

# PINAL COUNTY SCHOOL OFFICE

Attn: Nicole O'Brien

P. O. Box 769

Florence, Arizona 85132 (520) 866-6565

☒ 2 Year

☐ 4 Year

## Application for School Board Appointment

### **Eloy Elementary School District No. 11**

**Open Until 5:00pm Friday, November 15, 2024**

Name: \_\_\_\_\_ Work Telephone #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Home Telephone #: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address \_\_\_\_\_

### **AFFIDAVIT OF QUALIFICATIONS**

By signing below, I affirm that I am eligible to be appointed to the above-mentioned School District Governing Board based upon the following qualifications:

- I am a registered voter in the state of Arizona.
- I have resided in the School District for at least one year.
- I am not an employee of the School District nor is my spouse.
- I am not a member of any other School District Governing Board
- No members of my immediate family, who currently reside with me or who have resided in my home within the last four years, are members of this Governing Board.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Subscribed and sworn before me in the County of Pinal and State of Arizona on this \_\_\_\_ day  
of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Commission Expiration Date

[www.riskassessmentgroup.com](http://www.riskassessmentgroup.com)

1-866-777-1114

(SEAL)

**Occupational experience** - (past 10 years, if applicable)

List current and/or previous employers – put most recent experience first.

| <b>DATES<br/>EMPLOYED</b> | <b>EMPLOYER'S NAME<br/>(Include complete address)</b> | <b>PHONE</b> | <b>SUPERVISOR'S<br/>NAME</b> | <b>REASON FOR<br/>LEAVING</b> | <b>POSITION</b> |
|---------------------------|---|--------------|------------------------------|-------------------------------|-----------------|
| From _____<br>To _____    |   |              |                              |                               |                 |
| From _____<br>To _____    |   |              |                              |                               |                 |
| From _____<br>To _____    |   |              |                              |                               |                 |
| From _____<br>To _____    |   |              |                              |                               |                 |
| From _____<br>To _____    |   |              |                              |                               |                 |

**Educational background** - Identify the academic institution, highest level achieved, degree(s) conferred

| Circle highest year completed |      | HIGH SCHOOL 7 8 9 10 11 12 |                |                |        | COLLEGE 13 14 15 16 |  |  |  |
|-------------------------------|------|----------------------------|----------------|----------------|--------|---------------------|--|--|--|
|                               | Name | Location                   | Dates Attended | Year Graduated | Degree | Major Area of Study |  |  |  |
| HIGH SCHOOL                   |      |                            |                |                |        |                     |  |  |  |
| TECHNICAL SCHOOL              |      |                            |                |                |        |                     |  |  |  |
| COLLEGE                       |      |                            |                |                |        |                     |  |  |  |

**Questionnaire: Please answer the following questions on a separate piece of paper.**

1. What has prompted you to express an interest in this position?
2. Please briefly describe your understanding of the differences between the roles of The Governing Board and The School District Administration?
3. In our present societal environment, those seeking to serve in a public capacity are often subjected to intense scrutiny by interested individuals or groups, as well as the media. This scrutiny includes examining personal behaviors, past and present, as well as areas of potential "conflict of interest." Is there anything in your background that would be an embarrassment to the district if it became public knowledge?
4. What are your experiences dealing with the reading, creating, or analyzing budgets?
5. What experiences do you have in setting policies whether company, departmental, organizational, or volunteer?
6. What experience do you have in hiring, firing, and disciplinary action?
7. List any management or supervisory experience.
8. List any previous school board experience, teaching experience, or experience with education.
9. As an active member of your community, you may have developed ideas about some of the special needs of your School District. What do you consider to be the three (3) biggest challenges currently affecting this District? How would you tackle those challenges?
10. A Board member has no authority to make district decisions as an individual. All District policy decisions are made by the total Governing Board. Knowing this, what are the most important factors for working in a team environment?
11. Public service, such as serving on a School Board, requires a great deal of time and energy. For this position, compensation is non-existent. In light of that, are there any circumstances you can foresee that would limit your ability to fully participate as a School Board member?

# CRIMINAL ACTIVITY REPORT

Because of the responsibility the Pinal County School Superintendent has to our school children and community, the following information is needed from all applicants. A record of arrest or conviction\* does not prohibit appointment. However, failure to complete this form accurately and completely may mean disqualification from consideration for appointment. Applicants must report any convictions and arrests that occur subsequent to the time they initially completed this form. Questions regarding this information should be directed to the Pinal County School Superintendent's Office. Please read carefully and answer every question. **Please print clearly.**

1. Name \_\_\_\_\_ SSN \_\_\_\_\_  
Other names used \_\_\_\_\_ Dates of usage \_\_\_\_\_

**Answer these questions truthfully, even if the condition was ultimately expunged, reversed or otherwise set aside. If any of the boxes are marked "YES", fill in the information below and attach a letter of explanation.**

2. Have you ever been convicted of any misdemeanor offense(s) other than traffic violation(s)? ☐ Yes, ☐ No
3. Have you ever been convicted of a DUI offense? ☐ Yes, ☐ No
4. Have you ever been convicted of a felony? ☐ Yes, ☐ No
5. Have you ever been convicted of a sex or drug related offense? ☐ Yes, ☐ No
6. Have you ever been convicted of a dangerous crime against children as defined in A.R.S. §13.604.01? \*\* ☐ Yes ☐ No
7. Have you ever been arrested for any offense which has not been resolved? ☐ Yes, ☐ No

| CONVICTION INFORMATION            |       |                                |                     |
|-----------------------------------|-------|--------------------------------|---------------------|
| CONVICTION CHARGE                 |       | DATE OF CONVICTION             | COURT OF CONVICTION |
| CITY                              | STATE | AMOUNT OF FINE                 | LENGTH OF JAIL TERM |
| FACTUAL DETAILS OR OTHER REMARKS: |       | LENGTH AND TERMS OF PROBATION: |                     |

\*CONVICTION means the final judgment on a verdict or a finding of guilty, a plea 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.

\*\*A.R.S. § 13.3716 requires applicants to give notice of any conviction for dangerous crimes against children. These crimes are defined in A.R.S. § 13.604.01 as second-degree murder, aggravated assault, sexual assault, molestation of a child, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping and sexual abuse, if any of these crimes are committed against a minor under 15 years of age.

I hereby certify that the information presented on this application is true, accurate and complete. I authorize the investigation of all statements contained herein and understand that any document relevant to this information may be reviewed by the agents of the Pinal County School Superintendent. I authorize the PCSS to make reference and criminal background checks prior to appointment and I will execute such documents to facilitate this investigation. **I understand that my appointment is not finalized until the background investigation has been completed and the Pinal County School Superintendent has officially approved my appointment. I understand that misrepresentation or omission of pertinent facts may prohibit my appointment. Furthermore, I understand that I have no right of access to any materials submitted and information gathered by the PCSO during the application process and that such materials and information are considered the sole property of the Pinal County School Superintendent's Office.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date