**Dzilth-Na-O-Dith-Hle Community Grant School**

35 Road 7585 Box 5003

Bloomfield, New Mexico 87413

Telephone: (505) 960-8928 ᵜ Fax: (505) 960-8929

Thank you for your interest in Dzilth-Na-O-Dith-Hle Community Grant School (DCGS). Procedures are

outlined below to assist you in the application process.

1. **APPLICATION FORM**

• The application form must be fully completed, even if a resume is submitted.

* Complete names, mailing addresses and telephone numbers of previous employers and references must be provided on the application form. Applications without this information will be returned.
* ***Any misrepresentations, falsifications, or material omissions provided by an applicant or employee in any of this information or data may result in DCGS exclusion of the individual from further consideration for employment or, if the person has been hired, termination of employment.***

*HOME OF THE MUSTANGS*

 • If you FAX a copy of the application form to the Human Resource Office, it is still necessary to submit the original application with your original signature.

 • Consideration for employment cannot be given until the fully completed application and required supporting materials are returned to the Human Resource Office.

 • DCGS cannot accept any type of personal photos for inclusion in an applicant’s file, including a copy of your driver’s license.

1. **TRANSCRIPTS (Licensed, Administrative, Paraprofessionals and Professional Non-Teaching Applicants)**

 • Applications must be accompanied by official transcripts from each college/university. The transcripts must show course work, hours and grades.

 • **Official transcripts must be on file upon recommendation for hire.** Official transcripts are transcripts sent by the applicable college/university, stamped or otherwise acknowledged as official by the college/university, and sent in a sealed envelope.

• It is the applicant's responsibility to ensure that the application form, transcripts, resume and a copy of required certificates are on file with the Human Resource office.

1. **LICENSURE**
* Teaching positions require applicants to be fully licensed by the New Mexico Public Education Department when applying.
* If applicable, submit a photocopy of all valid certificates required by the position to the Human Resource Office. Certificates must be properly recorded.
1. **RETENTION OF APPLICATIONS**

 • **All applications are kept only for the specific** **recruitment**. New applications are required for **each** subsequent opening.

 • It is suggested that applicants retain a copy of their application for future reference.

1. **BACKGROUND INVESTIGATION**

To continue to provide a safe environment for the children and employees of DCGS, any individual recommended for employment with DCGS will undergo a background investigation, prior to finalization of employment. The background investigation includes a criminal background check by the Navajo Nation Police Department, a background check conducted by a security clearance company chosen by DCGS, a review of the applicant’s driving record to be conducted by DCGS’s insurance company and upon results of confidential reference checks with current and former supervisors and personal references. Employment is conditional upon results of the background investigation and favorable adjudication.

Application for Employment

Dzilth-Na-O-Dith-Hle Community Grant School

35 Road 7585 Box 5003 • Bloomfield, NM 87413

Telephone: (505) 960-8928

 Fax: (505) 960-8929

(PLEASE PRINT)

|  |  |  |  |
| --- | --- | --- | --- |
| **Position Applying For:** |  | **Date of Application**   |  |
| **How did you learn about this position?**[ ]  Newspaper [ ]  Public posting [ ]  Internet [ ]  Referred by friend / relative [ ]  Other  |

|  |  |
| --- | --- |
| **First Name Middle Name Last Name**  | **Social Security Number** |
| **Other names which may appear on application materials, such as transcripts, licenses, certificates** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Permanent****Address** | ***Street*** | ***City*** | ***State*** | ***ZIP*** |
| **Mailing****Address** | ***Street or PO box number*** | ***City*** | ***State*** | ***ZIP*** |
| **Driver License****Number** |  | **Expiration****Date** |  | **State** |  |
| **Email Address** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Home**Telephone**Number** |  | WorkTelephone**Number** |  | CellularTelephoneNumber |  |
| May we contact you at work?**[ ]  Yes** **[ ]  No** If yes, best time to contact you |  |
| Do you have the legal right to accept employment in the United States? |  [ ]  **Yes** [ ]  **No** | Date available for work |  |

**TYPE OF LICENSURE (Complete if applying for teaching or administrative position)**

|  |  |  |  |
| --- | --- | --- | --- |
| **LICENSURE** | **Level** | **Endorsement** | **Expiration Date** |
| Education Administration PreK-12 |  |  |  |
| Elementary K-8 |  |  |  |
| Special Education PreK-12 |  |  |  |
| Educational Leader |  |  |  |
| School Counselor  |  |  |  |
| Library Media |  |  |  |
| Substitute Teacher |  |  |  |
| Other:  |  |  |  |

