

EMPLOYMENT APPLICATION

BECKVILLE INDEPENDENT SCHOOL DISTRICT
 P.O. BOX 37 BECKVILLE, TEXAS 75631 (903) 678-3311

THESE INSTRUCTIONS MUST BE FOLLOWED EXACTLY: Print in black ink or type. Fill out application form completely. If questions do not apply, write "NA". Do not leave questions blank. "See resume" is not acceptable on this application. If you have a resume, it will be accepted for whatever additional information it contains. Be definite as to dates, diplomas, degrees, semester hours, work history etc. A completed application must have your signature.

Date of application: _____

Applicant's Full Name: _____		S.S. Number: _____	
Present Address: _____			
<i>Number and Street:</i>	<i>Rural Route:</i>	<i>Post Office Box</i>	
<i>City</i>	<i>State</i>	<i>Zip</i>	<i>Telephone</i>
Permanent Address: _____			
<i>Number and Street:</i>	<i>Rural Route:</i>	<i>Post Office Box</i>	
<i>City</i>	<i>State</i>	<i>Zip</i>	<i>Telephone</i>

Position Desired, First Choice: _____

Position Desired, Second Choice: _____

Highest Degree Held: _____ Name of University _____

Have you ever worked for a school district before? _____ If "yes", what district? _____

What was your job assignment? _____ How long did you work there? _____

Educational and Professional Training

Institution and Location	From	To	Graduation Date	Diploma/Degree
Where did you attend High School?				
College(s) or other higher education institutions				

Please provide the name, address and daytime number of at least three personal references who can tell about your personality, character and overall ability to work successfully with children and their parents.

Name (Tell how you know this person)	Address	Telephone Number

I hereby certify that all statements as well as those in any attachments to this form are to the best of my knowledge true and correct and that they are all given of my own free will. I agree that any misstatements(s) or omission(s) as to material facts will constitute grounds for unfavorable consideration or dismissal from employment. I understand that I am not eligible for employment unless all documents relating to this application are completed and acceptable. My application will be retained in the active file for two years and may be reactivated by sending a written request to the Superintendent before the end of the two year period. Furthermore, I understand that this application and records become the property of the Beckville ISD which reserves the right to accept or reject it.

I also understand that if employed I will serve an initial probationary period.

All Texas school districts are authorized to obtain any criminal history information relating to an applicant for employment by H.B. 1498 (TFC 21.9). Conviction of a crime is not an automatic bar to employment. Beckville ISD will consider the nature, date and relationship of the offense to the position for which you apply.

I authorize and request each employer, person, firm or corporation named herein to answer all questions that may be asked and give all information that may be sought in connection with this application or concerning me or my work habits, characters, skill or action in any transaction.

The Beckville Independent School District does not discriminate against any employee or applicant because of race, religion, color, sex, age, national origin or disability

Signature and date

This space for office use only

**Beckville Independent School District
Authorization for Background Investigation Study**

By my signature affixed below, I authorize Beckville Independent School District to contact the references listed on this application, and to obtain any criminal history record information relevant to this application for employment from any pertinent source, any law enforcement agency, including but not limited to, any police department or the Texas Department of Public Safety, as well as the Texas Department of Corrections in accordance with the provisions of the Texas Education Code 21.917. I further authorize all employers and other persons to furnish, in response to inquiries made by or on behalf of Beckville ISD, information pertaining to my reputation, employment, or personal history. I understand that references, placement folder information, and information which becomes a part of this record, may be revealed to all persons who participate in the selection of employees. In addition, I relieve all such previous employers and/or persons from any liability that may arise by reason of such discussion.

I declare that all information I have supplied the Beckville Independent School District to be true, accurate, and complete to the best of my knowledge. I understand that any falsification of any record I have provided or made available will be sufficient cause for disqualification. In addition, I agree that if I am employed and it is found that I have provided false information, I shall be subject to immediate dismissal. Furthermore, it is understood that this application becomes the property of the Beckville Independent School District which reserves the right to accept or reject it.

I understand that the Beckville Independent School District shall notify the Commissioner of Education of a certified applicant's conviction of any felony or a misdemeanor involving illegal conduct with a child that may be disclosed in the criminal history record.

I understand that the application and all inclusions are for the use of and will become the property of the Beckville Independent School District and that no district employee shall release or disclose such criminal history information to persons other than the applicant, Texas Education Agency or court of law.

Print or type full name of applicant

Drivers License #

Date of Birth

Sex: __M __F

Check race or ethnicity:

_____ American Indian

_____ Hispanic

_____ Asian

_____ White, Non-Hispanic

_____ Black, Non-Hispanic

I have read the above information and understand each of the provisions contained therein.

Usual signature of applicant

Date