EMPLOYMENT APPLICATION FOR PROFESSIONAL PERSONNEL

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

An Equal Opportunity Employer

PERSONNEL DATA				
Date of Application		Social Security Number		
Name				
Last		First	Middle Initial	
Current Address				
041	Street/Box		ate	ZIP Code
Other Address where you m	ay be reached			
Work Phone		Home Phone		
Other name that may appea	r on records			
	nly for reference checks)			
1017-9031				
POSITION DATA				
List the position(s) you are a	pplying for			
Credentials included with ap	plication:			
Resume				
All teaching a	nd professional certificates	or licenses		
All transcripts	s showing degrees			
Date you can begin work				
Have you been employed by				
If you answered yes, provide	•			
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EDUCATION/TRAINING				
Name and Location of	Course of Study and	Diploma, degree, certifi-	Year	Graduated
Schools Attended	Major/Minor	cate, or license held	(Co	llege only)
			7	

CERTIFICATION

	•	
Certificate or license currently held:		
None		
☐ Valid Texas		
Texas Emergency		
Texas One-Year: Expires		
Texas Temporary Administrative: Ex	pires	
Areas of Specialization:		
Administrator	All Level Art	
Superintendent	All-Level Health and PE	
Principal	All-Level Music	☐ Nurse
Midmanagement Administrator	Librarian	Visiting Teacher
Elementary	Counselor	Supervisor
Elementary and Kindergarten	Special Education (specify)	Other (specify)
Secondary (Jr./Sr. High)		

TEACHING EXPERIENCE

List teaching experience beginning with most recent years.

Name and Location of School	Type of Assignment	Dates Taught	Reason for Leaving
			9-
			<u>i</u>

OTHER WORK EXPERIENCE

Please provide a list of other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Attach resume if available.

School District/Firm Name	Position/Title	Dates Employed	Reason For Leaving
PROFESSIONAL DATA			
Please list relevant professiona	il activities. Omit reference	s to organizations that would r	eveal race, age, ethnic
origin, or religion.			
Papers/articles published	,		
Seminars/Workshops conducted	?d		
Other related professional acti	vitias		
other related professional acti	vities		
GENERAL INFORMATION			
Do you have a relative who ser	ves on the GARY ISD Board	of Education? YES	□ NO
If yes, please provide the rela	itive's name and relationshi	ip:	
Have you ever been convicted			
turpitude(including, but not lir	nited to, theft, rape, murde	er, swindling, and indency with	a minor)?
YES NO If ye	s, please state where, wher	n, and the nature of the offense	e; indicate whether the
charges were dismissed as a co	•		•
		<u> </u>	
(A felony conviction is not an automate and the position for which you are an		ct will consider the nature, date, and i	relationship between the offense

REFERENCES

Please list references the district can contact regarding your work history. Please 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	Area Code/ Phone Number
national Gr				

VERIFICATION	
I hereby affirm that all information provided in this application understand that any deliberate falsifications, misrepresentation my application or dismissal from subsequent employment.	
I authorize the references listed on the previous page to give ye employment and any pertinent information they may have, per liability for any damage that may result from furnishing the san	rsonal or otherwise, and release all such parties from
I understand that the district is authorized by Texas Education information on applicants the district intends to employ.	Code 22.083 to obtain criminal history record
Signature	Date
This application becomes the property of the district. The district application shall be considered active for a period not to excee for employment beyond this time period may inquire as to whe time.	d 365 days. Any applicant wishing to be considered

CRIMINAL HISTORY RECORD INFORMATION ADDENDUM

CONFIDENTAL*

The Gary 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		
Driver's License Number		
Email address:		
I understand that the information I am pro eligibility for employment, but will be used information.		
Signature		
Date	· · · · · · · · · · · · · · · · · · ·	