chinle, Arizona 86503 Phone: (928) 728-3700/3757

Date:

CLASSIFIED

EMPLOYMENT APPLICATION

Please	com	plete entire	e application	in fu	ıll. Do not ເ	use	"refe	r to	res	ume" o	r equivalent	statement.
Answer	all	questions	completely.	This	application	is	part	of	the	review	procedure;	incomplete

information will affect the evaluation of your application. Thank you for your interest in Rough Rock Community School, Inc. For Official use only Rough Rock Community School does not discriminate in recruitment, hiring or other terms or conditions of employment on the basis of race, Date Received: color, religion, national origin, gender, disability, age or any other status protected by law, with the exceptions provided to "Indians" under Received by: federal law, the preferences set forth under the Navajo Preference in Employment Act, and as Navajo and/or federal law may otherwise **Personal Information** (Please print clearly.) Position for which you are applying for: _____ Name:______email: _____ Address _____ Street/P.O. Box City State Zip Code Telephone No.: () Cell Phone: () Are you 18 years of age or older? (If not, you may be required to provide documentation.) [] No If hired can you provide documentation verifying legal status to work in the United States? [] Yes [] No Can you perform the essential functions of the job for which you are applying for with or without reasonable accommodations? [] Yes [] No Do you have a valid driver's license? [] Yes [] No Driver License No._____Issuing State _____

Have you previously been employed by Rough Rock Community School, Inc.? [] Yes [] No

If yes, indicate when and what position(s) you held

What Languages other than English	n, are you fluent with	(read & write)?		
Do you have an Arizona Departmen	nt of Public Safety fin	gerprint clearance ca	ard? Yes 🗆	No 🗆
IVP#:	Expiration:	If no	o, date applied: _	
MILITARY PREFERENCE		Are you a Veteran?	Yes	□ No
Veterans Preference: Veterans requesting preference relative to employment with Rough Rock Community School, Inc. must indicate they are requesting the preference in their employment application and attach a copy of their DD214 discharge papers at the time of submitting their employment application.				
Branch:Fro	om:To:	:Тур	e of Discharge:	
INDIAN PREFERENCE				
Navajo Preference in Employment Act: In accordance with the Navajo Preference in Employment Act, it is the policy of Rough Rock Community School, Inc., in all employment decisions, to give preference first to qualified Navajo persons and secondly to qualifying spouses, and then to qualified Indians of a federally recognized tribe.				
Tribal Affiliation:		_Tribal Enrollment N	lumber:	
List any relative(s) currently employed with Rough Rock Community School, Inc.				
NAME		onship		artment
EDUCATION AND PROFESSIONAL TRAINING				

List in chronological order all educational institutions attended. Transcripts must be provided for each institution listed. The information should be accurate as it is used to assist in determining your qualifications for employment.

Degree GPA	Name of Institution	Location City & State	Semester Hours	Graduation Year	Major	Minor	Degree Received
	Undergraduate						
	Graduate						
	Post Graduate						

List additional training you received that relates to the position for which you are applying for.
List special skills relevant to the position for which you are applying for and years of experience. (i.e. management or supervisory)
List computer-related skills and years of experience. Specify software and hardware
List other equipment and/or office machine(s) you are familiar with.

PROFESSIONAL EXPERIENCE

List all employment in chronological order with most recent first. Applicants must provide at least 5 years employment history for low risk positions and 7 years employment history for high risk positions. RRCS will contact your employers for reference check. (*Do NOT put "see resume"*)

Name of present or most recent employer:	Telephone No.	Starting Salary:
Employer Address:	Start Date:	Ending Salary:
	End Date:	
Name of Immediate Supervisor and Title:	Your Job Title:	Reason for leaving:
Description of work & responsibilities:		
Name of employer:	Telephone No.	Starting Salany
Name of employer.	relephone No.	Starting Salary:
Employer Address:	Start Date:	Ending Salary:
	End Date:	
Name of Immediate Supervisor and Title:	Your Job Title:	Reason for leaving:
Description of work & responsibilities:		
	T	
Name of employer:	Telephone No.	Starting Salary:
Employer Address:	Start Date:	Ending Salary:
	End Date:	
Name of Immediate Supervisor and Title:	Your Job Title:	Reason for leaving:
Description of work & responsibilities:		
Name of employer:	Telephone No.	Starting Salary:
Employer Address:	Start Date:	Ending Salary:
. ,	End Date:	,
Name of Immediate Supervisor and Title:	Your Job Title:	Reason for leaving:
Description of work & responsibilities:		