**GRADE LEVEL PREFERENCE** **[ ]  K** **[ ]  1st** **[ ]  2nd** **[ ]  3rd** **[ ]  4th** **[ ]  5th** **[ ]  6th** **[ ]  7th** **[ ]  8th**

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**INDIAN PREFERENCE** Dzilth-Na-O-Dith-Hle Community Grant School

|  |
| --- |
| If you claim Indian preference, you will be required to submit a copy of your verification of Indian blood upon commencement of employment. Are you claiming Indian Preference? [ ]  Yes [ ]  No |
| If yes, please indicate TRIBAL AFFILIATION |  | TRIBAL CENSUS # |  |

**DO ANY OF YOUR RELATIVES WORK FOR DCGS OR IS A GOVERNING BOARD MEMBER?**

|  |  |  |
| --- | --- | --- |
| (include father, mother, husband, wife, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half-brother, and half-sister) If YES, provide relative’s name, relationship and title of your relative(s). | **Yes**[ ]  | **No**[ ]  |
| **NAME** | **RELATIONSHIP** | **TITLE** |
|  |  |  |
|  |  |  |

**ADDITIONAL INFORMATION**

|  |  |
| --- | --- |
| Do you have a physical condition which may limit your ability to perform the job for which you are applying? |  **[ ] Yes [ ] No** |
| If you answered yes, will you need reasonable accommodation to perform the essential functions of the job for which you are applying?  |  **[ ] Yes [ ] No** |
| Will you relocate if the job requires it?  | **[ ]  Yes [ ]  No** | Will you work overtime if required? |  **[ ] Yes [ ] No** |
| Will you travel if job requires it?  | **[ ]  Yes [ ]  No** | Are you able to meet the attendance requirements of the position? |  **[ ] Yes [ ] No** |

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever been bonded? | **[ ]  Yes [ ]  No** | If you answered yes, for how much? | $  |
| When? |  | Where? |  |

**BACKGROUND INFORMATION**

|  |  |
| --- | --- |
| [ ]  **Yes**  [ ]  **No** | Are you presently being investigated or under a procedure to consider your discharge/termination for misconduct by your present employer? |
| [ ]  **Yes**  [ ]  **No** | 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? |
| [ ]  **Yes**  [ ]  **No** | Have you ever resigned from a prior position without being asked, but under the circumstances involving your employer’s investigation of criminal conduct? |
| [ ]  **Yes**  [ ]  **No** | Do you currently have any outstanding criminal charges, warrants of arrests or conditions of probation pending against you in New Mexico or in any other state? If yes, attach sheet explaining in detail. |
| [ ]  **Yes**  [ ]  **No** | Have you ever been charged or convicted of D.U.I., D.W.I., or Public Intoxication? If yes, attach sheet explaining in detail. |

**If any of the above statements have been answered “yes,” please explain (you may attach additional sheets of paper if necessary):**

|  |
| --- |
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**EDUCATIONAL BACKGROUND** Begin with where you received your high school diploma.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Institution** | **Name** | **City** | **State** | **Number of Years Completed** | **Major** | **Did you graduate?** | **Type of degree or diploma earned** |
| High School or GED |  |  |  |  | **N/A** |  |  |
| College or University |  |  |  |  |  |  |  |
| College or University |  |  |  |  |  |  |  |
| Graduate School |  |  |  |  |  |  |  |
| Trade School |  |  |  |  |  |  |  |

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**SKILLS / QUALITIES** Dzilth-Na-O-Dith-Hle Community Grant School

|  |  |  |
| --- | --- | --- |
| COMPUTER SKILLSName of Software or Program | Type of Work Produced | Years of Experience |
|  |  |  |
|  |  |  |
|  |  |  |
| WORK RELATED SKILLSSecretary, Carpentry, Plumber, Boiler, Electrical, Painter, Etc. | Type of Work Produced | Years of Experience |
|  |  |  |
|  |  |  |
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**MILITARY SERVICE**

Have you ever served in the Armed Forces? [ ]  Yes [ ]  No Branch of Service:

