

C HILTON INDEPENDENT SCHOOL DISTRICT

B. Areas of Specialization

- Administrator Secondary (Junior and Senior High)
- Superintendent All level Art
- Principal All level Health and P.E.
- Mid-Management All level Music
- Librarian
- Elementary Counselor
- Elementary and Kindergarten

- Special Education (Specify) _____
- Vocational (Specify) _____
- Nurse
- Visiting Teacher
- Supervisor
- Others (Specify) _____

IV. Teaching Experience:

School District, University, or Private School	Location City/ State	Grades/ Subjects Taught	Dates Taught	Reason for Leaving

**Total creditable years: _____ (This must be filled in.
Only teaching full-time in college, public school, or in an
accredited private school is creditable.)**

P. O. Box 488 Chilton, Texas 76632 254-546-1200

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V. Other Work Experience:

Please write down a complete listing of all jobs or administrative positions you have held in the last ten years. (If more space is needed, please attach another sheet of paper.) Please attach resume, if available, stating responsibilities in detail.

School District/ Firm Name	Position	Dates Employed	Reason for Leaving
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

VI. Professional Data:

Publications/articles: _____

Professional organization and offices: _____

Seminars/workshops conducted: _____

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Other related professional activities: _____

VII. General Information:

Do you have any physical or health impairments that would limit your ability to perform the job(s) for which you are applying? Yes No
If yes, please explain: _____

How many days have you lost as a result of personal illness during the last three years? _____

Do you have a relative who is either a member of the CHILTON ISD Board of Education or who is employed in any capacity in the CHILTON ISD?
 Yes No If yes, please give the following information:

Name of Relative	Relationship	Position Held
=====	=====	=====
_____	_____	_____
_____	_____	_____

Have you ever been convicted of a felony? Yes No
If yes, please explain: _____

Have you ever been asked to resign or been discharged through due process from any position, teaching, or otherwise? Yes No

CHILTON INDEPENDENT SCHOOL DISTRICT

If yes, please explain: _____

VIII. Employment References:

Please list below references who may be contacted regarding your work history. (If more space is needed, please attach another sheet of paper.)

School District/ Firm Name	Mailing Address	Area Code/ Phone	Immediate Supervisor	Dates Employed
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IX. Personal Statement:

Please make a statement in your own handwriting concerning your reasons for desiring a position with the _____ School District.

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X. Verification:

I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge. I understand that, if employed, any falsified information may be considered sufficient cause for dismissal. You are authorized to make an investigation of my education and work history.

_____ **Date:**

_____ **Legal Signature of Applicant:**

Nondiscrimination Notice

Chilton ISD does not discriminate on the basis of race, religion, color, national origin, sex, or disability in providing education services, activities, and programs, including vocational programs, in accordance with, Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Educational Amendments of 1972; Section 504 of the Rehabilitation Act of 1973, as amended.

Chilton ISD will take steps to assure that lack of English language skills will not be a barrier to admission and participation in all educational and vocational programs.

The following District staff members have been designated to coordinate compliance with these requirements:

- Title IX Compliance Coordinator**
- Section 504 Compliance Coordinator**

Superintendent

(254) 546-1222

905 Durango Avenue

Chilton, Texas 76632

P. O. Box 488 Chilton, Texas 76632 254-546-1200

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Pre-Employment Affidavit for Applicant

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:

Declaration of Applicant

The following affidavit is offered to satisfy the requirement of Texas Education Code section 21.009 for a pre-employment affidavit, in accordance with Texas Civil Practices and Remedies Code section 132.001. An applicant who is offered employment will be asked to complete a notarized affidavit attesting to the same.

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)

*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.**

CHILTON INDEPENDENT SCHOOL DISTRICT

P.O. Box 488

Chilton, Texas 76632

ADDENDUM TO APPLICATION

The Chilton Independent School district is required by state law to obtain criminal history record information on all applicants for employment with the district (Texas Education Code Section 21.917).

I understand the information set forth below will be used by the district solely for the purpose of obtaining criminal history record information and will not be used in any manner related to determining eligibility for employment with the district.

Full Name _____

(Print) Last First Middle

Social Security No. _____ Date of Birth _____

*Driver License No. _____ *State _____

Sex: Male _____ Female _____

Ethnicity: 1. Is the person Hispanic/Latino? Choose only one.

- _____ A. Hispanic/Latino- a person of Mexican or other Spanish culture or origin, regardless of race.
- _____ B. Not Hispanic/Latino

Race: 2. What is the person's race? Choose one or more regardless of ethnicity.

- _____ A. American Indian or Alaska Native-a person who maintains a tribal affiliation or community attachment.
- _____ B. Asian
- _____ C. Black or African American
- _____ D. Native Hawaiian/Other Pacific Islander
- _____ E. White

Signature: _____

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

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I, _____, have been notified that a computerized 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 information 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 (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

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 have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, LI Enrollment 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

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:	_____	
Hired _____ Not Hired _____	_____ initial	
Date Printed: ____/____/____	_____ initial	
Destroyed Date: ____/____/____	_____ initial	
Retain in your files		

All Applicants

Pre-Employment Affidavit for Applicant

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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