

EDUCATION AND QUALIFICATIONS (Continued)

List academic honors, special awards or honors, or positions attained in high school, college/university, or professionally which you believe are pertinent to the position for which you are applying: _____

List professional, civic, service organizations, etc. in which you hold membership whose purposes and/or activities in your opinion relate to or support the position for which you are applying: _____

FOR PROFESSIONAL APPLICANTS ONLY: (Teachers and positions requiring certification)

Do you possess a Teaching Certificate? Yes No What State? _____ For what teaching fields are you certified?

List areas of additional certification:

Check the following areas in which you have a working knowledge or have had experience or training:

- Individualized Instruction Use of Audio-Visual Equipment Career Education Concepts Curriculum Development
- Reading Instruction Gifted and Talented Other: _____

Check or denote below those areas in which you have interest(s), skill(s), training, experience(s), etc., that you believe are of value to you in your requested position and/or which might be of value in activities inherent or related to your requested position in the school system.

- Computer skills UIL Literary Contests Art/Crafts Sponsorship Music Drama Speech
- Athletic Coaching Foreign Languages (Which Languages?) _____ Other: _____

FOR PARAPROFESSIONAL APPLICANTS ONLY: (Instructional Aides, Secretaries, PEIMS, etc.)

Do you possess computer skills? Yes No If yes, with what programs? _____

Describe your experience computer-networking. _____

Check or denote below those areas for which you have interest(s), skill(s), and/or experience(s) that you believe would be of value to you in the position requested in this application.

- Copy Machine Filing Fax Machine Library Services Calculator Telephone Systems
- Scanners Working with young people Working with handicapped Other: _____

BACKGROUND and EXPERIENCE

Number years of experience you have had as instructional aide _____, secretary _____, teacher _____, other _____ ?

If "other", explain: _____

LIST LAST THREE EMPLOYERS (Do not include present employer)

DATE(S)	POSITION	SCHOOL OR BUSINESS	ADDRESS	SUPERVISOR	PHONE NUMBER
From:					
To:					
From:					
To:					
From:					
To:					

LIST THREE REFERENCES (These should be people who have knowledge of your character, personality, and work attributes/ethics)

NAME	ADDRESS	POSITION	PHONE NUMBER

SUPPLEMENTARY INFORMATION: Applicant may attach resume' or add'l information relative to the position for which application is submitted.

Why do you want employment in the Hughes Springs Independent School District?

POLICY STATEMENT REGARDING EMPLOYMENT

The Hughes Springs Independent School District shall not discriminate on the basis of sex, race, religion, national origin, age or handicapping conditions in its educational programs, support activities, or employment practices.

I, the undersigned, state that all information given on this application form and attachments is true and correct to the best of my knowledge, and I authorize the Hughes Springs Independent School District to contact any individuals/institutions listed herein unless designated in writing otherwise. I hereby give permission for HSISD personnel to review my records that are on file with the State Board of Education, including, but not limited to examinations and fingerprinting records.

I understand that if employed I will be expected to comply with reasonable requirements of my position regarding in-service training, curriculum instructional program development, and school related studies, evaluation, etc. I further understand my responsibilities for complying with all requirements of Hughes Springs Independent School District relative to personnel records, professional improvements, etc. In addition, I understand my employment is subject to assignment by the Superintendent of Schools.

I also understand that any misstatements or omissions of material facts in the application may be cause for dismissal if employed on the basis of information provided.

School district employees who desire certification as a teacher and meet eligibility requirements may receive financial assistance at public colleges and universities in Texas. Additional information is available from Human Resources at 903-639-3805.

HB 1130, 77th Legislature, 5/01

DATE

SIGNATURE OF APPLICANT

If there is no contact information provided in the VACANCY NOTICE advising of a position available, this completed application form should be taken or mailed to Superintendent of Schools, Hughes Springs ISD, 871 Taylor Street, Hughes Springs, Texas 75656. Otherwise, follow contact information in the Vacancy Notice.