Please explain any gaps in	n employment of over 30 days			
Have you ever been dism	issed/terminated or non-renewe	ed from a previous em	ployer? 🗆 Yes 🗀 N	 10
If yes, please explain:				
Have you ever been aske	d to resign from a previous empl	oyer?	□ _{Yes} □ _N	10
If yes, please explain:				
Have you ever resigned fi	rom a position rather than face d	isciplinary action?	□Yes □N	10
If yes, please explain:				
Personal References		DO NOT list relati	ves or previous superv	isors
Name:	Occupation:		Years Known:	
Address:	City:	State:	Zip Code:	
Email Address:	F	Phone No.:		
Name:	Occupation:		Years Known:	
Address:	City:	State:	Zip Code:	
Email Address:	t	Phone No.:		
Name:	Occupation:		Years Known:	
Address:	City:	State:	Zip Code:	
Email Address:		Phone No.:		
Name:	Occupation:		Years Known:	
Address:	City:	State:	Zip Code:	
Email Address:		Phone No.:		

All complete applications will be kept in an active file for one year from date of signature or until confirmation has been received that you have been employed and have a signed contract on file.

Residence History - List all residences for at least the last five years for low risk positions and seven years for high risk positions.				
Present Address		From	То	
City	State	Reservation	Country	
2. Former Address		From	То	
City	State	Reservation	Country	
3. Former Address		From	То	
City	State	Reservation	Country	
4. Former Address		From	То	
City	State	Reservation	Country	
5. Former Address		From	То	
City	State	Reservation	Country	

CRIMINAL ACTIVITY REPORT

The following questions relate to Local (Navajo Nation), City, State, and Federal Law Enforcement Agencies.

For purposes of this form, the term "conviction" means the final judgment on a verdict or a finding of guilty, plea of guilty or a plea of nolo contendere in any court of competent jurisdiction in a criminal case, including, but not limited to city, state, county, tribal, or federal courts. For purposes of this form you must answer "yes" to the questions even if an appeal is pending or could be taken and even if the conviction was subsequently dismissed, set aside, deferred, vacated or expunged.

Na	me:			Social Securi	ty No.:	
	First	Middle	Last			
Lis	t any former name(s):					
1.	In the last five (5) years, probation, or been on probation, or been on probably or note contend explanation of the viola address of court involved	parole for any of ere (no contest tion, a statemer	fense(s)? Includ). <i>Leave out tr</i> It of the circum	de all offenses whe caffic fines of less stances that led to	re you have been f than $$150.00$. If "the occurrence, lo	ound guilty, pled YES" provide an
2.	Have you been arrested under the influence and of the circumstances th of the police report and	l like or similar o at led to the occ	offenses? If "YES urrence, locatio	6" provide an expla	nation of the viola	tion, a statement
3.	Have you ever been for felonious offense, or ar crimes of violence; sexulor offenses committed circumstances that led to police report and any results.	y of two or more all assault, mole against children to the occurrence.	e misdemeano estation, exploit ? If "YES" provi e, location, nan	r offenses under Fo ation, contact or p de an explanation	ederal, State, or trostitution; crimes of the violation, a	ibal law involving against persons statement of the
4.	In the last five (5) years, substance includes injecting drug or controlled subs	cting, snorting, i			g with, or otherwis	
					Yes	☐ No
5.	Have you been convicte of the violation, staten address of the court inv	nent regarding t	he circumstan	ces which led to t	he occurrence, loc	•
					☐ Ves	No

	student loans and home mortgage loans. If yes, provide the circumstances w type, length, amount and when the delinquency first began. Also describe any or repay the debt. Include copy of any payments or payment arrangements.		•
	e this space to provide all required information in detail for any questions you estionnaire. If needed, you may use a separate sheet of paper.	may have answ	vered "Yes" on this
wh wil or	ertify that my response to the above questions is true, complete and correct and nich is punishable by fine or imprisonment, and that I have received notice that II be conducted as a condition of employment. I understand that a false or fratem on any part of this application or its attachments may be grounds for notice I begin work.	a criminal histo udulent answe	ory records check r to any question

Applicant Screening Questionnaire Indian Children Protection Requirements

Name:	Social Security Number:
NOTIFICATION OF REQU	UIREMENTS
Section 231 of the Crime Control Act of 1990, Public Law 101-requires that employment applications for federal child care po a criminal record check will be conducted as a condition of employment, Public Law 101-630 (codified in 25 United States Cod as a condition of employment for positions in the Department control over Indian children. Further, it is required to ask the form	sitions have applicants sign a receipt of notice that ployment. Section 408 of the Miscellaneous Indian le §3207), requires a criminal history records check t of Interior that involves regular contact with or
Have you ever been arrested, found guilty of, or entered a pleat felonious offense, or any of two or more misdemeanor offent crimes of violence; sexual assault, molestation, exploitation, person; or offenses committed against children.	ses under Federal, State, or tribal law involving
If "yes" please provide the date, explanation of the violation, di occurrence, and the name and address of the arresting police d	•
I certify that my response to the above questions is made unde imprisonment, and that I have received notice that a criminal condition of employment. I understand my right to obtain a copy agency and my right to challenge the accuracy and completene	history records check will be conducted and is a of any criminal history report from the originating
Applicant's Signature:	Date:

