

**EMPLOYMENT APPLICATION FOR PROFESSIONAL PERSONNEL
COOLIDGE ISD**

*An Equal Opportunity Employer**

Date of application _____				
Personal Data	Name _____ <i>Last</i> <i>First</i> <i>Middle initial</i>			
	Current address _____ <i>Street/Box</i> <i>City</i> <i>State</i> <i>ZIP Code</i>			
	Other address where you may be reached _____			
	Home phone _____ Cell phone _____ Other phone _____			
	Other name that may appear on records _____ <i>(Used for certification, reference, and criminal history record checks)</i>			
Position Data	List the position(s) for which you are applying _____			
	Credentials included with application:			
	<input type="checkbox"/> Résumé			
	<input type="checkbox"/> All teaching and professional certificates or licenses			
	<input type="checkbox"/> All transcripts showing degrees			
Date you can begin work _____				
Have you been employed by Coolidge ISD in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If you answered yes, provide dates of employment _____				
Education/Training	Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license granted	Year graduated <i>(College only)</i>

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Certification/Licensure	<p>Certificates or Licenses Currently Held:</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Valid Texas</p> <p><input type="checkbox"/> Valid Other State _____</p> <p><input type="checkbox"/> Texas One-Year (out-of-state/country): Expiration date: _____</p> <p><input type="checkbox"/> Other: _____</p> <p>Category/Level(s) of Certification: _____</p> <p>Areas of Specialization/Supplemental Certificates/Endorsements (as listed on certification):</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Teaching Experience	List teaching experience beginning with most recent years.			
	Name and location of school		Name and location of school	
	Type of assignment		Type of assignment	
	Dates taught		Dates taught	
	Principal's name and phone		Principal's name and phone	
	Reason for leaving		Reason for leaving	
	Name and location of school		Name and location of school	
	Type of assignment		Type of assignment	
	Dates taught		Dates taught	
	Principal's name and phone		Principal's name and phone	
Reason for leaving		Reason for leaving		

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Other Work Experience	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.			
	Employer name and location		Employer name and location	
	Position/title held		Position/title held	
	Dates employed		Dates employed	
	Supervisor's name and phone		Supervisor's name and phone	
	Reason for leaving		Reason for leaving	
	Employer name and location		Employer name and location	
	Position/title held		Position/title held	
	Dates employed		Dates employed	
	Supervisor's name and phone		Supervisor's name and phone	
	Reason for leaving		Reason for leaving	
	References	Please list references the district can contact regarding your work history.		
Full name of reference		School district/ firm name	Mailing address	Position/title
				Area code/ phone number

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General Information	<p>Do you have a relative who serves on the Board of Education or is an employee of Coolidge ISD?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide the relative's name and relationship: _____</p> <p>_____</p> <p>Have you ever been convicted of, pled guilty or no contest (nolo contendere) 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)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please state where, when, and the nature of the offense _____</p> <p>_____</p> <p>_____</p> <p>(A felony conviction is not an automatic bar to employment. The district will consider the nature, date, and relationship between the offense and the position for which you are applying.)</p>
Verification	<p>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.</p> <p>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.</p> <p>I understand that the district is required by Texas Education Code to review criminal history of applicants.</p> <p><input type="checkbox"/> I attest that the information above is accurate. Checking the box will suffice as my signature Date: _____</p> <p>This application becomes the property of the district. The district reserves the right to accept or reject it.</p>

**Applicants for all positions are considered without regard to race, color, sex (including pregnancy), national origin, religion, age, disability, genetic information, veteran or military status, or any other legally protected status.*

The district Title IX Coordinator is *Dr. Johnnie McClinton, P.O.Box 70 Coolidge, TX 76635, Phone:254-786-2206*

This school district and its Career and Technology Education Program does not discriminate on the basis of sex, disability, race, color, age or national origin in its educational programs, activities, or employment as required by Title IX, Section 504, and Title VI.

Este distrito escolar y su Programa Educacional de Carrera y Tecnologia no discriminan en base a sexo, discapacidad, raza, color, edad u origen nacional en sus programas educativos, actividades, o empleo como lo requiere el Titulo IX, Seccsion 504 y titulo VI.

CRIMINAL HISTORY INFORMATION REQUEST

Confidential*

The Coolidge Independent School District is required by Texas Education Code Chapter 22, Subchapter C to review the criminal history of applicants, employees, independent contractors, student teachers, and certain volunteers. The information requested below is necessary to obtain criminal history record information.

Please print.

Name _____
Last First Middle

Social Security Number _____ Date of birth _____

Driver's License _____
State and Number

Mailing Address _____
Street City State Zip

Sex: Male Female Ethnicity: Black White/Other

I understand that 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.

[] I attest that the information above is accurate. Checking the box will suffice as my signature

Date: _____

*This form will be removed from the application and filed separately in the HR office.