East Valley Institute of Technology



1601 West Main Street - Mesa, Arizona 85201 (480) 461-4000, FAX (480) 461-4089 APPLICATION FOR FACULTY EMPLOYMENT < Adult Education >

Before final consideration for employment, the candidate must have on file in the personnel office a complete set of transcripts.

It is the candidate's responsibility to ensure transcripts are provided.

The East Valley Institute of Technology is an Equal Opportunity Employer. Applicants and employees are treated without regard to race, color, religion, sex, national origin, age, marital status, veteran status, medical condition, or disability.

PERSONAL INFORMATION Last Name First Name Middle Name Social Security Number Other Names Used Dates of Usage Home Address City/State/Zip Work Address City/State/Zip Home Phone Number Work Phone Number E-Mail Address Do you have any relatives who are currently employed by the East Valley Institute of Technology?	P. ition(a) Desired				D 4f A -mlication	
Last Name First Name Middle Name Social Security Number Other Names Used Dates of Usage Home Address City/State/Zip Work Address City/State/Zip Home Phone Number Work Phone Number E-Mail Address Do you have any relatives who are currently employed by the East Valley Institute of Technology?	Position(s) Desired				Date of Application	
Other Names Used Home Address City/State/Zip Work Address City/State/Zip Home Phone Number Work Phone Number E-Mail Address Do you have any relatives who are currently employed by the East Valley Institute of Technology?	PERSONAL INFORM	IATION				
Other Names Used Home Address City/State/Zip Work Address City/State/Zip Home Phone Number Work Phone Number E-Mail Address Do you have any relatives who are currently employed by the East Valley Institute of Technology?	Last Name	First Name	Middle N	 Name	Social Security	Number
Home Address City/State/Zip Work Address City/State/Zip Home Phone Number Work Phone Number E-Mail Address Do you have any relatives who are currently employed by the East Valley Institute of Technology?					-	
Work Address City/State/Zip Home Phone Number Work Phone Number E-Mail Address Do you have any relatives who are currently employed by the East Valley Institute of Technology?	Other Names Used				Dates of Usage	2
Home Phone Number Work Phone Number E-Mail Address Do you have any relatives who are currently employed by the East Valley Institute of Technology?	Home Address		City/Star	te/Zip		
Do you have any relatives who are currently employed by the East Valley Institute of Technology?	Work Address City/State/Zip					
	Home Phone Number	Work Ph	none Numbe	er	E-Mail Address	
If yes, please name the person and the relationship	Do you have any relatives who	are currently employed by tl	he East Valley	Institute of Te	chnology?	□No
	If yes, please name the person	and the relationship				
Are you willing to accept the following types of positions? Check all that apply. Part-Time Days Only Temporary Grant Funded Position Salary Requirement Permanent	Part-Time	Days Only	□ Temporary		Grant Funded Position	Salary Requirements
CERTIFICATION						
Arizona or National Certificates Now Held Expiration Date	Arizona or National Cer	tificates Now Held			Expiration Date	
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EDUCATION	Ţ							
Name of School/Location Dates Attended					Hours Completed	1	Major	Graduation
High School								Yr./Degree
Undergraduate								
Graduate								
Graduate								
Graduate								
Highest Degree Ear	med				G.P.A.		Hours Earned	after Highest Degree
Employer/Address	Dates	D	osition Held	FT	Supervisor Name	Salary	Page	ons for Leaving
Employer/Address	Employed	1	osition ricia	PT	Phone Number	Salary	Kease	ons for Leaving
	•			1	,			
May we contact	your present	employe	er?	TYe:	s 🗀 NoWhen	n are you av	vailable to start	work?
May we contact your present employer? — Yes — No — When are you available to start work? Have you ever been dismissed from a position? — Yes — No								
Have you ever been dismissed from a position?					□ NoPlease explain			
Have you ever be	een asked to	resign fr	om a position	? 🗀 Yes	□ No			
y y		<i>C</i>	1			Please ex	xplain	

Organization		Chapter		Position(s) Held	Date	es
SSIONAL REI	FERENCES	Give the na	ames of a	at least three per	sons who are familiar	with you	r work perfo
Name	Phone 1	Number(s)	P	Position	Relation to Applica	ant	Years Known
	HIEVEME	NTS List	any hone	ors and awards	that you have receive	d. Also	list any spe
OKS AND AC		or t	talents yo	ou possess inclu	uding foreign language	skills.	

SELECTIVE SERVICE REGIS	STRATION Are you required to be re	egistered with the Selective Service System.
SELECTIVE SERVICE REGIS		egistered with the Selective Service System.
		egistered with the Selective Service System. Local Board Number

PROFESSIONAL GROWTH

Write a brief statement indicating.

- the reasons why you desire to teach at the East Valley Institute of Technology.
- the long term career goals you have set for yourself, and
- the plans you have for reaching your long-term goals.

PROFESSIONAL GROWTH (cont.)

Write a brief statement indicating:

- your philosophy of education,
- your qualifications, and the relation between your qualifications and the role that educational institutions should plan in society and individual lives.

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CONVICTION REPORT

Conviction information is needed from all applicants and employees. "Conviction" is defined as the final judgment on a verdict of a finding of guilty, or a plea of nolo contendere in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken. Conviction does not include a final judgment that has been expunged by pardon, reversed, set aside, or otherwise rendered invalid. A record of conviction does not necessarily prohibit employment. Failure to complete this form accurately and completely may mean disqualification from consideration for employment, or may be cause for consideration of dismissal after hiring, and may result in prosecution for filing false information with a public agency. Applicants and employees must report any convictions that occur subsequent to the time that they complete this form. Please read carefully, and answer every question.

SIGNATURE OF APPLICATION OF PRINCIPLE OF APPLICATION OF PRINCIPLE OF APPLICATION OF PRINCIPLE OF APPLICATION OF	uissal, I hereby certify that the informents contained herein and unders Cechnology. I understand that my expeen made, and the Governing Bo	stand that any document relevant to mployment is not finalized until a l oard has officially approved my en	o this information may be reviewed by background investigation has been
Remarks			
Length of Jail Term	Amount of Fine	Length and Terms of	Probation
Conviction Charge	State/City		Court
Remarks			
Length of Jail Term	Amount of Fine	Length and Terms of	Probation
Conviction Charge	State/City	C	ourt
If you answered YES to any of the above	re questions, please provide the follo	owing information.	
5. Have you ever been convicted of of State or similar offenses in another juris Sexual abuse of a minor, incest, first or delinquency of a minor, commercial set felony offenses involving distribution of n of a child, voluntary manslaughter, or a	second degree murder, kidnapping, a xual exploitation of a minor, contribu narijuana or dangerous or narcotic drug	arson, sexual assault, sexual exploita	mmercial sexual exploitation of a minor
4. Have you ever been convicted of a d (A.R.S. 13-604.01 requires applicants t These crimes are defined as second degree sexual conduct with a minor, sexual expanses, kidnapping and sexual abuse).	o give notice of any conviction for dree murder, aggravated assault, sexua	langerous crimes against children. Il assault, molestation of a child,	□ Yes □ No
3. Have you ever been convicted of a dr	rug or sex related offense?		□ Yes □ No
2. Have you ever been convicted of a l	elony?		□ Yes □ No
2. Have you ever been convicted of a			