GUAM COMMUNITY COLLEGE GOVERNMENT OF GUAM EMPLOYMENT APPLICATION

GENERAL INSTRUCTIONS & INFORMATION

SUBMITTING YOUR APPLICATION:

Complete this application by printing in black/blue ink or typing. If additional space is needed, continue on item #12, or a separate sheet(s) may be attached. If you wish to submit a RESUME, your resume must contain all of the required information under item #11, Work Experience Section, for each work described. Resumes not in compliance may be considered incomplete. WE WILL ONLY ACCEPT APPLICATIONS ORIGINALLY FORMATTED BY THE GOVERNMENT OF GUAM. You must submit an application for each currently announced position you are applying for with your original signature. Your application is non-transferable. All applications being submitted must comply with the deadline stated on the JOB ANNOUNCEMENT.

RATING PROCESS:

The contents of the employment application and other substantiating documents will be thoroughly reviewed to determine if you meet the minimum qualification requirements of the position. Under the Work Experience Section, item #11, be sure to include all your work experience in order to help us evaluate your qualifications. Volunteer work and employment in the military service on a part-time basis as well as work experience in a detailed capacity will be credited based on their own merits. You maybe rated ineligible if you do not provide sufficient information and/or supporting documents. Submission of new information on education and/or work experience after an eligibility list is established is prohibited. If certified for employment consideration, you will be required to fill out a Suitability Determination form.

NOTIFICATION OF RESULTS:

Your employment application is part of an examination process. Your employment application will be evaluated and rated. An incomplete employment application will result in an ineligible rating. You may be scheduled for additional examinations depending on the position requirements. The results will be mailed to you. IT IS YOUR RESPONSIBILITY TO INFORM THIS OFFICE OF ANY CHANGES TO YOUR ADDRESS OR TELEPHONE NUMBER.

REQUIRED DOCUMENTS:

To validate credentials you may claim, (e.g. High School Diploma, College Transcript, DD-214), an original or certified copy of the document(s) must accompany the application. Failure to provide proof may result in your disqualification. Additionally, please refer to the specific job announcement for all other required documents needed. Transcripts from institutions outside of the U.S. must be certified as a Comprehensive Course-by-Course Report by a National Association of Credential Evaluation Services (NACES) member organization www.naces.org.

U.S. MILITARY PREFERENCE POINTS:

As a member of the Armed Forces of the United States or the Guam Police Combat Patrol, you are entitled to claim five preference points, if you have completed at least 180 consecutive days of active duty and received an honorable discharge. To claim the points, you must fill out a Preference Points request form and provide your DD-214, which indicates your service dates and character of service. To claim an additional five (5) points for disability, you must provide a letter from the U.S. Veteran's Administration or the Department of Veteran's Affairs, which specifically states that you are entitled to Civil Service Preference for a service connected disability. If eligible for any of the preference points, the points will be added to your passing final earned rating. Preference points are only awarded for initial employment.

PREFERENCE POINTS FOR PERSONS WITH DISABILITIES:

As a person with a disability, you are entitled to claim five preference points, if you are certified with a disability. To claim the points, you must fill out a Preference Points request form and provide a certification letter from the Department of Public Health and Social Services. Preference points are only awarded for initial employment.

PREFERENTIAL HIRE STATUS:

As a recipient of an educational loan or merit scholarship, you are entitled to first offer of employment in accordance with Public Law 15-127. To claim preferential hire, you must submit your eligibility letter from the University of Guam Financial Aid Office, along with your job application. Preference hiring is only awarded for initial employment.

WORK ELIGIBILITY:

U.S. citizens may apply for all Government of Guam jobs. Non U.S. citizens, such as U.S. Permanent Residents, citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau may apply for employment in MOST Government Guam jobs. Please consult the job announcement for any specific requirement. Public Law 99-603 (8 USC Section 1324A) requires the Government of Guam to verify your identity and work eligibility. When offered a position, you will be required to provide proof of identity and eligibility for employment in the United States. The following are valid documents of proof, one document from column A, OR one document each under column B AND C:

COLUMN A

OR

COLUMN B

ANI

COLUMN C

- U.S. Passport
- Naturalization Card

- Government of Guam I.D. Card
- Driver's License
- Other Proof of Work Eligibility

- Green Card
- Original Social Security Card

If you have any questions, please contact the Guam Community College, Human Resources Office at (671) 735-5537/5538, Fax: (671) 734-5238, email: hr@guamcc.edu or mail: P.O. Box 23069 Barrigada, Guam 96921.



