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Tempe Campus 7541 South Willow Drive Tempe, AZ 85283 480-447-3997 Gilbert Campus 1540 North Burk Street Gilbert, AZ 85234 480-545-6132 West Valley Campus 6810 West Thunderbird Road Peoria, AZ 85381 480-240-9255

APPLICANT INFORMATION												
Last Name					First				M.I.	Date		
Street Address									Apartment/Unit #			
City				State	State				ZIP			
Phone				E-mail	E-mail Address							
Date Available	Date Available				Part tim	Part time			ired Salary			
Position Applied for												
Are you a citizen of the United States? YES N					\square If no, are you authorized to work in the U.S.? YES \square NO \square							
Do you have a fingerprint card?				NO 🗆	If yes, please provide a copy							
Have you ever been convicted of a felony? YES \(\square\)				NO 🗆	If yes, explain							
EDUCATION												
High School	High School A			Address								
From	То	Did you graduate?		YES	NO 🗆	Degree						
College				Address	ddress							
From	То	Did you graduate?		YES	NO 🗌	☐ Degree						
Other A				Address	ddress							
From	То	Did you graduate? Y		YES 🗌	NO Degree							
REFERENCES												
Please list two personal references.												
Full Name						Relationship						
Company					F	Phone ()						
Address												
Full Name						Relationship						
Company					F	Phone ()						
Address												

PREVIOUS EMPLOYMENT										
Company					Phone ()					
Address					Supervisor					
Job Title	Starting Salary	\$		Ending Salary \$						
Responsibilities										
From	То	Reason for Leaving	J							
May we contact y	our previous superv	visor for a reference?	NO 🗆							
Company			Phone ()							
Address					Supervisor					
Job Title	Starting Salary	\$		Ending Salary \$						
Responsibilities										
From	То	Reason for Leaving	Reason for Leaving							
May we contact your previous supervisor for a reference?					NO 🗆					
Company					()					
Address					Supervisor					
Job Title Starting Salary						Ending Salary \$				
Responsibilities										
From	То	Reason for Leaving	I							
May we contact your previous supervisor for a reference? YES NO										
CERTIFICATES/CREDINTIALS										
Do you hold a vali	id teaching credent	ial? Yes No	If yes, Type of C	ertificate:	Standard	I Emergency	Probationary			
State Issued Date Issued Date of Expiration										
Indicate any other professional licenses or certificates you hold:										
Type of License _		Field	Date of Expiration							
Are you a Highly Qualified teacher? (NCLB): Yes No What areas?										
Are you a Highly Qualified paraprofessional? Yes No (HQ = an Associate's degree or 60 semester hours of coursework documented on an official transcript from an accredited institution of higher education, or by obtaining a passing score on one of the Arizona Department of Education approved assessments: ParaPro, ACT Workkeys, or Master Teacher's ParaEducator PD Now! (formerly ParaEducator Learning Network)										
Please provide copies of any certificates/credentials										
DISCLAIMER AND SIGNATURE										
I certify that my answers are true and complete to the best of my knowledge.										
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.										
Signature	Signature Date									