

EMPLOYMENT APPLICATION



MORA INDEPENDENT SCHOOL DISTRICT

P.O. Box 179
10 Ranger Road-Highway 518
Mora, New Mexico 87732
Phone (575) 387-3100 FAX (575) 387-3111
<https://www.mora.k12.nm.us>

Reset Form

The Mora Independent School District is an equal opportunity employer, and does not discriminate on the basis of race, sex, color, national origin, religion, or disability. Please let us know if you require an accommodation to allow you to complete the application form, or for any other aspect of the application process. You must complete this application in full and provide **all** information requested. If you do not have all the requested information with you, take the application with you and return it completed at a later date. *An incomplete application will not be considered.*

Position(s) applied for _____ **Date of application** ___/___/___

Date of availability _____

Name _____ **Social Security #** _____ - _____ - _____

Address _____ **Telephone #** _____

Mobile/Beeper/Other # _____ **E-Mail Address** _____

Emergency Contact Name _____ **Telephone #** _____

I have been known by the following other names: _____

Have you previously been employed with the District? Yes No If yes, Position: _____

Dates: _____

Have you previously applied for employment with the District? Yes No If yes, Date: _____

Are any of your relatives employed by the District? Yes No If yes,

Name(s): _____

Are any of your relatives school board members of the District? Yes No If yes,

Name(s): _____

[ANY AREA SHOULD BE CONTINUED ON SEPARATE SHEET IF NECESSARY]

I. EDUCATION

School (include City & State)	Years Completed	Completed
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Certification _____ <input type="checkbox"/> Degree _____ Major/Minor _____ <input type="checkbox"/> Other _____
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Certification _____ <input type="checkbox"/> Degree _____ Major/Minor _____ <input type="checkbox"/> Other _____
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Certification _____ <input type="checkbox"/> Degree _____ Major/Minor _____ <input type="checkbox"/> Other _____

II. LANGUAGE SKILLS [other than English]

Language	Speak	Yes	No	Read	Yes	No	Write	Yes	No
	Speak	Yes	<input type="checkbox"/> No	Read	Yes	No	Write	Yes	No
	Speak	Yes	<input type="checkbox"/> No	Read	Yes	No	Write	Yes	No

III. CURRENT CERTIFICATIONS/LICENSES

Type of License or Certification	State	Certificate/License No.

IV. EMPLOYMENT HISTORY

Note to Applicant: Include all employers since high school. Account for any gaps in employment history – e.g., if attending school, identify school and dates; if self-employed, give name and address of business and name and telephone number of business reference; if unemployed, give your address and telephone number during period of unemployment.

Employer Name, Address and Telephone Number	Dates of Employment	Position(s) Held	Immediate Supervisor	Reason(s) for Leaving (please be specific)	Summarize the type of work performed and job responsibilities

V. APPLICANT STATEMENT

To the Applicant:

Most positions with the District involve contact with our student population. You must provide the information requested below to help us evaluate your suitability to perform in this capacity. *As with the rest of this application, any misrepresentation or omission of fact may be grounds for disqualification or discharge, regardless of when the misrepresentation or omission is discovered.*

Any affirmative answer provided by you on this insert is NOT an automatic bar to employment. The District will consider the nature of any alleged conduct underlying an affirmative response, the date of the alleged conduct in question, your intervening conduct, and the relationship between the alleged conduct underlying the affirmative response and the position for which you are applying.

I, _____, being an applicant for, or having been offered, a position with the District, certify that this document is true, accurate, and full disclosure of my professional background history.

SECTION A (Please check the appropriate “yes” or “no” box for the following questions)

1.	Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer or if you offered a resignation, your previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Have you ever been reprimanded for misconduct? Have you ever been disciplined for misconduct? Have you ever been discharged for misconduct? Have you ever resigned, or been asked to resign, from a prior position for misconduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Have you ever resigned from a prior position without being asked, but under circumstances involving your employer’s investigation of inappropriate sexual contact with another person? Or involving your employer’s investigation for sexual abuse of another person?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

NOTE: *If you have answered yes to any of the questions above, please attach sheet(s) explaining in detail. Include the date of the misconduct in question and sign and date each sheet in the upper right corner.*

- I understand and agree that any offer of employment that I may receive, or have received, from the District is conditioned upon the district’s receipt of information pursuant to a check of my professional history. I further understand and agree that I may be terminated by the district immediately if any information contained in this affidavit is inaccurate or if any information received by the District is inconsistent with any statement made by me on this affidavit.
- I authorize the District to check my employment history, including without limitation, evaluations, reference checks, and release of investigatory information possessed by any private or public employer of any state, local, or federal agency. In connection with any request for or provision of such information, I expressly waive any claims,

including without limitation defamation, emotional distress, invasion of privacy or interference with contractual relations that I might otherwise have against the District, its agents and officials, or any provider of such information.

