



Jal Public Schools

Home of the Panthers!

304 East Utah • PO Box 1386 • Jal, NM 88252 • Office: (575)395-2101 • Fax: (575)395-2146 www.jalnm.org

Application for Maintenance-Custodian-Bus/Suburban Driver

Date: _____

Name: _____
Last First Middle

Present Address: _____ Telephone () _____

If offered a position, are you capable of performing the duties and functions listed in the job description? _____

When could you begin work? _____

Do you have a valid bus driving license? _____

What is the current status of the license? _____

Education:

High School or College	Dates Attended	Diploma or Degree

Work Experience: Give full and accurate date.

Employer	Telephone #	Dates of Employment	Reason for Leaving

References: Give at least three (3) references, including especially employers under whom you have worked.

Name	Address	Title

PLEASE READ CAREFULLY.

This application for employment will be kept on file for 90 days. If application is not employed within 90 days and still wishes to be considered, and update application MUST be completed.

1. Have you ever been convicted of a felony or a misdemeanor of moral turpitude? ____Yes ____No
If answer is YES, attach full details, including dates, offense, disposition, and current status.
2. Have you ever been placed on probation for commission of a felony or a misdemeanor of moral turpitude: ____Yes ____No. If answer is YES, attach full details, including dates, offense, disposition, and current status.
3. Are charges pending or have charges ever been filed against you for commission of any offense. ____YES ____No. If so, attach full details, including dates, offense, disposition and current status.

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize JPS to make such investigations and inquires of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding in inquiries to connection with my employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all policies and procedures of Jal Public Schools.

NOTICE- This application is not complete without a signature.

Signature of Applicant

Date



AGREEMENT, AUTHORIZATION, WAIVER, and RELEASE

A. Applicant Certification:

I hereby certify that the information contained in this application is true, accurate and complete, to the best of my knowledge and belief. 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. Failure to provide all or part of the information requested may result in the refusal of the School District to further consider me for possible employment.

B. Authorization for Reference Checks:

I hereby authorize the School District and its agents to investigate my work history and education history and to conduct personal inquiries. I understand that the School District will send a copy of this Agreement and Authorization to each individual or entity from whom it is seeking a reference or background information.

C. Waiver and Release as to Reference Checks:

I hereby authorize the party receiving a copy of this signed form (including a photocopy or facsimile copy) to provide and release complete information as may be requested, and I hereby waive any claim of confidentiality I might have with regard to such information.

I hereby release any person or entity providing information or records in accordance with this Agreement, Authorization, Waiver, and Release from any and all claims or liability for compliance.

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.

D. Criminal Background Checks:

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 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 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 written notice of the withdrawal of its offer of employment, and that I shall be entitled to no further process or procedure.

E. Public Disclosure of Applicant Names and Application Materials.

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, the Health Insurance Portability and Accountability Act (HIPPA). (Results of criminal background checks, if requested are privileged and protected from public disclosure.)

As a result, the applicant must make his or her own decision as to submitting the application and the impact which public disclosure of his or her identity as an applicant, or application materials may have.

Signature of Applicant:

Date:

Printed Name of Applicant