Dates of Service: From \_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_ Type of Discharge:

Job Related Training:

**EMPLOYMENT HISTORY**

Provide the following information for your past and current employers, assignments, internships or volunteer activities, starting with the most recent or current employer. Use additional sheets if necessary. Explain any gaps in employment, such as unemployment or attending school, in comments section below. **Employer information must be accurate and complete, such as address and phone number and dates of employment.**

|  |
| --- |
| **E M P L O Y M E N T** |
| Employer |  | Telephone |  |
| AddressCity, State |  | JobTitle |  |
| Hire date |  | Last day on job |  | Immediate supervisor |  |
| Salary Information | $Per year | $Per hour | May we contact for reference? **[ ]  Yes [ ]  No** |
| Summary of work performed: | Reason for leaving: |
| **E M P L O Y M E N T** |
| Employer |  | Telephone |  |
| AddressCity, State |  | JobTitle |  |
| Hire date |  | Last day on job |  | Immediate supervisor |  |
| Salary Information | $Per year | $Per hour | May we contact for reference? **[ ]  Yes [ ]  No** |
| Summary of work performed: | Reason for leaving: |

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**EMPLOYMENT HISTORY (continue)** Dzilth-Na-O-Dith-Hle Community Grant School

|  |
| --- |
| **E M P L O Y M E N T** |
| Employer |  | Telephone |  |
| AddressCity, State |  | Job Title |  |
| Hire date |  | Last day on job |  | Immediate supervisor |  |
| Salary Information | $Per year | $Per hour | May we contact for reference? **[ ]  Yes [ ]  No** |
| Summary of work performed: | Reason for leaving: |
| **E M P L O Y M E N T** |
| Employer |  | Telephone |  |
| AddressCity, State |  | Job Title |  |
| Hire date |  | Last day on job |  | Immediate supervisor |  |
| Salary Information | $Per year | $Per hour | May we contact for reference? **[ ]  Yes [ ]  No** |
| Summary of work performed: | Reason for leaving: |
| **E M P L O Y M E N T** |
| Employer |  | Telephone |  |
| AddressCity, State |  | Job Title |  |
| Hire date |  | Last day on job |  | Immediate supervisor |  |
| Salary Information | $Per year | $Per hour | May we contact for reference? **[ ]  Yes [ ]  No** |
| Summary of work performed: | Reason for leaving: |

**Explain any gaps of employment.**

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**LANGUAGES**

List any languages spoken other than English and check the boxes that best describes your skill level.

|  |  |
| --- | --- |
|  | [ ]  Speak some [ ]  Speak fluently [ ]  Read [ ]  Write |
|  | [ ]  Speak some [ ]  Speak fluently [ ]  Read [ ]  Write |

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**REFERENCES** Dzilth-Na-O-Dith-Hle Community Grant School

List three (3) SUPERVISORS current and former for the last 5 years.

**NOTE:** Please inform your former supervisor and personal references we will be contacting them.

Provide current working phone numbers.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Title** | **From Mo/Yr** | **To Mo/Yr** | **Mailing Address** | **City/State/ZIP** | **Phone numbers** |
| Supervisor:1. |  |  |  |  |  |  |
| Supervisor:2. |  |  |  |  |  |  |
| Supervisor:3. |  |  |  |  |  |  |
| Supervisor4. |  |  |  |  |  |  |

Also list three (3) PERSONAL or PROFESSIONAL references not related to you and who know you well.

**Personal references are not family member, relatives, in-laws, or significant other.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Personal:1. |  |  |  |  |  |  |
| Personal:2. |  |  |  |  |  |  |
| Personal:3. |  |  |  |  |  |  |
| Personal:4. |  |  |  |  |  |  |

**ORIGINAL STATEMENT**

In your own handwriting, write a brief statement explaining why you chose to enter the education field.

|  |
| --- |
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**SUPPORTING DOCUMENTS**

Application must include:

1. Current resume & Interest Letter for teaching and administration position
2. Copy of high school diploma or GED certificate
3. Copy of transcripts from accredited colleges/universities (Official transcripts required upon hire)
4. Copies of degrees
5. Copy of New Mexico Public Education Department licensure for Teaching and Administrative positions

**Please make every effort to comply with the application requirements or**

**your employment application will be considered incomplete.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Print Name

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 Dzilth-Na-O-Dith-Hle Community Grant School

 Applicant Screening Questionnaire

Indian Children Protection Requirements

|  |  |  |  |
| --- | --- | --- | --- |
| NAME: |  | SOCIAL SECURITY NUMBER: |  |
| JOB TITLE APPLYING FOR: |  |

**Notification 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, if yes, provide the date, explanation of the violation, disposition of the arrest(s)

 or charge(s), place of occurrence and the name and addresses of the police

 department or court involved.

