



HAPPY ISD

Box 458 Happy, TX 79042
PH: 806-558-5331 FX: 806-209-0077
hisdadmin@happyisd.net

Excellence is expected, respected, and rewarded.

PROFESSIONAL APPLICATION

Happy ISD is an equal opportunity employer.

During the selection and employment process, individuals shall be employed without regard to race, creed, color, age, sex, religion, marital or veteran status, medical condition, disability, or any other legally protected reason.

PERSONAL DATA

DATE OF APPLICATION	NAME	
PHONE	ADDRESS	
EMAIL	Other names that might appear on records:	

POSITION DATA

POSITION(S) FOR WHICH YOU ARE APPLYING
CREDENTIALS INCLUDED WITH APPLICATION
<input type="checkbox"/> Résumé <input type="checkbox"/> All teaching/professional certificates or licenses <input type="checkbox"/> All transcripts showing degrees

CERTIFICATION

CERTIFICATES OR LICENSES CURRENTLY HELD	EXPIRATION
<input type="checkbox"/> None <input type="checkbox"/> Valid Texas <input type="checkbox"/> Valid other state <input type="checkbox"/> Other	CATEGORY/LEVELS OF CERTIFICATION
	AREAS OF SPECIALIZATION/ENDORSEMENTS/SUPPLEMENTAL CERTIFICATES

GENERAL INFORMATION

Do you have a relative that is a member of the Happy ISD Board of Trustees?
Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, give name and relationship to board member:



EDUCATION/TRAINING

SCHOOLS ATTENDED (NAME/LOCATION)	COURSE OF STUDY (MAJOR/MINOR)	LIST DIPLOMAS/DEGREES ATTAINED	YEAR GRADUATED

TEACHING EXPERIENCE

List teaching experience beginning with the most recent years.

Years of Teaching Experience

NAME & LOCATION OF SCHOOL ADMINISTRATOR NAME/PHONE/EMAIL	TYPE OF ASSIGNMENT	BEGIN DATE END DATE	REASON FOR LEAVING

OTHER WORK EXPERIENCE

Provide a list of all other jobs or administrative positions you have held in the past 10 years.

EMPLOYER NAME & LOCATION SUPERVISOR NAME/PHONE/EMAIL	POSITION/TITLE HELD	BEGIN DATE END DATE	REASON FOR LEAVING



REFERENCES

List references Happy ISD can contact regarding your work history.

FULL NAME OF REFERENCE	SCHOOL DISTRICT/FIRM NAME	POSITION/TITLE
EMAIL ADDRESS	PHONE NUMBER	RELATIONSHIP

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AFFIRMATIONS

I hereby affirm that Happy ISD has my consent to review my credentials, certifications, and certification examination results while I am an applicant or employee of the District.

Texas Education Code 21.048(c-1)

Yes No

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 this 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 this district is authorized by Texas Education Code to review criminal history of applicants. This application becomes the property of the district. The district reserves the right to accept or reject it.

Signature of Applicant

Date



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CRIMINAL HISTORY RECORD INFORMATION CONSENT AND RELEASE FORM FOR APPLICANT

I, _____, am an applicant for employment with Happy ISD 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.

FIRST NAME	MIDDLE NAME	LAST NAME
MAIDEN AND/OR OTHER LAST NAMES USED		
CITY	COUNTY	STATE
DATE OF BIRTH	SOCIAL SECURITY NUMBER	DRIVER'S LICENSE NUMBER
GENDER	ETHNICITY	
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other	

I understand that the information I am providing about age, gender, 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.

These are my responses to questions about my criminal history record (if any) with descriptions to any questions 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 explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you ever received deferred adjudication or similar disposition for any federal, state, or municipal criminal offense? If YES, please explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you ever received probation or community supervision for any federal, state, or criminal offense? If YES, please explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No