PORTALES MUNICIPAL SCHOOLS INSTRUCTIONS APPLICATION FOR EMPLOYMENT www.portalesschools.com

The following must be submitted for your application to be complete:

- 1. Letter of Interest for administrative, teaching, and ancillary.
- 2. Application for all employees to complete in its entirety.
- **3. Resume** for administrative, teaching, ancillary, and administrative assistant positions.
- 4. Copy of current professional license, if applicable.
- 5. Unofficial transcripts from all universities attended. Official transcripts will be required, if employed.
- 6. History Affidavit, Applicant Waiver and Application forms must be signed.
- 7. Recommendation forms sent to three references one of the references must be from a previous employer, preferably your last employer or supervisor. Sign the form giving them permission to complete. They are to return completed forms to Portales Municipal Schools Personnel Office, 501 South Abilene, Portales, NM 88130 or FAX 575-356-4377.

Applications will be kept in the active file for one (1) year from the date of application. If you wish to be considered for another position within that time, please submit a letter of interest for the new position.



PORTALES MUNICIPAL SCHOOLS

Johnnie S. Cain, Superintendent
501 S. Abilene
ortales, 88130
Fax 575-356-4377

575-356-7000

Employment Application

| | 3 | | Арр | licant | Inform | ation | | | | |
|--------------|--------------------|-----------------|---------------|-----------|-----------------|----------|---------------------|----------|---------------------|---------|
| Full Name: | Lost | | First | | | | M.I. | _ Date: | | |
| Address: | Street Address | | FIFSU | | | | IVI.I. | Anad | ment/Unit # | |
| | Street Address | | | | | | | Арап | ripartment offic in | |
| | City | | | | | | State | ZIP (| Code | |
| Phone | | | | | _ | ell: | | | | |
| Date Availal | | | | | E-m | ail Addr | ess: | | | |
| Position App | olying: | | | | | | | | | |
| Are you autl | norized to work in | the U.S.? | YES | NO D | Do you | ı have a | CDL Driver's | License? | YES | NO O |
| Have you ev | er worked for this | District? | YES (C) | NO (C) | If yes, | when? | | | | |
| - | kill: (other than | | _ | _ | • | _ | | | | |
| La | anguage | Spe | ak (Yes or No | o) | | Read (Ye | es or No) | Write (| Yes or No) | |
| | | | | | | | | | | |
| | | | | - | | | | | | |
| | | | | | | | | | | |
| | | 71-31 201-31 | | Educ | ation | | | | | |
| High Schoo | ol: | | Cit | y, State: | | | | | | |
| | | | Diploma o | or GED? | YES | No | Date: | | | |
| College: _ | | | Cit | y, State | | | | | | |
| Major | Mino | or | [| Degree? | YES | NO D | Level of Degree: | | | Date |
| College: | | | Cit | y, State | | | | | | |
| Major | Mino | r | | Degree? | YES | NO O | Level of Degree: | | | Date |
| | | | | | | | | | 76 | |
| College: | | | City | y, State | | | | | | 2.4 |
| Major | Mino | r | | Degree? | YES © | NO D | Level of Degree: | | | Date |
| Other: | | | Sp | ecialty a | area: | | | | | |
| | | | | | YES | NO | | | | |

REFERENCES-Other Employment

Please list your three most recent employers first. Then list all employers in which you had duties that involved unsupervised contact with children or students School/Business _____ Phone # Supervisor: Salary: Beginning **Address** Ending: ___ City, State, Zip Responsibilities: Job Title: ___Reason for leaving:____ From: HR Phone # **Human Resources E-mail address:** School/Business Supervisor: ______ Phone # _____ Salary: Beginning: **Address** _____ Ending: City, State, Zip Job Title: Responsibilities: From: _____To: Reason for leaving:_____ HR Phone # **Human Resources E-mail address:** School/Business __ Supervisor: Phone # Salary: Beginning Address _____ Ending ____ City, State, Zip Responsibilities: Job Title: From: Reason for leaving:____ HR Phone # **Human Resources E-mail address:** School/Business ______ Phone # ___ Supervisor: Address City, State, Zip Responsibilities: Job Title: From: _____ Reason for leaving:____ _To: HR Phone # Human Resources E-mail address:

