

TEACHERS & ADMINISTRATORS

PROFESSIONAL STAFF APPLICATION FORM

Yoakum Independent School District

P.O. BOX 737 YOAKUM, TEXAS 77995 361-293-3162 FAX 361-293-6678

TO APPLICANT:

It is recognized that any application form has some shortcomings in giving a complete and accurate description of you as a candidate. It is believed, however, that the information asked for on this form will help to determine whether there is a position in which you can make your best contribution and, therefore, one in which you can grow professionally to derive maximum satisfaction from your work.

Name _____
Last First Middle

Name Used On Records, If Different _____

Social Security No. _____ Date Available _____

Present Address _____ Telephone (____) _____
Number and Street Area Number

City State Zip Code

Other Address _____ Telephone (____) _____
(Where You May Be Reached) Number and Street Area Number

City State Zip Code

POSITION DESIRED: *(Please indicate the grade level, subject matter or type of position you prefer and for which you feel you are qualified)*

First Choice Second Choice Third Choice

Signature In Ink

Date Of Application

IMPORTANT

Please give all of the information requested. This will become a part of your contract, if elected; you are responsible for the validity of all information given.

It is the responsibility of the applicant to request that his or her placement folder be sent to the Yoakum Independent School District. Attach a complete transcript to this application (unofficial copy acceptable).

If elected, the applicant agrees to accept the assignment to the building and subjects as made by the Board of Education and/or district administrators.

This application will be DESTROYED after TWO (2) years if appointment has not been made.

NOTE: Appointments are not made without a personal interview. The district will notify you, after consideration of the application, if an interview is desired.

Yoakum Independent School District does not discriminate on the basis of race, color, national origin, age, religion, sex, marital or veteran status, the presence of a medical condition, disability, or any other legally protected status.

MISCELLANEOUS INFORMATION

1. Do you have any personal or other responsibilities, which would interfere with, (1) sponsorship of co-curricular activities; (2) in-service activities; or, (3) adequate preparation for instruction?

Yes _____ No _____ If Yes, explain: _____

2. Have you ever been convicted of any felony or any other crime involving moral turpitude?

Yes _____ No _____ If Yes, explain: _____

Duties in this employment will entail performance in a place in which drugs and alcohol are strictly prohibited. The submission of this application is a representation on the applicant's part that the applicant can conduct the duties of the employment without hindrance or effect from the non-use of alcohol, drugs, or tobacco.

Duties in this employment will entail performance requiring adequate hearing and sight. The submission of this application is a representation on the applicant's part that the applicant can conduct the duties of the employment without hindrance or effect from defects in hearing or sight.

EDUCATIONAL AND PROFESSIONAL TRAINING

Name of High School: _____

COLLEGES AND UNIVERSITIES: *(List all attended)*

NAME	INCLUSIVE DATES	DEGREE CONFERRED	DATE

Practice/Student Teaching: *If less than one (1) full year of teaching experience, complete the following:*

Year: _____ (Fall) (Spring) _____ School District: _____ Grade or Subject: _____

School: _____ Cooperating Teacher: _____

Address: _____ Phone: _____

College Supervisor: _____

Address: _____ Phone: _____

PROFESSIONAL INFORMATION

1. **CERTIFICATE:** State _____ Exact Title _____
 Certificate Number _____ Date Issued _____ Date Expires _____

2. If you do not have a teaching certificate, when do you expect to receive one? _____

3. Areas of certification (i.e. - Teaching fields, endorsements, or areas of specialization)

4.

MAJOR FIELDS	Semester Hrs.	MINOR FIELDS	Semester Hrs.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Number of semester hours in EDUCATION: Secondary _____ Elementary _____

6. **ENCIRCLE any of the following, which you can teach, coach, or direct successfully:**
Music, Art, Industrial Arts, Debate, Declamation, Dramatics, Photography, Yearbook, Newspaper, Class Sponsorship, Club Sponsorship, Playground Activities, Football, Basketball, Track, Baseball, Tennis, Physical Education. **Others not listed:** _____

7. Have you taken the National Teacher Examination? Yes ___ No ___ Percentile rank? _____

TEACHING EXPERIENCE

NAME AND LOCATION OF SCHOOL	<u>INCLUSIVE DATES</u>		NO. OF MONTHS	GRADE, SUBJECT, OR POSITION	NUMBER OF TEACHERS
	FROM	TO			
	Month Year	Month Year			

Total Number Of Years Teaching Experience _____

REFERENCES

Give at least five references, including superintendents, principals, and/or college professors who have observed and know your work as a student or teacher.

FULL NAME OF REFERENCE	ADDRESS	OFFICIAL POSITION	PHONE NO.

PERSONAL STATEMENT

Write (at your option) a brief statement giving reasons for your interest in Yoakum ISD. Also, give any additional information, which might help to display your personal and professional qualifications and your promise as an educator.

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 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 same to you.

I understand that the Texas Education Code, Section 21.917, requires the district 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.

Signature of Applicant

Date

NOTICE OF TITLE IX COMPLIANCE

The Yoakum Independent School District is in compliance with provisions of Title IX of Public Law 92-318, Education Amendments of 1972. The Yoakum Independent School District does not discriminate on the basis of sex in the operation of its educational programs and activities or in its admissions and employment policies. Inquiries concerning Yoakum Independent School District policies under the provisions of Title IX may be addressed to the Office of the Superintendent, Yoakum Independent School District, P.O. Box 737, Yoakum, Texas 77995, or information may be obtained by calling 361-293-3162.