- I understand that all terms of employment or offers of employment are conditional until the required employment investigation is complete. I have read this authorization and release of all claims, and I expressly agree to the terms set forth herein.
- I understand that my application is subject to work history and education history checks, and to reference investigations. Finalists will also be subject to a criminal background investigation, including mandatory fingerprinting, at the applicant's expense, as a condition of further consideration for employment.
- I understand all offers of employment are contingent upon the satisfactory completion of background investigations. Criminal convictions shall not automatically bar an applicant from obtaining employment with the District, but pursuant to the Criminal Offender Employment Act, NMSA 1978 §§ 28-2-4 and 28-2-5, may be a basis for refusing employment.
- I understand that the district does not accept unsolicited applications, letters of interest or resumes. All documents must be for a specifically posted vacancy. If I have interviewed for a position within the last ninety (90) days I may request to submit previously submitted documents for a new vacancy, however, I understand documents must be updated if changes have occurred and a new letter of interest must be submitted.
- This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the District is authorized to make any assurances to the contrary and that no implied or oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the District's Superintendent.
- I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

By my signature below, I affirm that the information provided on this application and on any accompanying resume, continuation sheets, and other documentation submitted in connection with my application, is true and complete to the best of my knowledge. I have also read and understand all of the foregoing conditions.

Applicant's Signature

Date

Printed Name of Applicant

AGREEMENT, AUTHORIZATION, WAIVER, AND RELEASE

I hereby certify that the information contained in this application is true, accurate and complete, to the best of my knowledge and belief. I understand and agree that any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of my application or for termination of my employment, regardless of when discovered. Failure to provide all or part of the information requested may result in the refusal of the Mora Independent School District to further consider my application.

I hereby authorize the District and its agents to investigate my work history and education history and to conduct personal inquiries. I understand that the District will send a copy of this Agreement and Authorization to each individual or entity from who it is seeking a reference or background information.

I hereby authorize the party receiving a copy of this signed form (including a photocopy or facsimile copy) to provide and release complete information as may be requested, and I hereby waive any claim of confidentiality I might have with regard to such information.

I hereby release any person or entity providing information or records in accordance with this Agreement, Authorization, Waiver, and Release from any and all claims or liability for compliance.

I AM ALSO WAIVING ANY RIGHT OF ACTION, CAUSE OF ACTION, OR OTHER MEANS OF REDRESS I MAY HAVE AGAINST ANY PERSON OR ENTITY SUPPLYING EMPLOYMENT-RELATED INFORMATION--INCLUDING BUT NOT LIMITED TO INFORMATION CONCERNING MY BACKGROUND, WORK HISTORY, AND DISCIPLINARY HISTORY--TO THE DISTRICT UNDER A GUARANTEE OF CONFIDENTIALITY.

I understand and agree that if I am considered as a finalist for, or if I am actually recommended for employment, I will submit to a criminal background investigation, including mandatory fingerprinting, at my expense, to determine my acceptability for employment. Criminal convictions shall not automatically bar an applicant from obtaining employment with the District, but pursuant to the Criminal Offender Employment Act of New Mexico (NMSA 1978, §28-2-1, et seq.), such convictions may be the basis for refusing employment. I understand that any employment offer is contingent upon, **and expressly subject to**, the satisfactory completion of all background checks. **I further understand and agree that if the results of any such background check are not satisfactory in the sole discretion of the District, that the District may provide me written notice of the withdrawal of its offer, and that I shall be entitled to no further process or procedure.**

I understand that the information contained in this application and the information submitted by me or obtained pursuant to this agreement and authorization is confidential, for the exclusive use of the District and its agents for employment decisions, and will not be transferred to any other entity without my written authorization unless required to be disclosed upon request by either New Mexico or federal law.

Applicant's Signature

Date

Printed Name of Applicant

State of _____)
)ss.
County of _____)

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission Expires
(SEAL)

Notary Public

MORA INDEPENDENT SCHOOL DISTRICT

PO BOX 179, MORA, NM 87732

CRIMINAL HISTORY AFFIDAVIT

Applicant/New Employee/Volunteer

Dear Applicant: Most positions with the Mora Independent School District (MISD) involve contact with our student population. We ask that you provide the information on this form to help us evaluate your suitability to perform in this capacity. Pursuant to New State Statutes, all applicants for employment are expected to provide us with this information. This insert is part of the application itself and any misrepresentation or omission of fact may be grounds for disqualification from further consideration or for termination of employment regardless of when the misrepresentation or omission is discovered.