| School/Business | | | | |
|---------------------------------|---------------------|-------------------|---------|------------|
| Supervisor: | | | Phone # | |
| Address | | | | |
| City. State, Zip | | | | |
| Job Title: | | Responsibilities: | | |
| From:To: | Reason for leaving: | | | |
| Human Resources E-mail address: | - | | _ | HR Phone # |
| School/Business | | | | |
| Supervisor: | | | Phone # | |
| Address | | | | |
| City. State, Zip | | | | |
| Job Title: | | Responsibilities: | | |
| From:To: | Reason for leaving: | | | |
| Human Resources E-mail address: | | | | HR Phone # |
| School/Business | | | | |
| Supervisor: | | | Phone # | |
| Address | | | | |
| City, State, Zip | | | | |
| ob Title: | | Responsibilities: | | |
| From:To: | Reason for leaving: | | | |
| Human Resources E-mail address: | | | | HR Phone # |
| School/Business | | | | |
| iupervisor: | | | Phone # | |
| ddress | | | | |
| itv. State, Zip | | | | |
| ob Title: | | Responsibilities: | | |
| rom:To: | Reason for leaving: | | | |
| uman Resources E-mail address: | | | | HR Phone # |

| Licensure Inform | ation (if applicable) | | | | |
|---|------------------------------------|---------------|---------------|--|--|
| | State and License | Expiration | | | |
| Type of Ed License: | Number | Date | | | |
| Endorsements: | | | | | |
| Activities willing to sponsor: | | | | | |
| Type of Ed License: Endorsements: State and License Expiratio Date | | | | | |
| Activities willing to sponsor: | | | | | |
| | | | | | |
| Employme | nt Questions | | | | |
| If the answer is yes, please attach sheet(s) explaining | g in detail. | | Yes/No N/A | | |
| 1. Have you ever been dismissed from a position? | | | | | |
| 2. Have you ever been asked to resign from a position? | | | | | |
| Have you ever been asked to resign rather than face disciplinary action and/or non-renewal by an employer? | | | | | |
| 4. Admin/Teachers/Ancillary/EA's Have you ever been asked to resign rather than face disciplinary action against a license or certificate? | | | | | |
| 5. Admin/Teachers/Ancillary/EA's Have you ever had adverse action taken against any certificate or license in New Mexico or any other state? (Adverse action includes: letter of warning, reprimand, denials, suspension, revocation, voluntary, surrender or cancellation) If yes, attach a complete narrative description of the details including dates, places, school systems and circumstances. | | | | | |
| 6. Have you ever resigned, entered into a settlement agreement or otherwise left employment following an allegation of misconduct? If yes, attach a complete narrative description of the details including circumstances. | | | | | |
| 7. Admin/Teachers/Ancillary/EA's — Have you ever had an application for a license, permit, credential, or other document authorizing school service or teaching denied or rejected for disciplinary reasons in New Mexico or any other state? If yes, attach a complete narrative description of the details including dates, places, school systems and circumstances. | | | | | |
| 8. Admin/Teachers/Ancillary/EA's — Have you ever failed to fulfill the terms of a teaching or ac employment, if proper notice was given, does not constitute complete parrative description of the details including dates | failure to fulfill a contract.) If | yes, attach a | | | |

Professional Questions (Teacher applicants only)

| TEACHER APPLICANTS ONLY |
|--|
| 1. What are your three (3) most important reasons for wanting to be a teacher? (200 words or less) |
| |
| |
| |
| |
| |
| |
| 2. What three (3) things do you most want to know about your students? (200 words or less) |
| |
| |
| |
| |
| |
| |
| 3. What do you need to know in order to begin your lesson planning for a class? (200 words or less) |
| o. What as you hood to know in stack to segar your lossest planning for a stace. (250 Words of 1666) |
| |
| |
| |
| |
| |
| |
| 4. What ways do you assess and evaluate students? (200 words or less) |
| 4. What ways do you assess and evaluate students? (200 Words of less) |
| |
| |
| |
| |
| |
| 5. Why do you want to be an employee at Portales Municipal Schools? (200 words or less) |
| |
| |
| |
| |
| |
| |
| 6. Please submit a copy of your last evaluation. |
| 2 |
| |
| |
| |
| |
| |

EMPLOYMENT HISTORY AFFIDAVIT

To the Applicant: Most positions with Portales Municipal Schools involve contact with our student population. You must provide the information below to help us evaluate your suitability to perform in this capacity. As with the rest of this application, any misrepresentation or omission of fact may be grounds for disqualification or discharge, regardless of when the misrepresentation or omission is discovered. An affirmative answer provided by you on this is NOT an automatic bar to employment.