 [ ]  NO

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 involve regular contact with or control over Indian children. Further, it is required to ask the following:

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 If yes, provide the date, explanation of the violation, disposition of the arrest(s)

 or charge(s), place of occurrence and the name and addresses of the police

 department or court involved.

 [ ]  NO

I certify that my response of the above questions is made under Federal penalty of perjury, which is punishable by fine or imprisonment, and that I have received notice that a criminal history records check will be conducted and is a condition of employment. I understand my right to obtain a copy of any criminal history report made to Dzilth-Na-O-Dith-Hle Community Grant School and my rights to challenge the accuracy and completeness of any information contained in the report.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant Date

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Dzilth-Na-O-Dith-Hle Community Grant School

**CONSENT TO CONDUCT BACKGROUND INVESTIGATIONS, CRIMINAL BACKGROUND CHECK AND RELEASE**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Applicant’s name], have applied for employment with Dzilth-Na-O-Dith-Hle Community Grant School, Inc. (hereinafter “DCGS”) to work as a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Job Title]. I certify that, to the best of my knowledge and belief, all the information on and attached to this application is true, correct, complete and made in good faith. I understand any misrepresentations, falsifications or material omissions provided by an applicant or employee in any of this information or data may result in DCGS excluding the applicant from further consideration for employment, or if the applicant has been hired, may result in termination of employment.

I certify that I am not awaiting trial on and have never been convicted of, admitted in open court or pursuant to a plea agreement of committing any criminal offense in this state or any other jurisdiction for the following:

a) Sexual abuse of a minor b) Incest

c) First or second-degree murder d) Kidnapping

e) Arson f) Sexual assault

g) Sexual exploitation h Commercial sexual exploitation of a minor

i) Burglary (aggravated or simple) in the first-degree j) Burglary (aggravated or simple) in the second or third degree

k) Aggravated armed robbery l) Aggravated robbery or simple robbery

m) Child abuse n) Sexual conduct with a minor

o) Molestation of a child p) Voluntary manslaughter

q) Aggravated assault r) Assault/battery

s) Any offense involving contributing to the delinquency of a minor

t) Offenses involving sale, distribution, transportation, the offer to sell, transport or distribute, or conspiracy to sell, transport,

 distribute marijuana, dangerous or narcotic drugs, or controlled substances.

u) Misdemeanor offenses involving the possession or use of marijuana, dangerous drugs, or any other controlled substances

v) Felony offense involving contributing to the delinquency of a minor

w) Any dangerous crime against children as defined by New Mexico State

x) Exploitation of minor involving drug offenses

y) Fraud / Identity Theft

z) Embezzlement

I understand that for DCGS to determine my eligibility, qualifications, and suitability for employment, DCGS will conduct a background investigation and criminal background check. A background investigation may include asking any current or former employer or educational institution that I have attended or been employed by, about my education, training, experience, qualifications, job performance, professional conduct and evaluations, as well as confirming my dates of employment or enrollment, positions held, reasons for leaving employment, whether I could be re-hired, reasons for not re-hiring (if applicable) and similar information.

I understand and agree that a background investigation will include a criminal background check to determine if I have ever been convicted of or admitted in open court or pursuant to a plea agreement, any criminal offense in a federal, state and tribal jurisdiction involving misconduct with a minor or the other offenses in listed in DCGS Personnel Policy, Section 211.

I release, hold harmless, and agree not to sue or file a claim of any kind against any current or former employer, educational institution or any other applicable third party or officer or employee of such employer, educational institute or third party, who, in good faith, furnishes written or oral references requested by DCGS to complete its background investigation and criminal background check.

I hereby give my consent for any employer or educational institution to release information requested in connection with DCGS’ background investigation. Further, I hereby give my consent for any governmental entity, agency or private party to provide information relative to the criminal background check process.

Dated this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Applicant’s Name Applicant’s Signature

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