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 awarded for initial employment and subsequent applications (Public Law 31-177; §4104(b) chapter 4, GCA).

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 AND COLUMN C

- U.S. Passport
- Naturalization Card

- Government of Guam I.D. Card
- Driver s License

- Green Card
 - Original Social Security Card

Other Proof of Work Eligibility

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

Kulehon Kumunidåt Guåhan

Acknowledgement of Receipt

JA#Pos	ition Title:
The Guam Community College H documents:	Iuman Resources 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 Diploma/Transcr	_
College/University Transcripts Official Copy	2. 3. Other Documents not listed:
<u>. </u>	
3.	
	<u>2.</u> 3.
Original Police and Court Clear	e prior to the close of business for any job announcements. rances are due upon the request of the GCC Human Resources ances should be dated no more than 30 days from the date of
	☐Copy blice Clearance Court of Guam Clearance

OFFICIAL USE ONLY - REQUIRED DOCUMENTS

Accepted By (Print Name & Initial):

10. LIST MANUALS, EQU	UIPMENT, LICEN	NSES, SPECIA	AL TRAININ	G, AND/OR CI	ERTIFICA	TES PE	RTINEN	Т ТО ТНЕ	POSITION	APPLIED 1	FOR:
Major Undergradua	te Courses	Sem. Hrs.	Qtr. Hrs.	1	Major Gra	duate Co	ollege Co	urses	S	em. Hrs.	Qtr. Hrs.
5		From	То	Semester	Qtr.						
Name and Location of Coll University	lege or	Dates of A	ttendance	Credit Hrs. (Completed		Cours	e of Study		Type of Degree	Year Earned
	Indicate L School:	ast Grade Cor	npleted in Hi	gh School (circl	e one):	9 th	10 th	11 th	12 th		
	Completed Location:	d G.E.D. – Sch	ool:	Certificate No	D.:	Year	Graduate	ed:			
	High Scho	ool Graduate –	School:		Year Grad	uated:					
9.EDUCATION:	Please check and		your formal e		mplishment	ts:	E-Mail	1:			
8. TELEPHONE NO.: Ho		Work:		Cell:			E-Mai	1.			
7. HOME ADDRESS: S	Street Number				City			State		Zip Code	
6. MAILING ADDRESS	S: P.O. Box or Stre	eet Number			City			State		Zip Code	
4. NAME: Last			First	Middl	e	5. SO	OCIAL S	SECURITY	NO.:		
1. POSITION APPLIEI) FOR:			2. 3	JOB ANNO	DUNCE	MENT N	0.:		VEST SALA CEPTABLE:	
Applicable). Your Social INSTRUCTIONS & IN	FORMATION"			,							
APPLICATION INSTR											
				Other: APPLICATION	I #:	Y	N	OS #:			_
WE ARE A OPPORTUNIT		FOR	RM A	Police Clearance Court Clearance		Y	N N	N/A N/A			
\mathbf{GU}_{A}	AM	1		H.S. Diploma/GF College Transcrip			N N	N/A N/A			
GOVERN	MENT OF	THE THE	MANO	Гуре:				State:	Ех	xp. Date:	
APPLICA	ATION	G U	AM	Oriver's License		Y N	N/A	Appli	ed For:		
EMPLOY	MENT	1	OK GULAM I	Date:				Agen			
		1					, tea 2) (.				

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 MAILING ADDRESS: Last Employer	Telephone No.:			From:	Mo	Day	Year	
	Immediate Supervisor:			To:		Day		
	Type of Business							
D W mw	(i.e. construction):		1		Hrs. Wo			
Position Title:	Salary:			or Leaving:				_
	This Position Is:	∐ Su _l	pervisory	☐ Non-Sup	ervisory	☐ Peri	manent [Temporary
Specific Duties Performed and Percentage of	Time Spent:							%
B. NAME OF EMPLOYER MAILING ADDRESS:	Telephone No.:				From:	Mο	Day	Year
WINDING REPRESS.	Immediate Supervi	isor:			To:		Day	
	Type of Business							1 eai
	(i.e. construction):		Г		Hrs. Wo	orked Per V	vеек:	
Position Title:	Salary:			or Leaving:				_
	This Position Is:	∐ Su _l	pervisory	☐ Non-Sup	ervisory	☐ Peri	manent [Temporary
Specific Duties Performed and Percentage of	Time Spent:							%
C. NAME OF EMPLOYER MAILING ADDRESS:	Telephone No.:			From:	Mo	Day	Year	
1,11,11,10,11,11,11,11,11,11,11,11,11,11	Immediate Supervisor:				To:		Day	
	Type of Business					orked Per V		
D. C. Mila	(i.e. construction):				IIIS. WC	JI KEU I EI V	VCCK.	
Position Title:	Salary:			or Leaving:				
	This Position Is:	☐ Suj	pervisory	☐ Non-Sup	ervisory	☐ Peri	manent	Temporary
Specific Duties Performed and Percentage of	Time Spent:							%
	-			-			-	