Hughes Springs Independent School District
Addendum to Application for Employment

Pre-Employment Affidavit for Applicant

For purposes of this affidavit:

Adjudication and conviction refer to a conviction, plea of guilty or no contest (*nolo contendere*), probation, suspension, or deferred adjudication.

Charge refers to a formal criminal charge as documented by a primary charging instrument (a complaint, information, or indictment) under the Texas Code of Criminal Procedure.

Inappropriate relationship refers to the crime of improper relationship between educator and student in Texas Penal Code section 21.12, and any other inappropriate relationship as determined by the State Board for Educator Certification.

I declare the following:

- I have never been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor.
 - I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be **false**. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction: _____.
 - I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be **true**. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction: _____.
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Declaration of Applicant

The following affidavit is offered to satisfy the requirement of Texas Education Code section 21.009 for a pre-employment affidavit, in accordance with Texas Civil Practices and Remedies Code section 132.001. An applicant who is offered employment will be asked to complete a notarized affidavit attesting to the same.

I declare under penalty of perjury that the foregoing is true and correct.

Name (First, Middle, Last) _____
Date of Birth

Address (Street, City, State, Zip Code) _____
County

Executed in _____ County, State of _____, on the _____ day of _____, _____.
County State Date Month Year

(Signature of Declarant)

I understand that the date of birth I am providing will not be used to determine eligibility for employment but will be used solely for the purpose of this unsworn declaration.¹

¹ This form will be processed separately and not shared with the hiring manager.

HUGHES SPRINGS INDEPENDENT SCHOOL DISTRICT

(ADDENDUM TO APPLICATION)

(CONFIDENTIAL INFORMATION)

The Hughes Springs Independent School District is required by state law to obtain criminal history records information on applicants being considered for employment or for volunteers with the district. (TEXAS EDUCATION CODE 22.083) The information requested below is necessary to obtain criminal history record information.

FULL NAME:

PRINT: LAST NAME FIRST NAME MIDDLE NAME MAIDEN NAME

OTHER NAMES YOU HAVE USED: _____

(Previous Marriages, Etc.)

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____

DRIVER'S LICENSE NUMBER: _____ STATE OF ISSUE: _____

SEX: Male Female ETHNICITY: Black White Hispanic Other

POSITION OF EMPLOYMENT APPLIED FOR: _____

I understand the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment, but will be used SOLELY for the purpose of obtaining criminal history record information. This form will be removed from the application and filed separately in the personnel office.

I understand that the Superintendent is required to notify SBEC/TEA of information indicating if an applicant for or holder of a certificate issued by SBEC has a criminal history report. *Education Code 22.087, 22.0835, and 19 TAC 249.14 (d)(1).*

SIGNATURE OF APPLICANT _____

ADDRESS, CITY, STATE, ZIP _____

TELEPHONE NUMBER _____

DATE _____

IN THE EVENT OF EMPLOYMENT, THE FOLLOWING INFORMATION WILL BE NEEDED FOR FINGERPRINTING

Hair Color: _____ Color of Eyes: _____

Weight: _____ Height: _____

Place of Birth: _____

**DPS Computerized Criminal History (CCH) Verification
(AGENCY COPY)**

I, _____, have been notified that a
APPLICANT or EMPLOYEE NAME (Please Print)

computerized criminal history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB information I supply.

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore, the agency may offer the opportunity to have a fingerprint search performed to clear any mis-identification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process I must have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, L1 Enrollment Services.

Once this process is completed and the agency receives the data from PDS, the information on my fingerprint criminal history records may be discussed with me.

Signature of Applicant or Employee

Date ____/____/____

HUGHES SPRINGS ISD
Agency Name

Mary Trevino
Agency Representative

Mary S. Trevino

Signature of Agency Representative

Date ____/____/____

Please:	_____	OK
<i>Check and Initial each Applicable Space</i>		
CCH Report Printed:		
YES _____ NO _____		_____ Initial
Purpose of CCH:	_____	
Hired _____ Not Hired _____		_____ Initial
Date Printed:	____/____/____	_____ Initial
Date Destroyed:	____/____/____	_____ Initial
Retain in your files		