I, _____, certify that this document is a true, accurate, and full disclosure of my personal and professional background history.

The conviction of a crime or any affirmative answer provided by you on this insert in NOT an automatic bar to employment. The MISD will consider the nature of any conviction or alleged conduct underlying the affirmative response and the position for which you are applying.

SECTION I (Check ONE of the following two statements)

_____ I certify that I am not currently being charged with, I am not currently indicted on, I am not awaiting trial on, I have never been convicted of, and/or have never been admitted committing, any of the offenses described in this document in this state or any similar offenses in any other jurisdiction and that I have never been put on, and am not currently on probation in this jurisdiction or any other jurisdiction.

OR

_____ I certify that the statements I attach to this form (see NOTE at bottom of Section II) give a true, accurate, and full account of any offenses described in this document that I may have committed, been convicted of, been indicted for, or been charged with in this state or any other jurisdiction.

SECTION II (Please check yes or no for the following questions)

1.	Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer or have you offered a resignation to your previous employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position for misconduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Have you ever been asked to resign from a prior position for other than performance reasons?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Have you ever resigned from a prior position without being asked, but under circumstances involving your employer's investigation of sexual contact with another person, of sexual abuse of another person, of mishandling of funds, or of criminal conduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Have you ever resigned from a prior position without being asked, but under circumstances involving your employer's investigation of misconduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Have you ever been convicted of a sex offense as a juvenile or an adult?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Have you ever been convicted of a drug-related offense as a juvenile or an adult?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Have you ever been charged with, or investigated for sexual abuse of another person as a juvenile or as an adult?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	Have you ever been charged with, pled guilty or no contest (<i>No lo contendere</i>) to, or been convicted of any crime involving sexual abuse of any person or any other crime as a juvenile or as an adult?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.	Have you a) ever been convicted of a crime, other than a minor traffic offense, or b) ever entered a plea of guilty or a plea of no contest or has any court ever deferred further proceedings without entering a finding of guilty and placed you on probation or in a public service or education program for any crime than a minor traffic offense as a juvenile or as an adult?	<input type="checkbox"/> Yes <input type="checkbox"/> No

NOTE: If you have answered yes to any of the previous ten questions, please attach sheet(s) explaining in detail. Include the date of the charge, the court action, your attorney's name, the offense in question, and the address of the court involved, and sign and date each sheet in the upper right corner.

The crimes referred to in this document include but are not limited to:

1. Sexual abuse of a minor
2. Incest
3. Sexual assault
4. Sexual exploitation of a minor
5. Contributing to the delinquency of a minor
6. Distribution of marijuana, or controlled substances
7. Commercial sexual exploitation of a minor
8. Dangerous crime against a child or children
9. Child abuse
10. Molestation of a child
11. Sexual conduct with a minor
12. Aggravated assault of a minor
13. First or second-degree murder
14. Involuntary/Voluntary manslaughter
15. Kidnapping
16. Arson
17. Burglary or Robbery
18. D.U.I./D.W.I.
19. Criminal Sexual Penetration
20. Enticement of a Child
21. Child Pornography
22. Criminal Sexual Contact
23. Criminal Sexual Contact with a Minor
24. Indecent Exposure
25. Distribution of a controlled substance to a minor
26. Delivery to a minor of drug paraphernalia
27. Aggravated incest exposure
28. Aggravated assault on a minor

I understand and agree that any offer of employment that I may receive, or have received, from the MISD is conditioned by law upon the district's receipt of information pursuant to a fingerprint-based check of my personal and professional history. I further understand and agree that I may be terminated by the district immediately if any information contained in this affidavit is inaccurate or if any information received by the MISD is inconsistent with any statement made by me on this affidavit.

I authorize the MISD to check my personal and employment history, including without limitation, evaluations, criminal arrest and conviction records for both juvenile and adult, reference checks, and release of investigatory information possessed by any private or public employer of any state, local, or federal agency. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation defamation, emotional distress, invasion of privacy or interference with contractual relations that I might otherwise have against MISD, its agents and officials or any provider of such information.

I understand that all terms of employment, offer of employment, or volunteer status are conditional until the required background investigation is complete. I have read this authorization and release of all claims, and I expressly agree to the terms set forth herein.

***NOTE: THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC**

Signature _____ Date _____

Printed Name _____ Social Security Number _____

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public _____

My Commission Expires _____

(SEAL)