We consider applicants for all positions without regard to race, color, national origin, age, religion, sex, marital status, veteran or military status, disability, or any other legally protected status.

## An Equal Opportunity Employer

| æ                | Date of application   |  |                |             |                                      |                                       |  |
|------------------|---|--|----------------|-------------|--------------------------------------|---------------------------------------|--|
| Personal Data    | Name  |  | First          |             | Midd                                 | Middle initial                        |  |
|                  | Street/Box Other address where you may be reached   |  |                | City        | State                                | ZIP Code                              |  |
| ersc             | Work phone  |  | Home phone     |             |                                      |                                       |  |
| Д                | Other name that may appear (Used for certification, refer   | on records<br>ence, and criminal i       | nistory record | checks)     |                                      |                                       |  |
| Position Data    | List the position(s) you are a Credentials included with ap Résumé  All teaching and profess All transcripts showing Date you can begin work Have you been employed by If you answered yes, provide | plication:<br>sional certific<br>degrees | ates or lic    | censes<br>I | SD in the past? [                    |                                       |  |
|                  | Name and location of schools attended   | Course of and major/                     |                |             | , degree, certifi-<br>r license held | Year grad-<br>uated<br>(College only) |  |
| g                |   |  |                |             |                                      |                                       |  |
| ucation/Training |   |  |                |             |                                      |                                       |  |
| Educa            |   |  |                |             |                                      |                                       |  |
|                  |   |  |                |             |                                      |                                       |  |

| Certification  | Certificate or License Currently Held:  None Valid Texas Valid Other State Texas Emergency Texas One-Year: Expires Texas Temporary Administrative: Expires Level(s) of Certification: |                      |                      |                    |  |  |
|--|---|----------------------|----------------------|--------------------|--|--|
| Cer  | Areas of Specialization/Endo  | orsements (as listed | l on certification): |                    |  |  |
| List teaching experience beginning with most recent years. |   |                      |                      |                    |  |  |
| ce   | Name and location of school   | Type of assignment   | Dates<br>taught      | Reason for leaving |  |  |
| Experience   |   |                      |                      |                    |  |  |
|  |   |                      |                      |                    |  |  |
| Teaching   |   |                      |                      |                    |  |  |
|  |   |                      |                      |                    |  |  |
|  | Please provide a list of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Attach résumé if available.            |                      |                      |                    |  |  |
| ence   | School district/firm name   | Position/title       | Dates employed       | Reason for leaving |  |  |
| Experie  |   |                      |                      |                    |  |  |
| Other Work Experience                                      |   |                      |                      |                    |  |  |
| Other 1  |   |                      |                      |                    |  |  |
|  |   |                      |                      |                    |  |  |



| Professional Data   | Please list relevant professional activities. Omit references to organizations that would reveal race, age, ethnic origin, or religion.  Papers/articles published  |                                  |                               |                |                               |  |
|---------------------|---|----------------------------------|-------------------------------|----------------|-------------------------------|--|
| essio               | Seminars/workshops  |                                  |                               |                |                               |  |
| Prof                | Other related profess   |                                  |                               |                |                               |  |
|                     |   |                                  | the<br>ne relative's name and |                |                               |  |
| General Information | Have you ever been convicted of, plead guilty or no contest (nolo contendre) to, or received probation, suspension, or deferred adjudication for a felony or any offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with a minor)?   Yes No  If yes, please state where, when, and the nature of the offense |                                  |                               |                |                               |  |
|                     | Please list references the district can contact regarding your work history. Include all managers and supervisors who evaluated or supervised your performance at your last two employers.  |                                  |                               |                |                               |  |
|                     | Full name of reference  | School<br>district/<br>firm name | Mailing address               | Position/title | Area code,<br>phone<br>number |  |
| References          |   |                                  |                               |                |                               |  |
| Refe                |   |                                  |                               |                |                               |  |
|                     |   |                                  |                               |                |                               |  |
|                     |   |                                  |                               |                |                               |  |



| Verification | I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge and understand that any deliberate falsifications, misrepresentations, or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment.  I authorize the references listed on the previous page to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all such parties from liability for any damage that may result from furnishing the same to you.  I understand that the district is authorized by Texas Education Code §22.083 to obtain criminal history record information on applicants the district intends to employ. |  |  |
|--------------|--|--|--|
|              | Signature Date   |  |  |
|              | This application becomes the property of the district. The district reserves the right to accept or reject it. This application shall be considered active for months. If you have not received a response during this time period, you may reapply or reactivate your application.  |  |  |