

Application and Employment Process

non - Certified

1. Complete the entire application which includes:

- a. **Application for Employment**
- b. **Agreement and Authorization**
- c. **Criminal History Affidavit**
- d. **Agreement, Authorization, Waiver and Release.**

No candidate shall be eligible for employment unless his or her application packet is complete. Incomplete or unsigned applications will be discarded.

Mail applications to: Office of the Superintendent
Clayton Municipal Schools
323 South Fifth Street
Clayton, New Mexico 88415

2. New hires will be required to complete a fingerprint and background check. This process must take place immediately after the offer of employment. All documents necessary for this process can be picked up at the Superintendent's office.

3. All certified new hires are required to be licensed. Licensure applications can be picked up at the Superintendent's office. This process must take place immediately after employment.

4. All certified new hires are required to furnish a summative evaluation document if coming from another New Mexico school.

In the event that the criminal background check is not satisfactory, employment offer will be withdrawn.

name _____ Social Security Number _____

please provide any additional information you think we might find useful:

certify the forgoing information is correct to the best of my knowledge:

signature

Date

CLAYTON MUNICIPAL SCHOOLS

323 South Fifth Street

Clayton, NM 88415

(505) 374-9611

AGREEMENT AND AUTHORIZATION

I hereby certify that the information contained in this application is true, accurate and complete, to the best of my knowledge and belief. Any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of this application or termination of employment. Failure to provide all or part of the information requested may result in the refusal of the Clayton Municipal Schools to further consider me for possible employment.

I hereby authorize the Clayton School District and its agents to investigate my work history and education history and to conduct personal reference inquiries. I understand that the Clayton 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.

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, 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 UNDER A GUARANTEE OF CONFIDENTIALITY.

I understand and agree that if I am considered as a finalist for, or I am actually recommended for 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 Clayton School District, but pursuant to the Criminal Offender 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 the satisfactory completion of all background checks

I understand that the information contained in this application and the information submitted by me or obtained pursuant to this agreement and authorization is confidential, for the exclusive use of the Clayton School District and its agents for employment decisions, and will not be transferred to any other entity without my written authorization unless required to be disclosed upon request by either New Mexico or federal law.

I understand that any employment offer is contingent upon the satisfactory completion of all background checks.

Signature of Applicant

Date

Printed Name of Applicant

Insert to Employment Application
CRIMINAL HISTORY AFFIDAVIT
Applicant/New Employee

Most positions with the CMSD #1 involve contact with our student population. We ask that you provide the information on this form to help us evaluate your suitability to perform in
Pursuant to New Mexico State Statutes, all applicants for employment are expected to provide us with this information. This insert is part of the application itself and any
omission or omission of fact may be grounds for disqualification from further consideration or for termination of employment regardless of when the misrepresentation
is discovered.

being an applicant for, or having been offered, a position with the
Municipal School District #1, and being duly sworn according to law, certify that this document is a true, accurate, and
sure of my personal and professional background history.

on of a crime or any affirmative answer provided by you on this insert is NOT an automatic bar to employment. The CMSD #1 will consider the nature of any conviction or
fact underlying the affirmative response, the date of the alleged conduct in question, your intervening conduct, and the relationship between the offense or alleged
erlying the affirmative response and the position for which you are applying.

(Check ONE of the following two statements)

y that I am not awaiting trial on, I have never been convicted of, and/or have never admitted committing, any of the offenses described in this
in this state or any similar offense or offenses in any other jurisdiction and that I have never been put on, and am not currently on, probation in this
or any other jurisdiction.

y that the statements (see NOTE at bottom of Section II) I attach to this form give a true, accurate, and full account of any offenses described in this
that I may have committed or been charged with in this state or any other jurisdiction.

(Please check the appropriate "yes" or "no" box for the following questions)

Form with 30 numbered questions and yes/no checkboxes. Questions cover topics like employment investigations, disciplinary actions, sexual offenses, and criminal convictions.

have answered yes to any of the questions above, please attach sheet(s) explaining in detail. Include the date of the charge, the court action, the offense in question, and the address
involved, and sign and date each sheet in the upper right corner.

ferred to in this document include but are not limited to:

- List of 30 offenses including: molestation of a child, trafficking controlled substances, indecent exposure, sale of sexually oriented material to minors, etc.

and agree that any offer of employment that I may receive, or have received, from the Clayton Municipal School District #1 is conditioned by law upon the district's
formation pursuant to a fingerprint-based check of my personal and professional history. I further understand and agree that I may be terminated by the district
if any information contained in this affidavit is inaccurate or if any information received by the CMSD #1 is inconsistent with any statement made by me on this affidavit.
Clayton Municipal School District #1 to check my personal and employment history, including without limitation, evaluations, criminal arrest and conviction records, reference checks,
investigatory information possessed by any private or public employer of any state, local, or federal agency. I expressly waive in connection with any request for or provision of such
ny claims, including without limitation defamation, emotional distress, invasion of privacy or interference with contractual relations that I might otherwise have against the CMSD #1, its
licials or any provider of such information.
hat all terms of employment or offer of employment are conditional until the required background investigation is complete. I have read this authorization and release of all claims, and I
eo to the terms set forth herein.

Signature lines for Name, Date, and Social Security Number.

Subscribed and sworn to before me this ___ day of ___, 199__.

Notary Public