OFFICIAL USE ONLY - REQUIRED DOCUMENTS

Human Resources Office

Acknowledgement of Receipt

JA#	Position Title:	E I SOUL DA
The Guam Communidocuments:	ity College Human Resource	s Office acknowledges receipt of the following
Application Form		Professional License/Certification
Resume		1. 2.
Form DD 214		For Faculty and Administrator Positions Letters of Reference
☐High School/GED Di	ploma/Transcripts	1. 2.
College/University ☐Official ☐Copy	/ Transcripts	3.
1.		Other Documents not listed:
2.		I
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		3.
Original Police and	Court Clearances are due i	ose of business for any job announcements. Ipon the request of the GCC Human Resources dated no more than 30 days from the date of
4		
	☐ Original ☐ Copy ☐ Guam Police Clearance ☐ Superior Court of Guam Cle	earance



OFFICIAL USE ONLY - REQUIRED DOCUMENTS

Accepted By (Print Name & Initial):

EMPLOYMENT APPLICATION	Sept.		ate: ————————————————————————————————————		YN	N/A		Ü	ed For:	D	11
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11. WORK EXPERIENCE This portion must be accurate and complete. Please be as detailed as possible to obtain full credit for your work experience. Applications lacking sufficient information may be rejected. Under A, please indicate whether it is your PRESENT OR LAST EMPLOYER IF NOT CURRENTLY EMPLOYED. List your entire work history, including part-time, volunteer and detail appointments. List jobs in order by starting with your present job or last job if you are unemployed. List each promotion as a separate job. Duties should include most difficult or most important responsibilities, and / or most significant accomplishments in the position held, to include percentage of time spent. Supervisory experience is a combination of subject matter knowledge and skills and/or managerial abilities related to getting the work done through other people. A. NAME OF EMPLOYER Present Telephone No.: Mo ____ Day ____ Year Immediate Supervisor: Mo ____ Day ____ Year _ To: Position Title: Hrs. Worked Per Week: Type of Business (i.e. construction): Salary: Reason for Leaving: This Position Is: Supervisory Non-Supervisory Permanent **Тетрогату** Specific Duties Performed and Percentage of Time Spent: B. NAME OF EMPLOYER Telephone No.: MAILING ADDRESS: Mo ____ Day ____ Year Immediate Supervisor: Mo ____ Day ___ To: Position Title: Hrs. Worked Per Week: Type of Business (i.e. construction): Salary: Reason for Leaving: This Position Is: ☐ Temporary ☐ Supervisory ■ Non-Supervisory Permanent Specific Duties Performed and Percentage of Time Spent: C. NAME OF EMPLOYER Telephone No.: MAILING ADDRESS: Mo ____ Day ____ Year Immediate Supervisor: Mo Day To: Position Title: Hrs. Worked Per Week: Type of Business (i.e. construction): Salary: Reason for Leaving: Temporary This Position Is: Supervisory ☐ Non-Supervisory Permanent Specific Duties Performed and Percentage of Time Spent:

11. WORK EXPERIENCE (Continued)

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	13. PREFERENTIAL HIRE STATUS		
fire Status, please check "Yes" and attach le Government of Guam. Approval of claim is	iovernment of Guam Merit Scholarship or Education ter of eligibility, if not, check "N/A." This status is subject to verification. tions in which you claimed preferential hire status (Companies)	applicable only for initial emp	loyment with the
. Department/Agency:	Position Title:	Year:	☐ Yes
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IMPORTANT INFORMATION PLEASE READ BEFORE SIGNING THIS APPLICATION

Job Application: The job application you submit is considered current for one year from the date the eligibility list is established. IT IS YOUR RESPONSIBILITY TO INFORM THIS OFFICE OF ANY CHANGES TO YOUR ADDRESS AND TELEPHONE NUMBER.

