

Axtell Independent School District

Employment Application for Professional Personnel

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

PERSONAL DATA	Date of Application _____ Social Security No. _____ Name _____ <div style="display: flex; justify-content: space-around; font-size: small;"> <i>Last</i> <i>First</i> <i>Middle Initial</i> </div> Current Address _____ Other Address where you may be reached _____ Work Phone No. _____ Home Phone No. _____ Name used on records if different from present name _____ <i>(To be used for reference checks)</i>
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POSITION DATA	Position for which you are applying _____ Credentials included with application: <input type="checkbox"/> Resume <input type="checkbox"/> All teaching and professional certificates (front and back, if appropriate) <input type="checkbox"/> All transcripts showing degrees Date available for employment _____
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EDUCATION/TRAINING	Schools Attended (List all applicable information.)			
	Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree, or Certificate	Year Graduated (College Only)

CERTIFICATION	<p>Type of certificate held now</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"/> Emergency</p> <p><input type="checkbox"/> Texas one-year certificate: Expiration date _____</p> <p><input type="checkbox"/> Texas temporary administrative: Expiration date _____</p> <p>Areas of Specialization</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;"><input type="checkbox"/> Administrator</td> <td style="width: 33%; border: none;"><input type="checkbox"/> All level art</td> <td style="width: 33%; border: none;"><input type="checkbox"/> Vocational (specify) _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Superintendent</td> <td style="border: none;"><input type="checkbox"/> All level health and PE</td> <td style="border: none;"><input type="checkbox"/> Visiting Teacher _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Principal</td> <td style="border: none;"><input type="checkbox"/> Speech Therapy</td> <td style="border: none;"><input type="checkbox"/> Supervisor</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Mid-management administrator</td> <td style="border: none;"><input type="checkbox"/> Educational Diagnostician</td> <td style="border: none;"><input type="checkbox"/> Nurse</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Elementary and Kindergarten</td> <td style="border: none;"><input type="checkbox"/> Counselor</td> <td style="border: none;"><input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Elementary</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Secondary</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>				<input type="checkbox"/> Administrator	<input type="checkbox"/> All level art	<input type="checkbox"/> Vocational (specify) _____	<input type="checkbox"/> Superintendent	<input type="checkbox"/> All level health and PE	<input type="checkbox"/> Visiting Teacher _____	<input type="checkbox"/> Principal	<input type="checkbox"/> Speech Therapy	<input type="checkbox"/> Supervisor	<input type="checkbox"/> Mid-management administrator	<input type="checkbox"/> Educational Diagnostician	<input type="checkbox"/> Nurse	<input type="checkbox"/> Elementary and Kindergarten	<input type="checkbox"/> Counselor	<input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Elementary	_____	_____	<input type="checkbox"/> Secondary													
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OTHER WORK	<p>Please provide a complete listing of all other jobs you have held in the past 10 years. Attach additional sheets if necessary. Please attach resume, if available.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Firm Name</th> <th style="width: 25%;">Position/Title</th> <th style="width: 25%;">Dates Employed</th> <th style="width: 20%;">Reason for Leaving</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Firm Name	Position/Title	Dates Employed	Reason for Leaving																												
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PROFESSIONAL DATA	<p>Omit references to organizations that would reveal race, age, ethnic origin, or religious persuasion.</p> <ul style="list-style-type: none"> • Publications/articles _____ _____ • Seminars/workshops conducted _____ _____ • Other related professional activities _____ _____ 																									
GENERAL INFORMATION	<p>Do you have a relative who is a member of the Axtell ISD Board of Education?</p> <p><input type="checkbox"/> yes If yes, please give the name of relative and relationship. _____ _____</p> <p><input type="checkbox"/> no _____ _____</p> <p>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) If yes, please state where, when, and the nature of the offense. _____</p> <p><input type="checkbox"/> yes _____</p> <p><input type="checkbox"/> no _____ _____</p> <p>(Conviction of a felony is not an automatic bar to employment. The Cooperative will consider the nature, date, and relationship between the offense and the position for which you are applying.)</p>																									
REFERENCES	<p>Please list below references that may be contacted regarding your work history. Please include all managers/supervisors at the last two employing organizations who evaluated or supervised your performance.</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 20%;">Full Name of Reference</th> <th style="width: 20%;">School District/ Firm Name</th> <th style="width: 20%;">Mailing Address</th> <th style="width: 20%;">Position/Title</th> <th style="width: 20%;">Area Code/ Phone No.</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Full Name of Reference	School District/ Firm Name	Mailing Address	Position/Title	Area Code/ Phone No.																				
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VERIFICATION

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 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 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 365 days. 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.

Signature of Applicant

Date

Axtell Independent School District

Drug-Free Policy Form

All employees are required to read the Axtell Independent School District's policy concerning the drug-free workplace. Employees are also required to sign and detach the form following the policy statement. The signed form will be placed in the employee's personnel folder.

The following policy is from the Axtell Independent School District's policy manual:

3.29 DRUG FREE WORKPLACE

- 3.29-1 Possession, use, distribution or being under the influence of illicit drugs or alcohol is prohibited at the district or any school facility and/or at any school function of activity.
- 3.29-2 Employees who violate this prohibition will be subject to immediate dismissal from employment and possible referral for prosecution.
- 3.29-3 Compliance with these provisions and prohibition is a mandatory condition of employment.
- 3.29-4 Drug and alcohol counseling, rehabilitation and re-entry programs are available to employees. A list of such programs is available upon request to the Coordinator, Drug-Free Schools Program.
- 3.29-5 The District will review it's Drug-Free workplace policy annually.
- 3.29-6 All district buildings are smoke-free.

Drug-Free Policy Signature Form

I have read the drug-free policy for Axtell Independent School District and will abide by the policy set forth by this organization.

Signature

Date

Axtell Independent School District

Addendum to Application

Confidential

Permission for Criminal History Record

The Axtell Independent School District is required by state law to obtain criminal history record information on applicants being considered for employment with the cooperative (Texas Education Code Section §21.917). The information requested below is necessary to obtain criminal history record information.

Full Name _____
Last First Middle

Social Security No. _____ Date of Birth _____

Sex: Male _____ Female _____ Ethnicity: Black _____ White/Other _____

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.

Signature

Date

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