

Sands CISD Employment Application for Professional Personnel

Sands CISD
*An Equal Opportunity Employer**

Date of Application:				
Personal Data	Name:			
	<i>Last</i>	<i>First</i>	<i>M</i>	
	Current Address:			
	<i>Street/Box</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
	Other address where you may be reached:			
Email:				
Home Phone:		Cell Phone:		Other Phone:
Other name that may appear on records: <small>(Used for certification, reference, and criminal history record checks)</small>				
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 Sands CISD 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 (College only)

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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>			
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	Area code/ phone number

*Please submit this application along with your résumé by email to applications@sandscisd.net, by mail to **Sands CISD, P.O. Box 218, Ackerly, TX 79713**, or by fax to **432-353-4650**.

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General Information	<p>Do you have a relative who serves on the Board of Education or is an employee of Sands CISD?</p> <p style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p> <p>If yes, please provide the relative's name and relationship:</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)?</p> <p style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p> <p>If yes, please state where, when, and the nature of the offense:</p> <p style="font-size: small; text-align: center;">(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 style="text-align: center;"><input type="checkbox"/> I affirm</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 style="text-align: center;"><input type="checkbox"/> I authorize</p> <p>I understand that the district is required by Texas Education Code to review criminal history of applicants.</p> <p style="text-align: center;"><input type="checkbox"/> I understand</p> <hr style="border: 0.5px solid black;"/> <p style="text-align: center; margin-left: 200px;">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. Additionally, the district does not discriminate against an applicant who acts to oppose such discrimination or participates in the investigation of a complaint related to a discriminating employment practice.*

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Criminal History Form

"Confidential"

The Sands Consolidated 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.

Name:

Last

First

Middle

Social Security Number:

Date of birth:

Driver's License:

State and Number

Mailing Address:

Street/Box

City

State

Zip Code

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 understand

Signature

Date

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