Shiner Independent School District

P.O. Box 804, Shiner, Texas 77984
(361) 594-3121

EMPLOYMENT APPLICATION FOR SERVICE AND SUPPORT PERSONNEL

We consider applicants for all positions without regard to race, color, national origin, age, religion, sex, marital status, veteran or military status, disability, or any other legally protected status.

AN EQUAL OPPORTUNITY EMPLOYER

Personal Data

Date of Application _____

Name _____
Last *First* *Middle Initial*

Current Address_____
Street/Box *City* *State* *Zip Code*

Other Address where you may be reached_____

Work Phone _____ Home Phone _____

Other name that may appear on records_____
(Used for certification, reference, and criminal history checks)

Position Data

List the position(s) you are applying for _____

Type of Employment: ☐ Full-Time ☐ Part-time

Date you can begin work_____

Have you been employed by Shiner ISD in the past? ☐ Yes ☐ No

If you answered yes, provide dates of employment _____

Education/Training

Check the highest level of education attained:

☐ Not a high school graduate (circle last grade completed) 1 2 3 4 5 6 7 8 9 10 11

☐ High School Graduate ☐ GED ☐ Less than two years of college ☐ Two or more years of college

☐ Bachelor's Degree ☐ Master's Degree

Licenses and certificates held_____

Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license held	Year graduated (college only)

Work Experience

Please provide a complete list of all positions you have held in the past 10 years. List the most recent first. Attach additional sheets if necessary. Attach a resume if available.

Employer and location	Position/Title	Dates employed	Reason for leaving

Special Skills

List specific skills and any machines or equipment you can operate related to the position you are applying for.

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

General Information

Do you have a relative who serves on the Shiner ISD Board of Education? ☐ Yes ☐ No
If yes, please provide the relative's name and relationship:

_____

Have you ever been convicted of, plead guilty or no contest (nolo contender) 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)? ☐ Yes ☐ No

If yes, please state where, when, and the nature of the offense _____

_____

_____

_____

(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.)

References

Please list references the district can contact regarding your work history. Include all managers and supervisors who evaluated or supervised your performance at your last two employers.

Full Name of Reference	School District/Firm Name	Mailing Address	Position/Title	Phone Number including area code

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 the same to you.

I understand that the district is authorized by Texas Education Code § 22.083 to obtain criminal history record information on applicants the district intends to employ.

_____ _____

Signature Date

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 12 months. If you have not received a response during this time period, you may reapply or reactivate your application.

CRIMINAL HISTORY RECORD INFORMATION ADDENDUM

Confidential*

The Shiner 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.

Please print.

Name _____
Last *First* *Middle*

Social Security Number _____ Date of birth _____

Driver's License _____
State and Number

Mailing Address _____
Street *City* *State* *Zip*

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

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

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