Portales Municipal Schools will consider the nature of any alleged conduct underlying an affirmative response, the date of the alleged conduct in question, your intervening conduct, and the relationship between the alleged conduct underlying the affirmative response and the position for which you are applying. If the alleged conduct is directly related to the position for which you have applied, you may be required to provide additional information.

I, being an applicant for, or having been offered, a position with Portales Municipal Schools certify that this document is true, accurate, and a full disclosure of my professional background history.

Answer: Yes or No Are you eligible to work in the United States? Are you presently under investigation for, or under any procedure to consider your discharge for misconduct relating to child abuse or neglect, sexual misconduct, or any sexual offenses including those offenses prohibited in Chapter 30, Article 3, 3A, 4, 6, 6A, 9, 37, 37A or 52 NMSA 1978? Have you ever been under investigation for, or under any procedure to consider your discharge for misconduct relating to child abuse or neglect, sexual misconduct, or any sexual offenses including those offenses prohibited in Chapter 30, Article 3, 3A, 4, 6, 6A, 9, 37, 37A or 52 NMSA 1978, unless the allegations were false or unsubstantiated? Have you ever been under investigation for, or found to have violated, any ethical rule or policy approved by a former employer that previously employed you, unless the allegations were false or unsubstantiated? Have you ever had a professional license or certificate denied, suspended, surrendered or revoked due to a finding of child abuse or ethical misconduct or while allegations of child abuse or ethical misconduct were pending or under investigation?

| lave you ever been asked to resign from a position or resigned from a position | |
|---|--|
| | |
| vithout being asked, under circumstances involving your employer's investigation | |
| of any state or federal statute relating to child abuse or neglect, sexual | |
| nisconduct or any sexual offense, including offenses prohibited in Chapter 30, | |
| Article 3, 3A, 4, 6, 6A, 9, 37, 37A or 52 NMSA 1978? | |
| lave you ever been reprimanded for misconduct? | |
| lave you ever been disciplined for misconduct? | |
| lave you ever been discharged for misconduct? | |
| lave you ever resigned or been asked to resign from a prior position for nisconduct? | |
| IOTE: If you answered yes to any of the questions above, please explain in detail in the elow. Be sure to include the date(s) of the incident(s) in question. | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| rint Name | |

APPLICANT WAIVER

Portales Municipal Schools

PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION

Understand that in order for my application to be considered, the following Affirmations must be initialed by me as the applicant.

| By my initials and signature below I, |
|---|
| I hereby authorize Portales Municipal schools to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. Such background check(s) may include but not be limited to my criminal record, driving record, employment history, and credit report. I understand the Portales Municipal Schools may utilize and outside firm or firms to assist in checking such information, and I specifically authorize such an investigation by information services and outside entities of Portales Municipal Schools' choice. |
| I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: verification of Social Security number; current and previous residences; employment history, including all personnel files; education; references; credit history and reports; criminal history, including records from any criminal justice agency in any or all federal, state or county jurisdictions; birth records; motor vehicle records, including traffic citations and registration; and any other public records. I authorize the complete release of these records or data pertaining to me that an individual, company, firm, corporation, or public agency may have. |
| I understand and agree that if I am considered as a finalist for, or I am actually recommended for or offered employment, I will submit to a criminal background investigation, including mandatory fingerprinting, at my employer's expense, to determine my acceptability for employment. Criminal convictions shall not automatically bar an applicant from obtaining employment with the School 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 the 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, the District may provide me with written notice of the withdrawal of its offer of employment, and that I shall be entitled to no further process or procedure. |
| I authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me to furnish Portales Municipal Schools or its designated agents with any and all information in their possession regarding me in connection with an application of employment. I am authorizing that a photocopy of this authorization be accepted with the same as the original. |

