

# APPLICATION FOR SERVICE AND SUPPORT PERSONNEL

## LEVERETT'S CHAPEL INDEPENDENT SCHOOL DISTRICT An Equal Opportunity Employer\*

Date of application _____				
<b>Personal Data</b>	Name _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"><span><i>Last</i></span><span><i>First</i></span><span><i>Middle initial</i></span></div>			
	Mailing address _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"><span><i>Street/Box</i></span><span><i>City</i></span><span><i>State</i></span><span><i>ZIP Code</i></span></div>			
	E-mail address _____			
	Home phone _____ Cell phone _____ Other phone _____			
	Other name that may appear on records _____ <div style="font-size: x-small; margin-top: 5px;"><i>(Used for certification, reference, and criminal history record checks)</i></div>			
<b>Position Data</b>	List the position(s) for which you are applying _____			
	Type of employment: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer only			
	Date you can begin work _____			
	Have you been employed by <u>Leverett's Chapel</u> SD in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered yes, provide dates of employment _____			
<b>Special Skills</b>	List specific skills, software proficiency, and any machines or equipment you can operate. Include number of years of experience.			
	1. _____	4. _____		
	2. _____	5. _____		
	3. _____	6. _____		
<b>Work Experience</b>	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 (bus driver applicants, see addendum). Attach résumé if available.			
	Employer name and location	Employer name and location	Employer name and location	Employer name and location
	Position/title held	Position/title held	Position/title held	Position/title held
	Dates employed	Dates employed	Dates employed	Dates employed
	Supervisor's name and phone	Supervisor's name and phone	Supervisor's name and phone	Supervisor's name and phone
	Reason for leaving	Reason for leaving	Reason for leaving	Reason for leaving

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<b>Work Experience</b>	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		
<b>References</b>	Please list references the district can contact regarding your work history.				
	Full name of reference	School district/ firm name	Mailing address	Position/title	Area code/ phone number
<b>Education/Training</b>	List the highest level of education attained: _____				
	Licenses and certificates granted _____				
	_____				
	Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license granted	Year graduated <i>(College only)</i>	

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<b>General Information</b>	<p>Do you have a relative who serves on the Board of Education or is an employee of <u>Leverett's Chapel</u> ISD?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide the relative's name and relationship: _____</p> <p>_____</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)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please state where, when, and the nature of the offense _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(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>
<b>Verification</b>	<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>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 liability for any damage that may result from furnishing the same to you.</p> <p>I understand that the district is required by Texas Education Code to review criminal history of applicants.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%; text-align: center;"> <p>_____</p> <p>Signature</p> </div> <div style="width: 35%; text-align: center;"> <p>_____</p> <p>Date</p> </div> </div> <p>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 _____ months. If you have not received a response during this time period, you may reapply or reactivate your application.</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.*

The district Title IX Coordinator is Joshua Johnson, Superintendent, 903-834-6675-ext.550.

**Texas Education Agency  
Texas Public School Student/Staff Ethnicity and Race Data Questionnaire**

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC).

School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting.

Please answer both parts of the following questions on the student's or staff member's ethnicity and race. *United States Federal Register (71 FR 44866)*

**Part 1. Ethnicity: Is the person Hispanic/Latino? (Choose only one)**

- ☐ **Hispanic/Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- ☐ **Not Hispanic/Latino**

**Part 2. Race: What is the person's race? (Choose one or more)**

- ☐ **American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America).
- ☐ **Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- ☐ **Black or African American** - A person having origins in any of the black racial groups of Africa.
- ☐ **Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- ☐ **White** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

\_\_\_\_\_  
Student/Staff Name (please print)

\_\_\_\_\_  
(Parent/Guardian)/(Staff) Signature

\_\_\_\_\_  
Student/Staff Identification Number

\_\_\_\_\_  
Date

**LEVERETT'S CHAPEL INDEPENDENT SCHOOL DISTRICT**  
**PO BOX 669**  
**LAIRD HILL TX 75666**  
**PHONE: (903) 834-6675**  
**FAX: (903) 834-6602**

***JOSHUA JOHNSON***  
***SUPERINTENDENT***

We would appreciate your cooperation in reading and signing the statement below.