11. WORK EXPERIENCE (Continued)

D. NAME OF EMPLOYER MAILING ADDRESS:	Telephone No.:			Mo	Day	Year	
	Immediate Supervisor:		From: To:		Day		
	Type of Business (i.e. construction):		Hrs. Wo				
Position Title:	Salary:	Reason for Leaving:					
	-	ervisory Non-Supe	rvisory	F	Permanent	☐ Tempor	ary
Specific Duties Performed and Percentage of		· ·					%
E. NAME OF EMPLOYER	Telephone No.:						
MAILING ADDRESS:			From:		Day		
	Immediate Supervisor: Type of Business		To:		Day	Year	
	(i.e. construction):		Hrs. Wo	ked Pe	r Week:		
Position Title:	Salary:	Reason for Leaving:					
	This Position Is: Supe	ervisory Non-Supe	rvisory	☐ F	Permanent	☐ Tempor	
Specific Duties Performed and Percentage of	Time Spent:						%
F. NAME OF EMPLOYER MAILING ADDRESS:	Telephone No.:		From:	Mo	Day	Year	
	Immediate Supervisor:		To:		Day		
	Type of Business (i.e. construction):		Hrs. Wo				
Position Title:	Salary:	Reason for Leaving:					
	This Position Is: Supe	-	rvisorv	ПБ	Permanent	☐ Tempor	arv
Specific Duties Performed and Percentage of	1	1 Tron Super	. 11501			Tempor	%
<u> </u>	•						

12. USE THIS BLOCK TO CONTINUE	E YOUR RESPONSES TO ANY NUMBERED SEC	CTIONS OR ITEMS: (Plea	ase specify No. of item.)			
	12 DDEEEDENTIAL HIDE CTATUS					
	13. PREFERENTIAL HIRE STATUS					
	sovernment of Guam Merit Scholarship or Educationa etter of eligibility, if not, check "N/A." This status is a subject to verification.					
If applicable, please specify previous applica specify:	tions in which you claimed preferential hire status (Co	ontinue on separate sheet if no	ecessary). If yes, please			
1. Department/Agency:	Position Title:	Year:	Yes			
2. Department/Agency:	Position Title:	Year:	□ No			
3. Department/Agency:	Position Title:	Year:	N/A			
14. FOR FACULTY AN	D ADMINISTRATIVE POSITIONS IN EDUCA	TIONAL INSTITUTIONS	ONLY			
or non=-tenure, courses taught, other ass b. List other employment information which c. Major research and publication activitie	For each position indicate the dates of employment (magnetic signments, salary (9 month or 12 month), academic ratch you feel may support your application. Solve bibliographic reference. The content of the content	nk and the name of the Depar	or part-time, tenure track trent Chair or Dean.			
	15. REFERENCES					
	dge of your qualifications. Use major professors, depark these people to send a confidential evaluation directl					
NAME	ADDRESS	T	TLE			
16. If you plan to request a relocation reimbursement, please supply us with the name, relationship, and age of any dependent (s) who will be accompanying you to Guam. (ONLY IF APPLICABLE).						
NAME	RELATIONSHIP	A	AGE			

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 befor	e signing this application).
I,(PRIN		is application are true, complete, and correct to the best
employment or for dismissing authorize any investigation of a information as deemed necessary	and that any false or dishonest answer to any question on this at me after an appointment. I hereby authorize the use of my social all statements made, my personal history, including checks of fingery ary to make a proper employment decision. I hereby release previding my suitability for employment with the Government of Guam.	security number for the purpose of record keeping and prints, police records and former employers and all other
	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.)