AUTHORIZATION TO RELEASE INFORMATION

I	, hereby autho	rize and consent to any investigator, or other
investigation, to obtain ar management agents, em information may include,	ny information relating to my ac ployers, criminal justice agenci but is not limited to, my acader	chool, Inc., who is conducting my background tivities from individuals, schools, residential es, or other sources of information. This mic, residential, achievement, performance, I history record information, whether or not
Rock Community School, Ir information about me fro assignment to, or retention	nc., who is conducting my backgrom criminal justice agencies for t	ner duly accredited representative at Rough ound investigation, to request criminal record he purpose of determining my eligibility for dren. I understand that I may request a copy
release such information		r sources of information pertaining to me to or, or other duly accredited representative the contrary.
official use by Rough Rock	•	ustodians and sources of information is for for the purpose of determining my suitability
Community School, Inc. at representatives and agent losses, costs and expenses and criminal history checks. I forever release, fully disformer employer or educagent thereof, that furnish	nd their respective officers, emp is from any and all claims, causes s of any nature related directly or s and using and relying on any inf scharge, and agree to indemnify ational institution, and any offices hes written or verbal information ility, damages, losses, costs and	fy, defend and hold harmless Rough Rock ployees, School Board members, volunteers, so of action, responsibility, liability, damages, rindirectly to performing such investigations formation obtained there from. Additionally, defend and hold harmless any current or cer, employee, volunteer, representative or about me from any and all claims, causes of expenses of any nature related directly or
Copies or facsimiles of th signed by me.	is authorization that show my s	ignature are as valid as the original release
Full name	 Signature	Social Security #

CONSENT TO CONDUCT BACKGROUND INVESTIGATIONS, CRIMINAL BACKGROUND CHECK AND RELEASE

l,	_ [Applicant's name], have applied for employment with Rough Rock Community
School (RRCS), to work as a	[Job Title].

Employees at RRCS are subject to the following federal laws:

- 1. The <u>Indian Child Protection and Family Violence Prevention Act</u> (P.L. 101-630) states that all Indian tribes which are contract or grant recipients under the Indian Self-Determination and Education Assistance Act or Tribally Controlled Schools Act of 1988 are subject to investigation and minimum standard requirements, and that character investigations are a federally mandated requirement.
- 2. The <u>Crime Control Act of 1990, Child Care Worker, Employee Background Checks</u> (P.L. 101-647) states that each agency of the Federal Government and every facility operated by the Federal government (or operated under contract with the federal government), that hires (or contracts for hire) individuals involved with providing child care services to children under the age of 18 shall assure that all existing and newly hired employees undergo a Criminal History Background check.

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, RRCS will reject my application; (2) if any false information is furnished, I will be ineligible for any consideration for employment and may be subject to criminal prosecution; and (3) if I am employed by RRCS 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.

I understand that in order for RRCS to determine my eligibility, qualifications and suitability for employment, RRCS will conduct a background investigation before 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, reason for not rehiring (if applicable), and similar information.

Personnel employed by RRCS shall certify that they are not awaiting trial on and have never been convicted of or admitted in open court or pursuant to a plea agreement committing any of the criminal offenses listed in RRCS Policy 2.11 or similar offenses in any other jurisdiction. It is a violation of RRCS Policy 2.20 for a person seeking employment with RRCS to fail to give notice of conviction of a dangerous crime against children such as those listed in RRCS' Policy 2.11.

Employment with RRCS is conditional and rests upon (a) satisfactory pre-employment reference checks, (b) submission of a valid Arizona Department of Public Safety Fingerprint Clearance Card, (c) a criminal background check conducted by the Navajo Nation, (d) a background check conducted by a security clearance company chosen by RRCS, (e) if applicable, an investigation of your driving record to be conducted by RRCS' insurance company, and is subject to (f) the policies and regulations of RRCS, (g) submitting documentary proof of authorization to work in the United States, (h) and, if required, proof of appropriate certification/licensing and/or Indian Blood. Employment will not be finalized until all requirements have been met to the satisfaction

of RRCS. Misrepresentation or omission of pertinent facts may be just cause for termination. P	arties providing
this information will be released from any liability in connection with reference and backgroun	nd checks made
by RRCS.	

Under penalty of prosecution and termination, I hereby swear and certify that the information presented on this application is true, accurate and complete. I authorize the investigation of all statements contained herein and understand that any document relevant to this information may be reviewed by agents of RRCS.

Dated this	day of	, 20	<u></u> .
	Applicant's Sign	nature	_