| Signature of Appl | icant | Date |
|---|--|--|
| ☐ By checking t statements. | his box, you are certifying that you have read and agreed | d to all of the terms of the above |
| representative ha | nd that an offer and acceptance of employment is not a as authority to make any agreement contrary to the abov s. Any employment agreements will only be valid and bi ten document signed by an authorized representative of | ve except the Superintendent of Portales inding when the agreement is expressly |
| any information of | e all former employers, persons, schools, companies and concerning my background and hereby release any said passed for issuing this information. | |
| decisions, the ide information subn disclosure to pers expressly protect confidentiality la | and that, pursuant to the Inspection of Public Records AC entity of public sector job applicants and the information nitted by me or obtained pursuant to this agreement and sons outside the School District, including the media, to seed from disclosure by exceptions to the IPRA, or other a ws, including but not limited to, Health Insurance Portablial background checks, if requested are privileged and present the provided of the provided of the provided of the provided of the privileged and present the provided of the prov | contained in this application and the dauthorization may be subject to the extent such information is not pplicable employee privacy or illity and Accountability Act (HIPAA). |
| AGAINST ANY PE | ING ANY RIGHT OF ACTION, CAUSE OF ACTION, OR OTHE RSON OR ENTITY SUPPLYING EMPLOYMENT-RELATED IN DRMATION CONCERNING MY BACKGROUND, WORK HIST TRICT. | FORMATION, INCLUDING BUT NOT |

| Additional Qualifications and Comments |
|--|
| Disclosure of other names: As part of the background check process, please list all of your previous legal names and aliases. |
| Any qualifications or comments you wish to share: |
| |
| |
| Please let us know if you require an accommodation to allow you to complete the application form or for any other aspect of the application process. |
| Portales Municipal Schools is an Equal Opportunity Employer. Discrimination against an otherwise qualified individual with a disability or any individual by reason of race, color, religion, sex, sexual orientation, age or national origin is prohibited. |
| Signature |
| Date |

Phone 575-356-7000 FAX: 575-356-4377

PORTALES MUNICIPAL SCHOOLS

501 S. Abilene, Portales, NM 88130

_____ Date _____

You have my permission to complete this evaluation based on your knowledge of my background. I further understand that the information provided will become the property of the Portales Municipal Schools and shall not be returned to me.

| Personal Qualifications | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observe |
|--|-----------------------------|--------------------|--------------------------|------------------|--|
| Appearance: Dress/Grooming | | | | | |
| Daily attendance | | | | | |
| Committed to working hours | | uster 17 | | | |
| Character and moral standards | | | | | |
| Driven or self-motivated | | | | | The state of the s |
| Reliable | | | | | |
| Emotional stability | | | | | |
| Speaks effectively and correctly | | | | | |
| Patient | | Year william | gravit, it is a service. | | NAME OF BRIDE |
| Positive | | | | | |
| Confident | | | | | |
| Professional Qualifications | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observed |
| Ability to multi-task | | | | Kenin Physics 3 | |
| Plans/Prepares work effectively | | | | | |
| Works well with others-team spirit | | | VI VI SI SI SI SI | | Water and the |
| Shows good judgment and tact | | | | | |
| Command of job assignments | | KOWO Z V | | | A COMPLETE |
| Open and flexible | | | | | |
| Fair and just attitude in dealing with people | | Compact Charles | | | Number of |
| Detail-oriented | | | | | |
| Professional Qualifications – Teachers | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observed |
| Displays subject matter competency | | | | E STOLLING | - Paris 5/8 |
| Utilizes a variety of teaching methods and skills | | | | | |
| Varies teaching to the ability levels of students | | W. C. C. S. C. C. | | | e de la |
| Motivates students, gains confidence and establishes rapport | | | | | |
| Demonstrates commitment and professional attitude | | | | | |
| To be completed by Evaluator: Date: | Re | lationship to a | applicant | | |
| How long have you known applicant? May | we call you for add | litional inforn | nation?1 | elephone # | |
| Additional information/comment | | | | | |
| Name | Title | | E-mail | | |
| (Print) Business address | School District | /Rusiness | | Cell # | |
| Signature | | | | | |

Phone 575-356-7000 FAX: 575-356-4377

PORTALES MUNICIPAL SCHOOLS

501 S. Abilene, Portales, NM 88130

You have my permission to complete this evaluation based on your knowledge of my background. I further understand that the information provided will become the property of the Portales Municipal Schools and shall not be returned to me.