NAME	ADDRESS	TELEPHONE NO.	RELATIONSHIP



Government of Guam SUITABILITY DETERMINATION

FORM A4

Name:	Social Security Number:	Agency:	Position Ap	oplied For:			
The following information will be used service do not mean automatic disqualif requirements of the position being appli	ication. In determining employment su						
Within the past seven years,	•	PARATIONS FROM MIL	ITARY SERVICE				
	from employment for any reason? quit) after being informed that yo	ur employer intended to dis	scharge (fire) you for any] YES □ NO] YES □ NO			
	litary service under conditions othe	r than honorable?		YES NO			
If "yes" to any of the questions abo Employer's Name / address: Date of Action:		on in Each Case:					
Note: In answering 1) Arrests not follow 2) Convictions which 3) Offense for which Have you been con	nvicted of a violation of law (e.g., for this question, you need NOT reported by convictions a were annulled or expunged you were tried as a minor or juveninvicted of any act, attempt, or conspinent by force or violence?	rt the following: le piracy to overthrow the State		YES NO			
3. FAMILY MEMBERS IN TH		ioto mambar of vour family?		YES □ NO			
If "yes", please list the name(s), relation and persons within the first degree of "to more family members under the same h	lood relationship" may not be employed	this question is to avoid violation in the same department or ager	ncy in a supervisor-subordinate relati	tatutes, whereby spouses			
NAME	REI	ATIONSHIP	POSITION T	TITLE			
APPLICANT STATEMENT (ATTENTION: Read the following certification and agreement before signing this form).							
I,, hereby certify that all statements made on this suitability form are (PRINT NAME) true, complete and correct to the best of my knowledge. I understand that any false or dishonest answer to any question on this form may be grounds for dismissing me after an appointment.							
	SIGNATURE OF APPLICANT (sign in blue/black ink)	Γ	DATE				



Government of Guam PREFERENCE POINTS

Request Form

FORM A3

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. SS#: POSITION TITLE: NAME: JOB ANNOUNCEMENT NO: The following information will be used to determine your suitability for employment. Convictions, dismissals from employment, or dishonorable separations from military service do not mean automatic disqualification. In determining employment suitability, we will evaluate the circumstances of each individual case, keeping in mind the requirements of the position being applied for. **4.** PREFERENCE POINTS FOR VETERANS / COMBAT PATROL (Initial employment and subsequent applications (Public Law 31-177; §4104(b) chapter 4, GCA). **Do you wish to claim preference points?** If yes, and claiming Military Preference Points, specify: Type of Discharge: Dates of Service: Please Indicate: 5 preference points 10 preference points 5. PREFERENCE POINTS FOR PERSONS WITH DISABILITIES (Applicable only for initial employment) **Do you wish to claim preference points?** If yes, and claiming Disability Preference Points, specify: Date of Certification: APPROVAL OF POINTS IS SUBJECT TO VERIFICATION. PLEASE SUBMIT THE APPROPRIATE DOCUMENTS AS REQUSTED UNDER "GENERAL INSTRUCTIONS & INFORMATION" FOR THE TYPE OF PREFERENCE POINTS YOU ARE CLAIMING. APPLICANT STATEMENT (ATTENTION: Read the following certification and agreement before signing this form). , hereby certify that all statements made on this suitability form are true, complete and (PRINT NAME)

correct to the best of my knowledge. I understand that any false or dishonest answer to any question on this form may be grounds for dismissing me after an

SIGNATURE OF APPLICANT

DATE

(sign in blue/black ink)

appointment.

