

FOR OFFICE USE ONLY					
DATE RECEIVED:					
☐ 3 LETTERS ☐	COMP VERIF				
□ RESUME □	CONTRACT				
□ W-9					
☐ DATE TRAINED:					

ARIZONA DEPARTMENT OF EDUCATION SCHOOL EFFECTIVENESS DIVISION SOLUTIONS TEAM APPLICATION

Arizona Department of Education does not discriminate on the basis of race, color, national origin, sex, disability, or age.

1.	LAST NAME FIRST NAME		9.	MY PRIMARY EXPERIENCE IN EDUCATION HAS BEEN: (Check all that apply) URBAN/INNER CITY SUBURBAN
2.	PREFERRED EMAIL	□ HOME □ WORK		□ RURAL □ CHARTER □ ALTERNATIVE EDUCATION
3.	PREFERRED PHONE NO.	□ HOME □ WORK □ CELL		□ RESERVATION□ HIGH ELL□ HIGH POVERTY
 4. 5. 	() ALTERNATE PHONE NO.	□ HOME □ WORK □ CELL	10.	HAVE YOU SERVED ON A NORTH CENTRAL PEER REVIEW TEAM IN THE LAST FIVE YEARS? ☐ YES ☐ NO
	HOME STREET/NUMBER CITY STATE	ZIP	11.	ARE YOU CURRENTLY SERVING ON YOUR SCHOOL IMPROVEMENT TEAM? YES NO
6.	CHECK ONE: CURRENTLY EMPLOYED RETIRED* (YEAR RETIRED		12.	ARE YOU CURRENTLY SERVING ON YOUR SCHOOL SITE COUNCIL? ☐ YES ☐ NO
	*Retirees must be sure that their reduction details involvement in schools in the years.		13.	I PREFER TO SERVE AS: ☐ MEMBER ☐ LEADER
7.	CURRENT POSITION			I PREFER TO VISIT: □ ELEMENTARY SCHOOLS □ MIDDLE OR JUNIOR HIGH SCHOOLS □ HIGH SCHOOLS
	DISTRICT/LEA NAME		16.	I AM WILLING TO TRAVEL TO THE FOLLOWING COUNTIES:
	SCHOOL NAME			□ ALL COUNTIES □ APACHE COUNTY □ COCONINO COUNTY
	SCHOOL STREET/NUMBER			☐ COCHISE COUNTY ☐ GILA COUNTY ☐ GRAHAM COUNTY
	CITY STATE	ZIP		☐ GREENLEE COUNTY ☐ LA PAZ COUNTY
8.	INDICATE YEARS OF EXPERIENCE AS	S:		■ MARICOPA COUNTY
	TEACHER			□ MOHAVE COUNTY□ NAVAJO COUNTY
	PRINCIPAL ASSISTANT PRINCIPAL			□ PIMA COUNTY
	OTHER SCHOOL POSITION			PINAL COUNTY
	SUPERINTENDENT OR ASST. OTHER DISTRICT POSITION:			☐ SANTA CRUZ COUNTY ☐ YAVAPAI COUNTY
	UNIVERSITY FACULTY OTHER:			YUMA COUNTY
		-		CONTINUED ON NEXT PAGE →

	I AM ABLE TO SERVE: ☐ THREE DAYS ☐ SIX DAYS ☐ NINE OR MORE DAYS			
18.	LANGUAGES OTHER THAN ENGLISH IN WHICH I CAN CO	MMUNICATE:		
19.	A.R.S. §15-241 REQUIRES THAT INDIVIDUALS SERVING OF IN ONE OR MORE OF THE FOLLOWING AREAS. FOR THE RELATED POSITIONS AND YEARS OF EXPERIENCE FROM MASTER TEACHER:	E AREA(S) YOU CHECK BELOW, CITE		
	□ CURRICULUM/ASSESSMENT SPECIALIST:			
	□ FISCAL ANALYST:			
	FOR PURPOSES OF AVOIDING ANY POTENTIAL CONFLIC ARIZONA SCHOOLS/DISTRICTS WITH WHICH YOU HAVE A CONSULTANT.			
SPE	ASE INCLUDE A RESUME AND THREE (3) <u>CURRENT</u> LETT ECIFICALLY ADDRESS EXPERTISE AS A MASTER TEACHI ECIALIST, AND/OR FISCAL ANALYST.			
I certify that the information presented on this application and my enclosed resume is true, accurate, and complete to the best of my knowledge and belief. I authorize the investigation of all statements contained in the application and resume. I also acknowledge that should an investigation at any time disclose any misrepresentation or falsification, my application and resume may be removed from further consideration, and/or my service with ADE may be terminated.				
	Signature	Date		

RETURN TO KEGA LEFFARD ARIZONA DEPT. OF EDUCATION 1535 W. JEFFERSON ST. – BIN 10 PHOENIX, AZ 85007