



Tséch'ízhí Diné Bi'ólta'
ROUGH ROCK COMMUNITY SCHOOL, INC.

SCHOOL BOARD

Perry Begay, President
Crystalynne Curley, Vice President
Rena Mann, Member
Ronald Gishey, Member

Catherine Begay, Principal K-12

Roseyphena Sells, Interim Superintendent

ADMINISTRATIVE/CERTIFIED 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 Education Certification
5. Current Arizona Dept. of Public Safety Fingerprint Clearance Card
6. \$45.00 Money Order payable to: Personnel Security Consultants for FBI Check.
7. Current Navajo Nation Background Check *(5 years)*
8. Arizona Motor Vehicle Report *(5 years)*
9. Certificate of Indian Blood *(only to those whom it applies)*
10. Copy of High School Diploma or GED Certificate
11. College/University Degree and Transcripts
12. 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



P.O. Box 680
Chinle, AZ 86503

www.roughrock.k12.az.us

P: 928.728.3701/3705/3703
F: 928.728.3617/3502



ROUGH ROCK COMMUNITY SCHOOL, INC.

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

CERTIFIED/ADMINISTRATIVE

EMPLOYMENT APPLICATION

Date: _____

Please complete entire application in full. Do not use "refer to resume" or 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, color, religion, national origin, gender, disability, age or any other status protected by law, with the exceptions provided to "Indians" under federal law, the preferences set forth under the Navajo Preference in Employment Act, and as Navajo and/or federal law may otherwise direct.	Date Received: _____ Received by: _____
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? <i>(If not, you may be required to provide documentation.)</i> [] Yes [] No	
If hired are you able to provide documentation verifying you are legal to work in the United States? [] Yes [] No	
Can you perform the essential functions of the job for which you are applying for without reasonable accommodations? [] Yes [] No	
Do you have a valid driver's license? [] Yes Driver License No. _____ Issuing State _____ [] No	

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

If yes, indicate when and what position you held _____

What Languages other than English, are you fluent with (read & write)? _____

IF YOU DO NOT POSSESS AN ARIZONA CERTIFICATION PLEASE CONTACT:

Arizona Department of Education – Certification Unit

Phoenix Office: 1535 W. Jefferson, Phoenix, AZ 85007 Telephone No.: (602) 542-4367

MILITARY PREFERENCEAre 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: _____ From: _____ To: _____ Type 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 Number: _____

List any relative(s) currently employed with Rough Rock Community School, Inc.

NAME	Relationship	Department

What certification(s) do you hold?

Certificate	State	Date Issued	Expiration

What endorsement(s) do you hold?

Endorsement	State	Date Issued	Expiration

Do you have an Arizona Department of Public Safety fingerprint clearance card? Yes ☐ No ☐

IVP#: _____ Expiration: _____ If no, date applied: _____

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						

PROFESSIONAL EXPERIENCE

SUBSTITUTE TEACHING			
School/Address	Principal/Supervisor	Phone No.	School Year

STUDENT TEACHING					
School Year Fall/Spring	Grade Level	Subject	Name of Mentor Teacher	School/Address	Hours Earned
Name of College/University			Name of Supervisor	Contact Number	

List special skills, training and computer software or technology you are familiar with as it relates to the position for which you are applying for.

List all employment in chronological order with most recent first. RRCS will contact your employers for reference check.
(Don't put "see resume")

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

Please explain any gaps in employment of over 30 days _____

Have you ever been dismissed/terminated or non-renewed from a previous employer? Yes ☐ No ☐

If yes, please explain: _____

Have you ever been asked to resign from a previous employer? Yes ☐ No ☐

If yes, please explain: _____

Have you ever resigned from a position rather than face disciplinary action and/or non-renewal? Yes ☐ No ☐

If yes, please explain: _____

Personal References

DO NOT list relatives or previous supervisors

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.: _____

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.