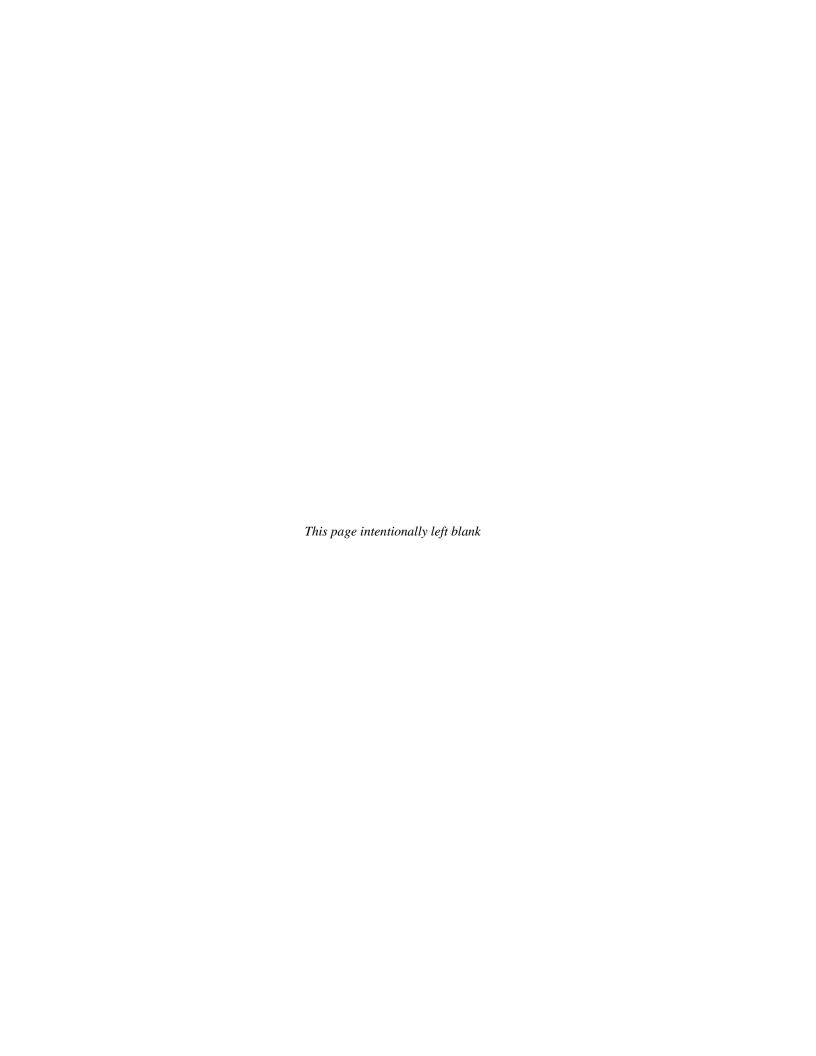


Government of Guam FOR TEACHING POSITION(S)

FORM A2

INSTRUCTIONS: (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:	Kinder	rgarten:	Primary:	Intermediate:			
Secondary Teacher:	Please specify Area of Interest: Please Specify:		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:	☐ Elementary ☐ Secondary		☐ Elementary ☐ Secondary		Post - Secondary	Part-Time Regular	
On-Call Substitute Teacher:	□ Ele	ementary Secondary	Post - Secondary	Part-Time Limited Term			
Headstart Teacher:	Ot1	her:		Part-Time Summer			





Government of Guam VOLUNTARY DATA RECORD SURVEY

(EQUAL EMPLOYMENT OPPORTUNITY DATA)

FORM A1

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

	untary. The information is for data purposes only and be used to make a decision regarding your application			
	POSITION TITLE APPLIED FOR: JOB ANNOUNCEMENT NO.:	DATI	E:	
3.	CITIZENSHIP: U.S. Permanent Resident Federated States of Micronesia	Republic of Marsha Republic of Palau Other:	ll Islands	
4.	HOW DID YOU LEARN OF THE JOB FOR WH Job Information Bulletin Board, Governme Department of Administration, Division of One Stop Career Center, Department of La Job Announcement. Specify where seen: Newspaper Announcement. Specify: Relative, Friend, or Government Employer Other. Specify:	ent Agency. Specify: f Personnel Management abor e		
5.	SEX: Male Female	6. DA	ATE OF BIRTH: Month Day	Year
7.	ETHNIC ORIGIN: Non-Resident Alien Specify Country: Hispanic/Latino American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White Two or More Races Race/Ethnicity Unknown		8. ETHNIC GROUP: Asian Indian Burmese Chinese Filipino Japanese Korean Thai Vietnamese Specify Other:	Chamorro Chuukese Kosraean Marshallese Palauan Ponapean Yapese
	MARITAL STATUS: Single Married			
	e Government of Guam does not discriminate on th tional or ethnic origin, age, or citizenship status in a			

employment. Guam law also prohibits discrimination on the basis of marital status and political affiliation.