

KRESS INDEPENDENT SCHOOL DISTRICT
P. O. Box 970
Kress, Texas 79052-0970

APPLICATION FOR EMPLOYMENT

Kress Independent School District maintains a policy of non-discrimination toward employees and applicants for employment with regard to race, color, religion, sex, age, national origin, disability or any other basis prohibited by statute.

Applicants for positions in the Kress Public Schools must fill out this form. Additionally, an official college transcript must be sent as soon as possible to the following:

Office of the Superintendent
Kress Independent School District
P. O. Box 970
Kress, Texas 79052-0970

Applicants should make an appointment for a personal interview.

(PLEASE PRINT)

DATE _____

NAME _____ SOCIAL SECURITY NO. _____
(Last) (First) (Middle)
(Please underscore name used)

PRESENT ADDRESS _____ PHONE NO. _____
(Street) (City) (State) (Zip Code)

PERMANENT ADDRESS _____ PHONE NO. _____
(Street) (City) (State) (Zip Code)

Have you ever applied for a job with the District before? Yes _____ No _____

If yes, state when _____

State your preference for teaching positions:

1st Choice _____

2nd Choice _____

3rd Choice _____

Are you employed now? Yes_____ No_____

If yes, state your present position and salary_____

If yes, why do you wish to change your position_____

If yes, may we inquire of your present employer? Yes_____ No_____

If no, explain why_____

Why did you become a teacher?_____

Are you related to any member of the Kress ISD Board of Trustees? Yes___ No___ If yes, please explain_____

Other than minor traffic violations, have you ever been convicted of a crime? Yes___ No___ If yes, please explain in detail_____

Note that "Yes" answer to the above question may not automatically disqualify you from all teaching positions.

Have you ever plead guilty to an offense involving moral turpitude? Yes___ No___ If yes, please explain in detail_____

Note that "Yes" answer to the above question may not automatically disqualify you from all teaching positions.

ACHIEVEMENTS AND ACTIVITIES

Please list academic honors, scholarships, or fellowships; memberships in academic honorary societies; or participation in or offices held in extracurricular activities. (You may exclude those indicating race, color, religion, sex, age, national origin or disability)._____

ADDITIONAL QUALIFICATIONS

Do you speak a foreign language? Yes ___ No ___ If yes, please list _____

Other than a regular teaching certificate, do you hold other types of special certificates? Yes ___ No ___ If yes, please list _____

Do you have military service experience? Yes ___ No ___ If yes, please state: Branch of service _____

Dates of service _____ Type of Discharge _____

Duties in the service, including schools and training: _____

EDUCATION

	Name and Location of School	No. of Years Attended	Did You Graduate? If yes, State Degree Earned	Major Fields of Study/Semester Hours	Minor Fields of Study/Semester Hours
High School					
College					
Graduate School					
Trade, Business or Correspondence School					
Courses Now Studying					

EMPLOYMENT HISTORY

Teaching Experience (List the most recent first):

School Years Taught	Name and Location of School	Annual Salary	Grade or Subjects Taught or Position Held	Exact Reason For Leaving (attach additional sheets if needed)

Please furnish dates and explanations for each period of unemployment of one month or more:

Non-teaching Experience (List the most recent first):

Date (Month and Year)	Name, Address and Phone No. of Employer	Job Title or Position and Supervisor's Name	Salary or Wage	Exact Reason For Leaving (attach additional sheets if needed)
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				

Please furnish dates and explanations for each period of unemployment of one month or more:

I certify that the information contained in this application is true and correct to the best of my knowledge and I understand that if I am employed, false statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and all information concerning my previous employment, and I release all parties from all liability for any damage that may result from furnishing that information to you. A copy of this application, including this authorization, may be sent to my previous employers so that the information can be released.

(READ ABOVE BEFORE SIGNING)

Date: _____ Signed: _____

REFERENCES

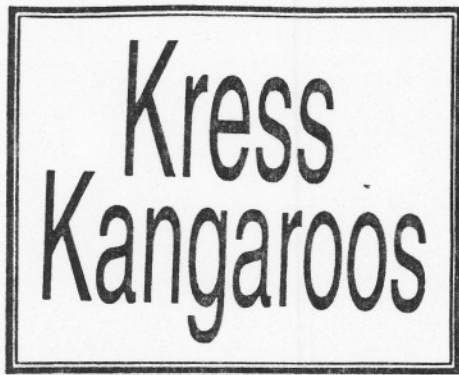
References should be persons qualified to give any information to show your fitness for the position which you seek. Include names of Superintendents and Principals for whom you are teaching or have taught.

Name of Reference	Complete Mailing Address and Phone No.	Position

Notification by Kress School District of Policy of Non-Discrimination on the Basis of Sex.

All students, prospective students, parents of students, employees and prospective employees of the school district are satisfied that the school district does not discriminate on the basis of sex in the educational programs or activities which it operates. Title IX of the Education Amendments of 1972, and the Rules and Regulations of the Department of Health, Education and Welfare require that all of the aforesaid persons be notified of this policy which extends to the employment in education programs and activities, as well as to students participation therein. Inquiries concerning the application of Title IX and the Rules and Regulations promulgated by the Department of Health, Education and Welfare to the school district may be referred to the Director of the Office for Civil Rights of the Department of Health, Education and Welfare, or to an employee designated by the school district, whose name can be obtained at the office of the Superintendent of the school district.

Dated October 15, 1975



Criminal History Record Information Consent & Release Form

I, _____, am an applicant for employment with _____ and have been advised that as a part of the application process, the employer conducts a criminal history background check. I do hereby consent to the employer use of any information provided during the application process in performing the criminal history check. The employer has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer employment. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of the employer. Under the fair Credit Reporting Act, I have been advised that upon request I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information.

Last Name

First Name

Middle Name

Maiden and/or Other Last Names Used

City*

County*

State*

Date of Birth**

Social Security Number**

Sex**

Race**

* AS SHOWN ON THE ORIGINAL APPLICATION

** TO BE USED ONLY FOR CRIMINAL HISTORY SEARCHES, AND NOT A PART OF THE PERSONNEL FILE

The following are my responses to questions about my criminal record history (if any) with descriptions to any question with a YES answer.

1. Have you ever been convicted or plead guilty before a court of any federal, state, or municipal criminal offense? (excluding minor traffic violations) If YES, please provide an explanation below: ☐ YES ☐ NO

2. Have you ever received deferred adjudication or similar disposition for any federal, state or municipal criminal offense? If YES, please provide an explanation below: ☐ YES ☐ NO

3. Have you ever received probation or community supervision for any federal, state or municipal criminal offense? If YES, please provide an explanation below: ☐ YES ☐ NO

(over)

4. Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States?
If YES, please provide an explanation below: ☐ YES ☐ NO

5. As of the date of this authorization, do you have any pending criminal charges against you? If YES, please provide an explanation below: ☐ YES ☐ NO

This section is to be used to list all counties and states of residence since age 18 or high school graduation. It is mandatory that you complete each field in its entirety, including the county, or we will be unable to process. You must be **SPECIFIC** about dates of residence. If more space is needed, please attach an additional sheet. **The county must be listed.**

City/Town	County	State	Dates	
			From	To

I hereby certify that all information provided in this authorization is true, correct and complete. I understand that if any information proves to be incorrect or incomplete that grounds for the canceling of any and all offers of employment will exist and may be used at the discretion of the employer.

Signed this _____ day of _____, 20 _____

Applicant (Print Name) _____

Applicant Signature _____