1. Present Address

From

To

City	State	Reservation	Country

2. Former Address		From	To
City	State	Reservation	Country

3. Former Address		From	To
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.

Name: _____ Social Security No.: _____
 First Middle Last

List any former name(s): _____

1. In the last 5 years, have you been arrested for, charged with, or convicted of, been imprisoned, been on probation, or been on parole for any offense(s)? Include all offenses where you have been found guilty, pled guilty or nolo contendere (no contest). *Leave out traffic fines of less than \$150.00.*
☐ Yes ☐ No
2. Have you ever been arrested or convicted of a crime involving a child, violence, sexual assault, sexual molestation, sexual exploitation, sexual contact or prostitution, or crimes against persons?
☐ Yes ☐ No

3. Have you been arrested or convicted of a crime involving drugs and alcohol including but not limited to driving under the influence and like or similar offenses? ☐ Yes ☐ No
4. Have you ever been found guilty of, or entered a plea of nolo contendere (no contest) or guilty to, any felonious offense, or any of two or more misdemeanor offenses under Federal, State, or tribal law involving crimes of violence; sexual assault, molestation, exploitation, contact or prostitution; crimes against persons; or offenses committed against children? ☐ Yes ☐ No
5. In the past 5 years have you illegally used any controlled substance, for example, marijuana, cocaine, crack cocaine, hashish, narcotics (opium, morphine, codeine, heroin, etc.), amphetamines, depressants (barbiturates, methaqualone, tranquilizers, etc.), hallucinogenics (LSD, PCP, etc.), or illegally used prescription drugs? ☐ Yes ☐ No
6. In the past 5 years have you been involved in the illegal purchase, manufacture, trafficking, production, transfer, shipping, receiving, or sale of any narcotic, depressant, stimulant, hallucinogen, or cannabis, for your own intended profit or that of another? ☐ Yes ☐ No
7. Are you awaiting trial for any crime or offense excluding minor traffic violations not involving any allegations of drugs or alcohol impairment? ☐ Yes ☐ No
8. Have you been convicted by a military court-martial in the past 5 years? ☐ Yes ☐ No
9. Are you now under charges for any violation of the law? ☐ Yes ☐ No
10. Have you ever been arrested for or charged with a crime involving a child? ☐ Yes ☐ No
11. Have you ever been convicted of, admitted committing a sex or drug related offense? ☐ Yes ☐ No

For all questions, provide all required information in detail in the space below if need to you may use a separate sheet of paper.

1. Type of Charge/Conviction		Date of Charge	Date of Court Conviction
City	State	Amount of fine	Length of jail term
Factual details or other remarks		Length and terms of court outcome(s) (Probation, Parole, etc.)	

2. Type of Charge/Conviction	Date of Charge	Date of Court Conviction
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City	State	Amount of fine	Length of jail term
Factual details or other remarks		Length and terms of court outcome(s) (Probation, Parole, etc.)	

3. Type of Charge/Conviction		Date of Charge	Date of Court Conviction
City	State	Amount of fine	Length of jail term
Factual details or other remarks		Length and terms of court outcome(s) (Probation, Parole, etc.)	

Use this space to provide explanations to any questions you may have answered "Yes" on this questionnaire.

I declare, certify, verify and state under penalty of perjury under the laws of the United States of America that my statements and all information on this application, and any attachments to it, are true, complete, and correct. I understand that a false or fraudulent answer to any question or item on any part of this application or its attachments may be ground for not hiring me, or firing me after I begin work. I understand that if found guilty of perjury, I shall, except as otherwise expressly provided by law, be fined under Federal law or imprisoned not more than five years, or both.

I certify that my responses to this entire employment application is made in good faith, and that I have received notice that a criminal history records check will be conducted and is a condition of my employment.

Signature of Applicant: _____

Date: _____

Applicant Screening Questionnaire

Indian Children Protection Requirements

Name: _____

Social Security Number: _____

NOTIFICATION OF REQUIREMENTS

Section 231 of the Crime Control Act of 1990, Public Law 101-647 (codified in 42 United States Code § 13041), requires that employment applications for federal child care positions have applicants sign a receipt of notice that a criminal record check will be conducted as a condition of employment. Further, it is required to ask the following:

Have you ever been arrested for or charged with a crime involving a child? ☐ Yes ☐ No

If "yes" please provide the date, explanation of the violation, disposition of the arrest(s) or charge(s), place of occurrence, and the name and address of the arresting police department or court involved.

