

APPLICATION FOR EMPLOYMENT

Affirmative Action/EEO Employer

**McCURDY SCHOOL
261 McCURDY ROAD
ESPANOLA, NEW MEXICO 87532
PHONE (505) 753-7221 FAX (505) 753-7830**

1. **PERSONAL.**

Name _____ Telephone _____

Address _____

City _____ State _____ ZIP _____

Application Date _____ Date Available _____

Position Desired _____

Have you ever been convicted of a crime(s) against a child, a crime(s) involving violence/drugs, or a felony crime(s)?

YES _____ NO _____. If YES, please explain: _____

2. **EDUCATION.**

Name	Address	Major/ Minor	Degree/ Date
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High School _____

College _____

Other _____

Professional Licenses/Certificates; Expiration Dates

3. **JOB EXPERIENCE.**

Institution/School System, or Company	Address	Major Duties	Dates of Employment

If required, use the back to provide a complete job history.

4. **REFERENCES.**

List information for at least three (3) references we may contact.

Name and Position	Address	Telephone

5. **QUALITIES SPECIAL REFERENCES AND SKILLS.**

A. What personal qualities do you feel qualify you for the position you are seeking?

- B. List any experiences, such as travel, church service, or involvement in cultural and/or professional organizations that enhance your qualifications for this position.

6. **McCurdy School is a mission project related to the United Methodist Church.** The staff is the means by which the mission priorities of the church and the philosophy of the school are carried out. Financial support from church contributions is, to some degree, dependent upon contacts with school staff. Membership in the United Methodist Church is not required, but an acceptance of the purpose and philosophy of the church and school is of great importance.

- A. How did you hear of this opening and what motivated you to seek a position at McCurdy School?

- B. How do your religious faith and your career goals relate to McCurdy School's philosophy?

I hereby declare that the information provided by me in this application for employment is true, correct and complete to the best of my knowledge. I understand and certify by my signature that this application is complete in its entirety for consideration. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

I authorize you to obtain an investigative consumer report containing information obtained through personal interviews with neighbors, friends and acquaintances, as well as any other public investigative report deemed appropriate, and hereby consent to a fingerprint card for such investigation.

This report, if obtained, may include information as to my character, general reputation, personal characteristics, mode of living, and/or reports from the National Crime Information Center (NCIC) or other agency for my background profile. I understand that I have the right to make a written request within a reasonable period to receive additional detailed information about the nature and scope of any such investigation.

Date _____ Signature _____

APPLICATIONS REMAIN ACTIVE FOR ONE (1) YEAR.