

## PORTALES MUNICIPAL SCHOOLS

501 South Abilene  
Portales, NM 88130

### STUDENTS/VOLUNTEERS/TUTORS/INTERNS/PRACTICUM (Non-regular employees who work with students)

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

City-State-Zip \_\_\_\_\_

Position/Class \_\_\_\_\_

School(s) \_\_\_\_\_

Cooperating teacher (if applicable) \_\_\_\_\_

Volunteer Coach in what Sport \_\_\_\_\_

☐ Approval from AD

☐ Approval from Head Coach

☐ NMAA Test

Time Frame ☐ Fall Semester

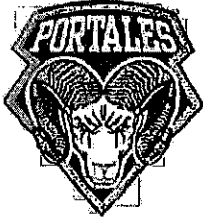
☐ Spring Semester

Signature \_\_\_\_\_ Date \_\_\_\_\_

*BACKGROUND:*

*REGISTER: <https://nm.state.idento.com/>*

*PORTALES SCHOOLS ORI# NM930066Z*



# PORTALES MUNICIPAL SCHOOLS

*Johnnie S. Cain, Superintendent*

501 S. Abilene

Portales, NM 88130

575-356-7000

Fax 575-356-4377

## Classified, Volunteers, Contract Coaches, Other

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Last

First

M.I.

Address:

Street Address

Apartment/Unit #

City

State

ZIP Code

Phone

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

Date Available: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Position Applying: \_\_\_\_\_

Semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_

Language skill: (other than English)

Language	Speak (Yes or No)	Read (Yes or No)	Write (Yes or No)

### Education

High School: \_\_\_\_\_ City, State: \_\_\_\_\_  
Diploma or GED? YES ☐ NO ☐ Date: \_\_\_\_\_

College: \_\_\_\_\_ City, State: \_\_\_\_\_  
Major: \_\_\_\_\_ Minor: \_\_\_\_\_ Degree? YES ☐ NO ☐ Level of Degree: \_\_\_\_\_ Date: \_\_\_\_\_

College: \_\_\_\_\_ City, State: \_\_\_\_\_  
Major: \_\_\_\_\_ Minor: \_\_\_\_\_ Degree? YES ☐ NO ☐ Level of Degree: \_\_\_\_\_ Date: \_\_\_\_\_

College: \_\_\_\_\_ City, State: \_\_\_\_\_  
Major: \_\_\_\_\_ Minor: \_\_\_\_\_ Degree? YES ☐ NO ☐ Level of Degree: \_\_\_\_\_ Date: \_\_\_\_\_

Other: \_\_\_\_\_ Specialty area: \_\_\_\_\_  
Degree? YES ☐ NO ☐ Date: \_\_\_\_\_

## References

Please list three professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
School/Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
School/Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
School/Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

## Previous Employment (3 most recent)

School/Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES ☐ NO ☐

School/Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES ☐ NO ☐

School/Business: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES ☐ NO ☐

**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, \_\_\_\_\_, certify that the information provided in or attached to this application is complete, accurate, true to the best of my knowledge, and current as of the date below. I understand and agree that any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of my application or for termination of my employment. I certify that I have the legal right to accept employment in this state, and that I will produce, at or before the date of hire, proof of that right to accept employment.

\_\_\_\_\_ 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.

I AM ALSO WAIVING ANY RIGHT OF ACTION, CAUSE OF ACTION, OR OTHER MEANS OF REDRESS I MAY HAVE AGAINST ANY PERSON OR ENTITY SUPPLYING EMPLOYMENT-RELATED INFORMATION, INCLUDING BUT NOT LIMITED TO INFORMATION CONCERNING MY BACKGROUND, WORK HISTORY, AND DISCIPLINARY HISTORY—TO THE SCHOOL DISTRICT.

\_\_\_\_\_ I understand that, pursuant to the Inspection of Public Records ACT (IPRA) as interpreted by recent court decisions, the identity of public sector job applicants and the information contained in this application and the information submitted by me or obtained pursuant to this agreement and authorization may be subject to disclosure to persons outside the School District, including the media, to the extent such information is not expressly protected from disclosure by exceptions to the IPRA, or other applicable employee privacy or confidentiality laws, including but not limited to, Health Insurance Portability and Accountability Act (HIPAA). (Results of criminal background checks, if requested are privileged and protected from public disclosure.)

\_\_\_\_\_ I authorize all former employers, persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said persons or entities from any liability for any damage whatsoever for issuing this information.

\_\_\_\_\_ I understand that an offer and acceptance of employment is not a contract for employment. No representative has authority to make any agreement contrary to the above except the Superintendent of Portales Municipal Schools. Any employment agreements will only be valid and binding when the agreement is expressly set forth in a written document signed by an authorized representative of Portales Municipal Schools.

☐ By checking this box, you are certifying that you have read and agreed to all of the terms of the above statements.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

## 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?	

Have you ever been asked to resign from a position or resigned from a position without being asked, under circumstances involving your employer's investigation of any state or federal statute relating to child abuse or neglect, sexual misconduct or any sexual offense, including offenses prohibited in Chapter 30, Article 3, 3A, 4, 6, 6A, 9, 37, 37A or 52 NMSA 1978?	
Have you ever been reprimanded for misconduct?	
Have you ever been disciplined for misconduct?	
Have you ever been discharged for misconduct?	
Have you ever resigned or been asked to resign from a prior position for misconduct?	

NOTE: If you answered yes to any of the questions above, please explain in detail in the text box below. Be sure to include the date(s) of the incident(s) in question.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_