

Clayton Municipal Schools

323 South Fifth Street
Clayton, New Mexico 88415

Phone (575)-374-9611

Fax (575)-374-9881

Mr. Ray Maestas
Interim Superintendent

APPLICATION AND EMPLOYMENT PROCESS

1. Complete the entire Application Packet which includes:

Application for Employment

Agreement Authorization, Waiver, and Release

Job Performance Statement

A copy of Transcript(s) of college/university work (official transcript(s) required upon employment)

If you are considered a finalist, a Criminal History Affidavit will be required.

3 Letters of Recommendation (*certified positions only*)

Resume (*certified positions only*)

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

It is the responsibility of the applicant to obtain required materials and have them sent to the personnel office. Applications are kept on file for one year from the date submitted. If the applicant has not been employed within this time the application will be destroyed unless the applicant submits a letter updating the application and requesting continued consideration.

Mail applications to:

Office of the Superintendent

Clayton Municipal Schools

323 South Fifth Street

Clayton, NM 88415

2. All certified new hires are required to be licensed. Licensure applications can be picked up at the Superintendent's office or by contacting New Mexico State Department of Education, Education Building, Professional Licensure Unit, 300 Don Gaspar, Santa Fe, NM 87501-2786 phone: (505)-827-6587 <http://sde.state.nm.us/div/ais/lic/index.html>. This process must take place prior to employment. ***In the case of licensed employees, a copy of a license should be included in the application packet.***

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 ***In the event that the criminal background check is not satisfactory, employment offer will be withdrawn.***

Volunteers are considered "at-will" employees and may be dismissed with or without cause at the discretion of the district by the administrator who assigns the volunteer to duties in the building or department or by the superintendent.

It is the expressed policy and purpose of Clayton Municipal Schools to provide educational and employment opportunities, without regard to race, color, sex, ethnicity, national origin, religion, age, handicap or any other prohibited basis in conformity with the laws of the United States and the State of New Mexico.

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CLAYTON MUNICIPAL SCHOOLS APPLICATION FOR EMPLOYMENT

1. Date Submitted _____
2. Name _____
 - a. Last _____ First _____ Middle _____
 - b. Other names under which information may be received (transcripts, etc.)

4. Present Address _____
Street/P.O Box _____
City _____ State _____ Zip _____ Phone w/area code _____
5. Permanent Address _____
Street/P.O Box _____
City _____ State _____ Zip _____ Phone w/area code _____
- 5a. **PERSONAL DATA (5a. Optional until offered a position)**
Social Security No. _____ Marital Status: _____
Date of Birth: _____ Place of Birth: _____ Number of Dependents: _____
- 5b. If offered a position, will you provide the information requested in Item #5a? _____ (Yes/No)
- 5c. If offered a position, can you supply the required documentation to verify your lawful right to work in the United States? _____ (Yes/No)
6. Position sought:
 - a. Check all that apply:

<input type="checkbox"/> Administrator	<input type="checkbox"/> Substitute Teacher
<input type="checkbox"/> Teacher	<input type="checkbox"/> Secretarial/Clerical
<input type="checkbox"/> Counselor	<input type="checkbox"/> Cafeteria
<input type="checkbox"/> Librarian	<input type="checkbox"/> Maintenance/Custodial
<input type="checkbox"/> Educational Assistant	<input type="checkbox"/> Bus Driver/Substitute
<input type="checkbox"/> Volunteer Coach	

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b. Specific grade levels/subject areas/assignments you are qualified to perform, in order of preference.

c. Coaching/Extracurricular Activities: _____

d. Special Skills or Qualifications: _____

e. Date of Availability: _____

7. Scholastic Preparation

College/University of Specific Training and Address	Degree, # Semester Hours, # Training Hours	Major/Minor	GPA When A=4.0

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8. Licensure Data

Type of License & No.	State of Issuance	Expiration Date	Specific Areas of Endorsements

PROFESSIONAL EXPERIENCE
(List in reverse chronological order)

9.

EMPLOYER (SYSTEM OR CO.)	DATES	TOTAL MONTHS	SUBJECT TAUGHT OR JOB PERFORMED

10. **ORGANIZATIONS – ACTIVITIES – INTERESTS**

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11. **To be completed by teacher and administrative applicants only:**

In your own handwriting, write a paragraph or two on one of the following topics: (a) your philosophy of education, (b) autobiography, (c) discipline in the classroom, (d) teaching the slow learner, (e) integration of educational technology.

12. References: Include individuals familiar with your work performance and job skills.

a. Name: _____ Position: _____

Address: _____ Telephone No.: _____

b. Name: _____ Position: _____

Address: _____ Telephone No.: _____

c. Name: _____ Position: _____

Address: _____ Telephone No.: _____

I hereby certify that the above information furnished on this application is true and correct. Further, I agree that if any of the information is false, such shall constitute grounds for the termination of any contract of employment which might be granted to me.

Applicant's Signature

Date

Clayton Municipal Schools is committed to the philosophy of equal opportunity/equal access in all its employments, educational programs, activities and services and does not discriminate on the basis of race, color, national origin gender, sexual orientation, creed, religion, age, marital or parental status, mental or physical handicapping condition.

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AGREEMENT, AUTHORIZATION, WAIVER AND RELEASE

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

I hereby authorize the School District and its agents to investigate my work history and education history (including three-tiered evaluations, where applicable) 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.

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 UNDER A GUARANTEE OF CONFIDENTIALITY.

I understand and agree that if I am considered as a finalist for, or if 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 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, that the District may provide me written notice of the withdrawal of its offer, and that I shall be entitled to no further process or procedure.

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 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.

Signature of Applicant

Date

Printed Name of Applicant

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JOB PERFORMANCE STATEMENT

I, _____, declare that I do not have an existing physical problem that would prevent me from performing my job duties in a safe and efficient manner. If I develop any physical difficulty in performing my job duties in a safe and efficient manner, I will immediately notify my supervisor.

SIGNATURE

DATE

WITNESS

I understand that if I knowingly and willfully conceal or make a false representation about the above given information I shall be entitled to no future compensation benefits.

SIGNATURE

DATE

WITNESS