



MORA INDEPENDENT SCHOOL DISTRICT

VOLUNTEER APPLICATION

Name: _____ Date: _____

Address: _____ Zip: _____

Phone numbers: Cell: _____ Home: _____ Work: _____

Email Address: _____

Type of Volunteer Work Preferred:

- Office Work
- Cafeteria
- Custodial/Maintenance
- Classroom
- Fine Arts
- Tutor
- Coach (specify Sport) _____
- Other (Specify) _____

Locations (s): _____

Grade (s): _____

Supervisor _____

Volunteer Hours Requested _____

Do you have any children enrolled in the District? Yes No If yes, Please list name(s) and grade (s)

Why are you volunteering in the schools?

References:

	Name	Relationship	Address	Phone
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1. _____
2. _____
3. _____

Volunteer Signature: _____ **Date:** _____

FOR BUSINESS USE ONLY

Head Coach's approval Yes No Signature _____ Date _____

Pledge and Agreement if applicable executed on _____

Satisfactory References Yes No Background Check Cleared Yes No License Posted yes no

Athletic Director's Approval Yes No Signature _____ Date _____

Superintendent's Approval Yes No Signature _____ Date _____

MORA INDEPENDENT SCHOOLS P.O. 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’s 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 the 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 is 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 and other jurisdiction.

OR

I certify 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, be 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, or sexual abuse of another person, or 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 and 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 (No lo contendere) 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 ever been convicted of a crime, other than minor traffic offense, or 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 | 15. Kidnapping |
| 2. Incest | 16. Arson |
| 3. Sexual assault | 17. Burglary or Robbery |
| 4. Sexual Exploitation of a minor | 18. D.U.I./D.W.I |
| 5. Contributing to the delinquency of a minor | 19. Criminal Sexual Penetration |
| 6. Distribution of marijuana, or a controlled substance | 20. Enticement of a Child |
| 7. Commercial sexual exploitation of a minor | 21. Child Pornography |
| 8. Dangerous crime against a child or children | 22. Criminal Sexual Contact |
| 9. Child abuse | 23. Criminal Sexual Contact with a minor |
| 10. Molestation of a child | 24. Indecent Exposure |
| 11. Sexual conduct with a minor | 25. Distribution of a controlled substance to a minor |
| 12. Aggravated assault of a minor | 26. Delivery to minor of drug paraphernalia |
| 13. First or second-degree murder | 27. Aggravated indecent exposure |
| 14. Involuntary/Voluntary manslaughter | 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 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 passed 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)

MORA INDEPENDENT SCHOOL DISTRICT
P.O. BOX 179, HIGHWAY 518 – 10 RANGER RD
MORA, NM 87732
PHONE: (575) 387-3101 FAX: (575) 387-3111

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 of 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 part receiving a copy of this signed form (including a photocopy of 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 BACK GROUND, 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 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 Signature

Date

Printed Name of Applicant

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

State of: _____

County of: _____

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

Notary Public _____

(SEAL)

My Commission Expires _____