\*\*\*\*\*

"I have applied for employment with the Leverett's Chapel Independent School District. I hereby give the District permission to make inquiries of references and former employers concerning my performance in the past and general character. This permission form may be attached to requests for information and I hereby authorize the party receiving this form to give full and complete information as may be requested by the Leverett's Chapel Independent School District. I further agree that the information requested will not become a part of my personnel file if I am employed by the District and I agree that the information will not be disclosed to me but will be treated as confidential by the District, and I waive any right to see this information. I also give permission to the District to duplicate this form with my signature as many times as needed.

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Applicant's Signature

Return to:  
Leverett's Chapel I.S.D.  
Po Box 669  
Laird Hill TX. 75666  
Attn: Personnel

## CRIMINAL HISTORY RECORD INFORMATION ADDENDUM

Confidential\*

The Leverett's Chapel 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

**DPS Computerized Criminal History (CCH) Verification  
Leverett's Chapel Independent School District**

I, \_\_\_\_\_, have been notified that a Computerized  
APPLICANT or EMPLOYEE NAME ( Please Print)  
Criminal History (CCH) verification check will be performed by accessing the Texas Department of Public  
Safety Secure Website and will be based on name and DOB identifiers I supply.

Because the name-based information is not an exact search and only fingerprint record searches  
represent true identification to criminal history, the organization conducting the criminal history check for  
background screening is not allowed to discuss any criminal history record information obtained using the  
name and DOB method. Therefore, the agency may request that I have a fingerprint search performed to  
clear any misidentification based on the result of the name and DOB search.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for  
analysis through the Texas Department of Public Safety AFIS (Automated Fingerprint Identification  
System). I have been made aware that in order to complete this process I must make an appointment with  
MorphoTrust Services, submit a full and complete set of my fingerprints, request a copy be sent to the  
agency listed below, and pay a fee of \$47.45 to the fingerprinting services company, MorphoTrust Services.

Once this process is completed and the agency receives the data from DPS, the information on my  
fingerprint criminal history record may be discussed with me.

**(This copy must remain on file by your agency. Required for future DPS Audits)**

\_\_\_\_\_  
Signature of Applicant or Employee

\_\_\_\_\_  
Date

Leverett's Chapel ISD  
Agency Name (Please Print)

\_\_\_\_\_  
Agency Representative Name ( Please Print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

**Please:  
Check and Initial each Applicable Space**

**CCH Report Printed:**

Yes \_\_\_ No \_\_\_ initial

**Purpose of CCH:** \_\_\_\_\_

Hire \_\_\_ Not Hired \_\_\_ initial

**Date Printed:** \_\_\_\_\_ initial

**Destroyed Date:** \_\_\_\_\_ initial

**Retain in your files**

## Pre-Employment Affidavit for Applicant Offered Employment

For purposes of this affidavit:

**Adjudication and conviction** refer to a conviction, plea of guilty or no contest (*nolo contendere*), probation, suspension, or deferred adjudication.

**Charge** refers to a formal criminal charge as documented by a primary charging instrument (a complaint, information, or indictment) under the Texas Code of Criminal Procedure.

**Inappropriate relationship** refers to the crime of improper relationship between educator and student in Texas Penal Code section 21.12, and any other inappropriate relationship as determined by the State Board for Educator Certification.

I declare the following:

- ☐ I have never been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor.
- ☐ I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be **false**. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction:
- ☐ I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be **true**. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction:

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## Affidavit of Applicant Offered Employment

The following affidavit is offered to satisfy the requirement of Texas Education Code section 21.009 for a pre-employment affidavit.

I declare under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
Name (First, Middle, Last)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Address (Street, City, State, Zip Code)

\_\_\_\_\_  
County

Executed in \_\_\_\_\_ County, State of Texas, on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
County Date Month Year

\_\_\_\_\_  
(Signature of Declarant)



State of Texas

County of \_\_\_\_\_

Before me, \_\_\_\_\_ (insert the name of notary), on this day personally appeared  
\_\_\_\_\_, (insert name of affiant), known to me to be the person whose name is  
subscribed as a witness to the foregoing instrument of writing, and after being duly sworn by me  
executed such instrument of writing and acknowledged in my presence that he or she signed the  
same for the purposes and consideration therein expressed.

Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_, (year).

(Personalized Seal)

\_\_\_\_\_  
Notary Public's Signature

*I understand that the date of birth I am providing will not be used to determine eligibility for  
employment but will be used solely for the purpose of this pre-employment affidavit.\**

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