Section 408 of the Miscellaneous Indian Legislation, Public Law 101-630 (codified in 25 United States Code §3207), requires a criminal history records check as a condition of employment for positions in the Department of Interior that involves regular contact with or control over Indian children. Further, it is required to ask the following:

Have you ever been arrested, found guilty of, or entered a plea of nolo contendere (no contest) or guilty to, any felonious offense, or any of two or more misdemeanor offenses under Federal, State, or tribal law involving crimes of violence; sexual assault, molestation, exploitation, contact or prostitution; crimes against another person; or offenses committed against children. ☐ Yes ☐ No

If "yes" please provide the date, explanation of the violation, disposition of the arrest(s) or charge(s), place of occurrence, and the name and address of the arresting police department or court involved.

I declare, certify, verify and state under penalty of perjury under the laws of the United States of America that the foregoing, my response to the above questions, and all information provided in this employment application are true and correct. I understand I do not have the right to obtain a copy of any criminal history report made available to Rough Rock Community Schools, Inc. but, I have a right to challenge the accuracy and completeness of any information contained in the report. I understand that If found guilty of perjury, I shall, except as otherwise expressly provided by law, be fined under Federal law or imprisoned not more than five years, or both.

Applicant's Signature: _____

Date: _____

AUTHORIZATION TO RELEASE INFORMATION

I _____, hereby authorize and consent to any investigator, or other duly accredited representative of Rough Rock Community School, Inc., who is conducting my background investigation, to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, or other sources of information. This information may include, but is not limited to, my academic, residential, achievement, performance, attendance, disciplinary, employment history, and criminal history record information, whether or not specifically requested.

I further authorize and consent to any investigator, or other duly accredited representative at Rough Rock Community School, Inc., who is conducting my background investigation, to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for assignment to, or retention in a position working with children. I understand that I may request a copy of such records as may be available to me under the law.

I authorize and consent to custodians of records and other sources of information pertaining to me to release such information upon request of the investigator, or other duly accredited representative authorized above regardless of any previous agreement to the contrary.

I understand that the information released by records custodians and sources of information is for official use by Rough Rock Community School, Inc. and only for the purpose of determining my suitability for employment with Rough Rock Community School, Inc.

I forever release, fully discharge, and agree to indemnify, defend and hold harmless Rough Rock Community School, Inc. and their respective officers, employees, School Board members, volunteers, representatives and agents from any and all claims, causes of action, responsibility, liability, damages, losses, costs and expenses of any nature related directly or indirectly to performing such investigations and criminal history checks and using and relying on any information obtained there from. Additionally, **I forever release, fully discharge, and agree to indemnify, defend and hold harmless** any current or former employer or educational institution, and any officer, employee, volunteer, representative or agent thereof, that furnishes written or verbal information about me from any and all claims, causes of action, responsibility, liability, damages, losses, costs and expenses of any nature related directly or indirectly to furnishing such information.

Copies or facsimiles of this authorization that show my signature are as valid as the original release signed by me.

Full Name

Signature

Social Security

CONSENT AND WAIVER TO CONDUCT BACKGROUND CHECKS

I, _____ Date of Birth: ____ / ____ / ____ SSN: _____
(Print full Name)
residing at _____
have *Physical home address (NO PO Box Address)*

applied for employment with Rough Rock Community School, Inc., (hereinafter School). As indicated by my signature below I understand that the School will conduct a required background check of me through any or all of the following:

1. Federal Bureau of Investigations (F.B.I.)
2. The United States of America and any of its branches, federal agencies and/or departments;
3. The State of Arizona and any of its subdivisions, branches, agencies and/or departments;
4. The Navajo Nation and any of its subdivisions, branches, agencies and/or departments; and
5. Any private entity retained by the School to conduct such background checks.

I understand that the School will conduct these background checks to determine my criminal history, if any, and any other factors that may be relevant to my fitness for employment with the School.

As evident by my signature below I consent to any or all of the above noted entities providing all requested information and hereby waive and forever surrender any objection or claim I may have or acquire relative to the background checks or those providing information pursuant to the School's request. I further agree and direct that a copy of this request shall have the same force and effect as an original. This authorization is valid for a period of five (5) years from the date signed or upon the termination of my affiliation with Rough Rock Community School, Inc. whichever is sooner.

Applicant's Signature

Date