

Idalou Independent School District

P.O. Box 1338, 601 S. Walnut
Idalou, TX 79329
(806) 892-1900



EMPLOYMENT APPLICATION FOR SERVICE AND SUPPORT PERSONNEL

We consider applicants for all positions without regard to race, color, national origin, age, religion, gender, marital, or veteran status, the presence of a medical condition, disability, or any other legally protected status.

An Equal Opportunity Employer

Date of Application: _____ Social Security No. _____

Name: _____
Last First Middle Initial

Current Address: _____
Street/P.O. Box City State Zip

Email Address: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Position for which you are applying _____

Type of Employment: Full-Time _____ Part-Time _____ Summer Only _____

Date Available: _____

Former Idalou ISD Employee: Yes _____ No _____

If yes, give dates of employment: _____

Check Highest Level Attained:

- ___ Not high school graduate (Circle last grade completed) 1 2 3 4 5 6 7 8 9 10 11 12
- ___ High school graduate ___ GED ___ Less than two years college
- ___ Two or more years college ___ Bachelor's Degree
- ___ Master's degree ___ Other training or education

Licenses/Certifications held: _____

Schools Attended: List all applicable information.

Name of School & Location	Course Study Major/Minor	Diploma, Degree Or Certificate	Year Graduated

Please provide a complete listing of all jobs or positions you have held in the past 10 years, listing most recent first. Attach sheets if necessary.

Employer and Location	Position/Title	Dates Employed	Reason for Leaving

List specific skills and/or any machines or equipment you can operate. Include typing speed and number of years' experience.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Do you have a relative who is a member of the Idalou ISD School Board?

Yes _____ No _____ If yes, please give the name of relative and relationship

Have you ever been convicted of a felony or offense involving moral turpitude (including, but not limited to: theft, rape, murder, swindling, and indecency with a minor)?

Yes ___ No ___ If yes, please state where, when, and the nature of the offense:

(Conviction of a felony is not an automatic bar to employment. The district will consider the nature, data, and relationship between the offense and the position for which you are applying.)

Please list below references who may be contacted regarding your work history. Please include all managers/supervisors at the last two employing organizations who evaluated or supervised your performances.

Full Name of References	School District/ Firm Name	Mailing Address	Position/Title	Area Code/ Phone 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 above 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 any liability for any damage that may result from furnishing same to you.

I understand that the district is required by Texas Education Code 21.917 to obtain criminal history record information on applicants selected for employment.

This application becomes the property of the district. The district reserves the right to accept or reject it. This application shall be considered active for a period of time not to exceed two years. Any applicant wishing to be considered for employment beyond this time period may inquire as to whether or not applications are being accepted at that time.

Date

Signature of Applicant

Idalou ISD



Criminal History Request

The Idalou Independent School District is authorized by state law to obtain criminal history record information on applicants the district intends to employ (Texas Education Code 22.083). The information requested below is necessary to obtain criminal history record information.

Please Print:

Name _____
Last First Middle

Social Security Number _____ Date of Birth: _____

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.

Signature

Date