Evaluation Methods: To determine your qualifications for the position which you are applying, job related tests designed to reveal your capacity to successfully perform the duties of the position are utilized. Most positions require an evaluation of your application to determine your qualification based on a rating of your education and experience. Additional examinations such as a written and a performance test may be required depending on the particular job requirements of the position. The top eligibles will be referred for employment consideration for each vacancy subject to the Personnel Rules and Regulations of the respective department or agency. If a selection interview is required, you will be notified. Failure to submit to employment examination requirements will result in an ineligible rating.

Pre-Employment Medical Examination: All applicants accepting employment with the government must take and pass a pre-entry physical examination as a condition of employment or continued employment. Applicants accepting employment with educational institutions and / or agencies requiring health clearance must take and pass a pre-entry and annual Tuberculosis Test as a condition of employment. All applicants / employees are responsible for all expenses incurred for this examination. Failure to satisfactorily meet or complete the specific requirements of the examination may result in your disqualification for or termination from employment.

Background Investigation: When you sign this job application, you authorize the government to seek and obtain information regarding your suitability for employment. All factors which are job related may be investigated (e.g., previous employment, educational credentials, and criminal record). All information obtained may be used to determine your eligibility for employment in accordance with equal employment opportunity guidelines In addition, when you sign this application, you release previous employers and job related sources from legal liability for the information they provide.

Probationary Period: If you are selected for permanent appointment to a classified position, you must initially undergo a probationary period subject to the Personnel Rules and Regulations of your respective department or agency. All temporary or Limited term employees do not serve a probationary period and are subject to termination at will.

17. APPLICANT STATEMENT (ATTENTION: Read the following certification and agreement before signing this application). I, hereby certify that all statements made on this application are true, complete, and correct to the best (PRINT) of my knowledge. I understand that any false or dishonest answer to any question on this application may be grounds for rating me ineligible for employment or for dismissing me after an appointment. I hereby authorize the use of my social security number for the purpose of record keeping and authorize any investigation of all statements made, my personal history, including checks of fingerprints, police records and former employers and all other information as deemed necessary to make a proper employment decision. I hereby release previous employers / related sources from legal liability for information they provide regarding my suitability for employment with the Government of Guam. SIGNATURE OF APPLICANT (sign in blue/black ink) DATE

18. PERSONAL CONTACT

(Optional: In the event that we are unable to contact you, please give two names for reference.)

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Government of Guam SUITABILITY DETERMINATION

Name:	Social Security Number: Agency: Position	п Арј	olied Fo	r:	
service do not n	formation will be used to determine your suitability for employment. Convictions, dismissals from employment, or dishonor can automatic disqualification. In determining employment suitability, we will evaluate the circumstances of each individual the position being applied for.	ible sej case, k	parations ecping in	from n	nilitary the
	SAL FROM EMPLOYMENT/DISHONORABLE SEPARATIONS FROM MILITARY SERVICE the past seven years, were you:				
	Discharged (fired) from employment for any reason?		YES		NO
•	Asked to resign (quit) after being informed that your employer intended to discharge (fire) you for any reason?		YES		NO
	Separated from military service under conditions other than honorable?		YES	П	NO
If "ves" to any	of the questions above, please give:				
	er's Name / address:				
	Action: Reason in Each Case:			-	
2. CONVIC	TION FOR VIOLATION OF LAW				
	Have you been convicted of a violation of law (e.g., felony, misdemeanor, etc.)?				
1)	Note: In answering this question, you need NOT report the following: Arrests not followed by convictions		YES		NO
2)	Convictions which were annulled or expunged		YES		NO
3)	Offense for which you were tried as a minor or juvenile		YES		NO
,			YES		NO
	Have you been convicted of any act, attempt, or conspiracy to overthrow the State / Government of Guam or the federal government by force or violence?	Ц	YES	Ш	NO
a conviction, inc	I the above, you must submit a police clearance and provide an explanation including dates and circumstances surrounding the icate the type of penalty imposed.	e incide	ent, Also	, in the	case of
3. FAMILY	MEMBERS IN THE GOVERNMENT				
Does th	s agency currently employ, in any capacity, any immediate member of your family?		YES		NO
If "yes", please i	ist the name(s), relationship, and position title. (The purpose of this question is to avoid violation of the Nepotism Rule, or relationship in the first degree of "blood relationship" may not be employed in the same department or agency in a supervisor-subordinate abers under the same household are prohibited; exception to this rule may be made for the good of the government service.)	ated str	ntutes, wh enship an	nereby d when	spouses e two or
	NAME RELATIONSHIP POSITION	IT NC	TLE		
	APPLICANT STATEMENT				
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I, true, complete dismissing me	(ATTENTION: Read the following certification and agreement before signing this form). ,hereby certify that all statements made on this suitability form (PRINT NAME) and correct to the best of my knowledge. I understand that any false or dishonest answer to any question on the			e grou	ınds fo



