



EMPLOYMENT APPLICATION

SUBSTITUTE POSITION

Shiprock Associated Schools, Inc.

P.O. Box 1809

Shiprock, NM 87420

www.sasischools.net

P: (505)368-2100 F: (505)368-2076

APPLICANT INFORMATION

Date of Application: _____

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Mobile: _____ Home: _____

Message: _____ Email: _____

Date Available: _____ Referred By: _____

EMPLOYMENT INFORMATION

Position Applying for: _____ Requested Salary: _____

List languages you speak fluently: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for Shiprock Associated Schools, Inc.? YES NO If yes, when? _____

Are you related* to anyone employed by Shiprock Associated Schools, Inc.? YES NO If yes, list name: _____

*Related" means any person related by blood or marriages (spouse, in-laws, step, and half relatives) within the third degree (siblings, offspring, cousins, uncles, aunts, nephews, nieces, great-grandparents, or closer relations.)

Do you have a valid driver's license? YES NO Have you ever been convicted of a felony? YES NO

List previous experience working with Navajo and/or Native American children and adults:

Specify Courses in Indian Education you have taken (i.e. Anthropology, History, Literature)

EDUCATION

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Credit hours earned: _____ Major/Minor: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Credit hours earned: _____ Major/Minor: _____

EMPLOYMENT APPLICATION

SUBSTITUTE POSITION

PREVIOUS EMPLOYMENT

Company: _____ 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

Company: _____ 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

Company: _____ 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

HONORS/SPECIAL RECOGNITION/ACHIEVEMENTS

Please list and mail documents separately:

List special hobbies and interests that you have:

PROFESSIONAL REFERENCES

Three references required.

Full Name: _____ Title: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Title: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Title: _____

Company: _____ Phone: _____

Address: _____

EMPLOYMENT APPLICATION

SUBSTITUTE POSITION

MILITARY SERVICE

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

EMERGENCY CONTACT

Name: _____ Phone: _____

Relationship: _____

AUTHORIZATION

By submitting this form, the applicant authorizes Shiprock Associated Schools, Inc. to investigate all statements contained in this application. The applicant further understands that misrepresentation or omission of facts is cause for dismissal.

Please note:

Your application will not be considered complete and forwarded to the screening committee until the following items have been received in the Personnel Office:

- Copies of Transcripts (Official transcripts required upon hire)
- Two letters of recommendation
- Any other supporting documentation

Signature: _____ Date: _____