



**PUEBLO OF LAGUNA
DEPARTMENT OF EDUCATION
PO Box 207, Laguna, NM 87026**

Phone: 505-552-6008, Fax: 505-552-6398, Email: humanresources@lagunaed.net

Notice: The Crime Control Act of 1990, Public Law 101-647 (codified in 42 United States Code 13041), requires that employment applications for child care positions have applicants sign a receipt of notice that a background check will be conducted as a condition of employment. Native American Preference. Applications submitted will be shredded 6 months after application date, if not hired.

PROFESSIONAL/CERTIFIED APPLICATION

1. LAST NAME		FIRST NAME	Mi. Intl.	DOB	ETHNICITY:
2. POSITION APPLYING FOR:			TEACHING LICENSE NUMBER (if applicable)		3. EMAIL ADDRESS:
4. MAILING ADDRESS		CITY	STATE:	ZIP CODE:	
CELL PHONE NUMBER:		5. DRIVER'S LICENSE NUMBER:		STATE :	EXPIRATION DATE:
ARE YOU A VETERAN? Circle one YES or NO	6. SOCIAL SECURITY NUMBER:			7. Are you authorized to work in the U.S.? ____ YES ____ NO	

8. EDUCATION: List the universities you have attended. Begin with the Most Recent	Dates Attended				Degree Received	Month/Yr.
	Month/Year From		Month/Year To			
	Month	Year	Month	Year		

9. List other teaching endorsements you possess.

10. TEACHING AND OTHER EMPLOYMENT EXPERIENCE (list your most recent experience first and work back)

A. Employer/School District and Address:	Position/Title Grade or Subject	Years Worked From To		Total Years	Reason For Leaving
Immediate Supervisor's Name:		Phone Number:			
B. Employer/School District and Address:	Position/Title Grade or Subject	Years Worked From To		Total Years	Reason For Leaving
Immediate Supervisor's Name:		Phone Number:			
C. Employer/School District and Address:	Position/Title Grade or Subject	Years Worked From To		Total Years	Reason For Leaving
Immediate Supervisor's Name:		Phone Number:			
D. Employer/School District and Address:	Position/Title Grade or Subject	Years Worked From To		Total Years	Reason For Leaving
Immediate Supervisor's Name:		Phone Number:			

APPLICATION CONTINUATION

E. Employer/School District and Address:	Position/Title Grade or Subject	Years Worked		Total Years	Reason For Leaving
		From	To		
Immediate Supervisor's Name:		Phone Number:			

11. PERSONAL REFERENCES: List three (3) people who know you well. They should be good friends, co-workers, peers, roommates, etc. and who have known you for at least five (5) years. Do not list relatives or anyone who is listed elsewhere on this application.

A. Name	Years Known	Telephone Number Person can be Reached:
Email Address:	From To	
B. Name	Years Known	Telephone Number Person can be Reached:
Email Address:	From To	
C. Name	Years Known	Telephone Number Person can be Reached:
Email Address:	From To	

12. Do you have relatives working for the Laguna Department of Education? _____ **YES** _____ **No**
 If you answered yes, please list their names:

13. GENERAL INFORMATION:
 A. If presently employed, may we contact you employer? _____ **YES** _____ **NO**

14. BACKGROUND INFORMATION: For all questions, provide all additional required information in the space provided or on item 15. Ensure full name and the last four digits of social security number is on any attachment to this application. If you answered yes, for items "A - G", please provide the date, explanation of the violation, disposition of the arrest or charge(s), place of occurrence, and the name and address of the police department or court involved. Use Item 15 below, if more space is needed.

A. Are you under any charges for any violation of the law? _____ **Yes** _____ **NO**

B. Have you ever been convicted with a crime involving a child? _____ **YES** _____ **NO**

C. 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 persons; or offenses committed against children? _____ **YES** _____ **NO**

D. During the last five years (5), have you been 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.

E. Have you ever been fired, asked to resign? _____ **YES** _____ **NO**
 If yes, when? _____ Where? _____
 Please provide of brief summary:

F. Why do you desire to leave your current position?

G. In the last 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?

15. Use this space to provide explanations to any questions on this application.

I authorize the Pueblo of Laguna Department of Education to obtain any record of criminal history with the understanding that such information held in confidence and used solely for the purpose of evaluating my application. I certify that my responses to these questions are made under the Federal penalty of perjury, which is punishable by fines or imprisonment, and that I have received notice that a criminal check will be conducted. I understand my right to challenge the accuracy and completeness of any information contained in the report. I affirm that all the information contained in this application is true and complete and that any misrepresentation, falsification or omission shall be cause for dismissal from, or refusal of employment. I hereby authorize the Pueblo of Laguna Department of Education to request any information from my previous employer(s) and I authorize any references to release such information.

Applicant's Signature: _____ Date: _____