

APPLICATION INSTRUCTIONS: It is very important that all the following items be completely filled out and included in order to be considered as part of the application process:

1. A completed application form
2. An up-to-date resume
3. A current set of college or university transcripts.
4. Applicants claiming Indian Preference in Employment must provide proof of Tribal membership.
5. Arizona State Certification and endorsements

SUBMIT APPLICATION AND RELATED MATERIALS TO:

**PERSONNEL OFFICE
Tuba City Unified School District No. 15
P.O Box 67
Tuba City, AZ 86045**

APPLICATION FOR ADMINISTRATIVE POSITION

TUBA CITY UNIFIED SCHOOL DISTRICT

POST OFFICE BOX 67 - TUBA CITY, AZ 86045

(928) 283-1001

PERSONAL DATA:

| | | | |
|--|-------|--------|------------------------------|
| Last Name | First | Middle | Date |
| Address | | | Home Telephone |
| City, State, Zip | | | Business Telephone |
| Position Desired | | | Pay Expected |
| When will you be available to begin work? | | | Social Security # |
| Do you hold a valid Arizona State Credential? YES _____ NO _____ | | | If so, please attach a copy. |

ACADEMIC PREPARATION:

| School | Name & Location of School | Major/Minor | Yrs Attended | Graduation Year / Degree |
|---------------|---------------------------|-------------|--------------|--------------------------|
| Graduate | | | | |
| Undergraduate | | | | |
| High School | | | | |

PROFESSIONAL EXPERIENCE:

| | |
|--|---------------------------------|
| 1) Company Name | Telephone |
| Address | Employed (State month and year) |
| Name of Supervisor | Beginning and Ending Pay |
| State Job Title and Describe your work | Reason for Leaving |

| | |
|--|---------------------------------|
| 2) Company Name | Telephone |
| Address | Employed (State month and year) |
| Name of Supervisor | Beginning and Ending Pay |
| State Job Title and Describe your work | Reason for Leaving |

| | |
|--|---------------------------------|
| 3) Company Name | Telephone |
| Address | Employed (State month and year) |
| Name of Supervisor | Beginning and Ending Pay |
| State Job Title and Describe your work | Reason for Leaving |

| | |
|--|---------------------------------|
| 4) Company Name | Telephone |
| Address | Employed (State month and year) |
| Name of Supervisor | Beginning and Ending Pay |
| State Job Title and Describe your work | Reason for Leaving |

MILITARY:

| | |
|---|---------------------------|
| Did you serve in the U.S Armed Forces? Yes _____ No _____ | If "yes", in what Branch? |
| Job classification and description: | Dates of Service |

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS: List organizations to which you belong, leadership positions which you have held, other community or civic activities, and honors received.

REFERENCES: Give names and complete address of at least three references who are familiar with your personality, character and work habits. Do not include personal friends in your placement records.

| NAME | POSITION | ADDRESS | PHONE |
|------|----------|---------|-------|
| | | | |
| | | | |
| | | | |
| | | | |

CAUTION: Candidates are advised not to contact individual Board members unless requested to do so.

CERTIFICATION:

The facts set forth in the above application are true and complete. I hereby authorize Tuba City Unified School District No. 15, by and through its agents and employees, make any investigations of my personal, professional, and financial background as it deems necessary. I understand that this may include, but is not limited to, personal contacts with my neighbors, friends, business, business associates, employers and co-workers, and may include information as to my character, general reputation, personal characteristics, and mode of living. I further understand that the information contained in this applications maybe made available to the public. I hereby release Tuba City Unified School District No. 15 from any and all legal responsibility, liability, of whatsoever nature that may result from this authorization. Furthermore, I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant

Tuba City Unified School District No. 15 is an equal opportunity employer and has adopted Indian Preference in Employment.