Government of Guam PREFERENCE POINTS

Request Form

This form is used to award preference points for Veterans of the Armed Forces of the United States or the Guam Police Combat Patrol and Persons with a disability. This form is separate and apart from the job application and will not be attached to the job application submitted. HOWEVER, IF APPLYING FOR MORE THAN ONE POSITION, YOU MUST COMPLETE THIS FORM FOR EACH APPLICATION SUBMITTED IN ORDER TO RECEIVE CREDIT FOR EACH POSITION APPLIED.

NAME:		SS#:	POSITION TITLE:	JOB ANNOUNCEMENT NO:
parations from military	service do not mean	ermine your suitability for automatic disqualification ents of the position being a	employment. Convictions, dismissal. In determining employment suitabi pplied for.	s from employment, or dishonorable ility, we will evaluate the circumstances of each
Do you wish to claim Branch:	DINTS FOR VETEI m preference points 5 preference poin	i? If yes, and claiming Mi Type of Discharge:	OL (Applicable only for initial emploitary Preference Points, specify: Dates of preference points	oyment) of Service:
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Government of Guam FOR TEACHING POSITION(S)

FORM A2

<u>INSTRUCTIONS:</u> (To be completed and submitted along with the Employment Application Form) If you are applying for a teaching position, please specify the level and area of interest.

Name:		SS#:	Position Title:	Job Announcement Number:
☐ Elementary Teacher:	ner: Kindergarten:		Primary:	Intermediate:
Secondary Teacher:	Please specify Area of Interest:		Please Specify:	Please Specify:
Post-Secondary Teacher:	Please specify Area of Interest:		Please Specify:	Please Specify:
Special Projects Instructor:	Please	specify Area of Interest:	Please Specify:	Please Specify:
Special Education:	Please	specify Area of Interest:	Please Specify:	Please Specify:
Chamorro Language Teacher:	□ Ele	ementary Secondary	Post - Secondary	EMPLOYMENT TYPE:
Guidance Counselor:	☐ Ele	ementary Secondary	Post - Secondary	☐ Full-Time Regular
School Librarian:	☐ Ele	ementary Secondary	Post - Secondary	☐ Full-Time Limited Term
School Health Counselor:	☐ Ele	ementary Secondary	Post - Secondary	Part-Time Regular
On-Call Substitute Teacher:	☐ Ele	mentary Secondary	Post - Secondary	Part-Time Limited Term
Headstart Teacher:	Oth	ner:		Part-Time Summer

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Government of Guam **VOLUNTARY DATA RECORD SURVEY**

(EQUAL EMPLOYMENT OPPORTUNITY DATA)

The purpose of this form is to monitor the Affirmative Action and Equal Employment Opportunity representation within our diverse community. We are seeking your assistance to help us in this effort by accurately completing this form. Your cooperation is completely

	POSITION TITLE APPLIED FOR:				
	JOB ANNOUNCEMENT NO.:		DATE:		
	CITIZENSHIP:				<u> </u>
	U.S.	Republic of Ma	arshall Islands		
	Permanent Resident	Republic of Pa			
	☐ Federated States of Micronesia	Other:			
•	HOW DID YOU LEARN OF THE JOB FOR Job Information Bulletin Board, Gove Department of Administration, Division One Stop Career Center, Department of Job Announcement. Specify where see Newspaper Announcement. Specify: Relative, Friend, or Government Employed	rnment Agency. Specify on of Personnel Manager of Labor en:	: nent Job Information		
	SEX: Male Female	6.	DATE OF BIRTH	: /	/ Year
	ETHNIC ORIGIN: Non-Resident Alien. Specify Country Black, Non-Hispanic American Indian or Alaskan Native Specify: Asian or Pacific Islander. Specify: Hispanic Other. Specify: Race/Ethnicity Unknown		Asian	ino	: Korean Micronesian Thai Vietnamese Other
	MARITAL STATUS:	<u> </u>			