Applicant ______ Signature _____ Date ____

| Personal Qualifications | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observe |
|--|---|--------------------|----------------------|------------------|-------------|
| Appearance: Dress/Grooming | 1 | | | | |
| Daily attendance | | | | | |
| Committed to working hours | | | | | |
| Character and moral standards | | | | | |
| Driven or self-motivated | | | | | |
| Reliable | | | | | |
| Emotional stability | | | | | |
| Speaks effectively and correctly | | | | | |
| Patient | | | | | |
| Positive | | | | | |
| Confident | | | | | |
| Professional Qualifications | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observe |
| Ability to multi-task | | | | | |
| Plans/Prepares work effectively | _ | | | | |
| Works well with others-team spirit | | | | | |
| Shows good judgment and tact | | | | | |
| Command of job assignments | | | | | |
| Open and flexible | | | | | |
| Fair and just attitude in dealing with people | | | | | |
| Detail-oriented | | | | | |
| Professional Qualifications – Teachers | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observe |
| Displays subject matter competency | | | | | |
| Utilizes a variety of teaching methods and skills | | | | | |
| Varies teaching to the ability levels of students | | | | | |
| Motivates students, gains confidence and establishes rapport | | | | | |
| Demonstrates commitment and professional attitude | | | | | |
| To be completed by Evaluator: Date: May | | | | | |
| Additional information/comment | | | | | |
| | | | | | |
| Name(Print) | Title | | E-mail | | |
| Business address | School District | /Business | | Cell # | |
| Signature | | | | | |

Phone 575-356-7000 FAX: 575-356-4377

PORTALES MUNICIPAL SCHOOLS

501 S. Abilene, Portales, NM 88130

You have my permission to complete this evaluation based on your knowledge of my background. I further understand that the information provided will become the property of the Portales Municipal Schools and shall not be returned to me.

| Applicant Signature | | | Date | e | |
|---|--|--|----------------------|--------------------------------------|------------------------------------|
| Personal Qualifications | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observ |
| Appearance: Dress/Grooming | | | | | |
| Daily attendance | e a la construir de la constru | | | Marin Marin Day on Marin Sold States | |
| Committed to working hours | | | 60.00 | | |
| Character and moral standards | 1.0 m | | | | |
| Driven or self-motivated | | 40.00 | | | |
| Reliable | | | | | |
| | | Carlotte and the | | | |
| Emotional stability | | | 3 ASSAN (6. 2022) | | |
| Speaks effectively and correctly | | | | | |
| Patient | | | | | |
| Positive | | | | | |
| Confident | Exceeds Normal | Meets | Needs | Not Satisfactory | Not Observ |
| | Standards | Standards | Improvement | itot sutistation y | 1,0,0 |
| Professional Qualifications | | | | | |
| Ability to multi-task | | | | | |
| Plans/Prepares work effectively | | | | | |
| Works well with others-team spirit | | | | | St. Park |
| Shows good judgment and tact | | CONTRACTOR CONTRACTOR | | | |
| Command of job assignments | | | | | |
| Open and flexible | and the second s | and of the last tip & source of the source | | | |
| Fair and just attitude in dealing with people | | | | | |
| Detail-oriented | | | | | |
| Professional Qualifications – Teachers | Exceeds Normal Standards | Meets Standards | Needs Improvement | Not Satisfactory | Not Observe |
| Displays subject matter competency | | | | | |
| Utilizes a variety of teaching methods and skills | | | | | |
| Varies teaching to the ability levels of students | | | | | |
| Motivates students, gains confidence and | | | | | 8 |
| establishes rapport | | | | | PACKET OF THE PACKET OF THE PACKET |
| Demonstrates commitment and professional | | | | | |
| attitude | | | | | |
| To be completed by Evaluator: Date: | Re | lationship to | applicant | | |
| How long have you known applicant? May | we call you for add | ditional inforr | nation? | Telephone # | |
| Additional information/comment | | | | | |
| | | | | | |
| Name | Title | | E-mail | | |
| (Print) | | | | | |
| Business address | School District | /Business | | Cell # | |
| | | | | | |
| Signature | | | | | |