

# CHEROKEE INDEPENDENT SCHOOL DISTRICT APPLICATION FOR PROFESSIONAL EMPLOYMENT

PRINT IN BLACK INK OR TYPE. Please fill out application form completely. If questions are not applicable, enter "NA. Be sure to sign when completed. The Cherokee ISD is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services. You may make copies of this application and enter different position titles, but **each copy must have an original signature.** This application becomes public record and is subject to disclosure.

NAME				Social Secu	urity No.		—	
(Last)	(First)		(Middle)					
MAILING ADDRESS (Current) _	(Street)		(C	ity)	(State)		(Zip)	
AC ()(Daytime Phone	AC (	)	(Other)	Email	, ,			
List any other names used if diffe	rent from name give	en on this appl	cation.					
Teacher Elementary ☐ Teach	ner Secondary 🗌	Paraprofes	sional 🗌	Substitute	Cust	todial 🗌	Lunchroom [	
Bus Driver  Other		D	ate available	for work				
FIELDS CERTIFIED TO TEACH_								
Driver's License (if required for this positi	on)(State)	(Number)	Class A [	Class B		Class C	Class M	
Are you at least 17 years of age?	Yes □ No □			ss C Commercial			A Commercial	
Have you ever been convicted of a	felony? Yes □	No ☐ If yo	our answer is '	"Yes," explain in	concise d	letail on a sep	arate sheet of	
paper, giving the dates and nature	of the offense, the na	ame and location	n of the court	, and the disposi	ition of the	e case. A conv	viction may not	
disqualify you, but a false statemen	t will. A felony convi	ction is not an a	utomatic bar	to employment.	The distr	ict will conside	er the nature, d	late,
and relationship between the offens	se and the position fo	or which you are	e applying.					
Have you ever been recommended If "Yes", give the name of the district			•	•				
Have you ever been convicted of o not limited to, theft, rape, murder, so		•	•	elony or offense No □	involving	moral turpitud	de (including, b	out
If "Yes", please state where, when suspension, or deferred adjudication					smissed a	as a condition	of probation,	

Please return to: CHEROKEE ISD PO Box 100 Cherokee, Texas 76832 (325) 622-4298

Circle Highest Grad	e Completed 1 2 3 4 5	6 7 8 9	10 1	1 12		Di	d you gradua	te/ach	ieve C	3ED? Y€	es 🗌 No 🏻	
Type of				ates At			Sem./Clock	Grad	duated		Type of	Maior/Minor
School	Name and Location of Scl	hool	Fro Mo	om Yr.	Mo.	o Yr.	Hours Completed	Yes	No	Graduation Date	Diploma or Degree	Field of Study
Undergraduate												
Colleges or			+-	+ +		$\vdash \vdash$						
Universities								l		I		
<b>-</b>			+							-		
				$\sqcup$				<del> </del>				
Graduate			<b>T</b>									
Schools			$\perp$						<u> </u>			
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Technical,												
Vocational, or			$\perp$					<u> </u>				
Business Schools												
3010018	_			<u> </u>					1 1			
If a license, certificat	te, or other authorization is red	auired or rela	ated to	the r	ositi	ion fc	or which you a	are ar	pnivla	. complete t	he following	:
	ICATION (P.E., RN., Attorney, C.F.		Date Is		T		sued by		cense		of Issuing Auth	
LIOLINGLICE	OATION (I.E., INA., AMOITIO), S.	.A., c.c.,	Date it	30ucu		(Sta	ate or other		No.	state)	Ji loodii ig / taa	IOITLY (GILY G
						a	authority)					
								1				
Special Skills/Qualit	fications: List all special skills y	ou possess	and n	nachir	nes c	or offi	ice equipmen	t you	can us	e, such as	calculators, <sub>l</sub>	printing
or graphics equipme	ent, computer equipment, type	es of softwar	re and	hardy	vare	, etc.	·					
Approximate Words	Per Minute in Typing					_ (i	if required for	this p	osition	ı)		
Sign Language (if re	equired for this position)	Yes □ No	· 🗆	А	re yo	ou a (	certified interp	oreter	?	Yes 🗌 No	o 🗌	
	guage other than English? (If i				-		· ∕es				—	
If ves, what languag	ge(s) do you speak?					F	low fluently?	F	Fair □	Good	Excellent	
							•					
Do you have a relati	ive who is either a member of	the Cheroke	ee ISD	) Boar	d ot	Edu	cation or who	is em	iployed	d in any cap	acity in the o	Sherokee
ISD? Yes N	No If yes, list the names, r	elationships	and p	ositio	n he	ld.						
Nam	ne of Relative		F	Relatio	onsh	ip				Pos	ition Held	
								+				

Name	Relationship	Telephone Number	Mailing Address
	PERSONAL	STATEMENT	
ease make a statement in vo	ur own handwriting concerning v	our reasons for desiring a position	with the Cherokee
dependent School District.	ur own handwriting concerning y	our reasons for desiring a position	with the Cherokee
'			
<u>'</u>			
<u>'</u>			
	FOLLOWING STATEMENTS CA	ARFFULLY AND INDICATE YOUR	UNDERSTANDING
		AREFULLY AND INDICATE YOUR NG IN THE SPACE PROVIDED	UNDERSTANDING
PLEASE READ THE	AND ACCEPTANCE BY SIGNI ion provided by me in connection		s document or not, is true
PLEASE READ THE  I certify that all the informat omplete, and I understand that hired, termination.	AND ACCEPTANCE BY SIGNI ion provided by me in connection at any misstatement, falsification,	NG IN THE SPACE PROVIDED with my application, whether on thi	s document or not, is true grounds for refusal to hi

4. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result

Signature-Applicant

Date

of Investigation for any criminal history in accordance with applicable statutes.

SIGN

HERE:

from furnishing such information to you.

THIS APPLICATION MUST BE SIGNED

#### **EMPLOYMENT HISTORY**

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experiences should clearly describe your qualifications.

- 1. Include ALL employment. Begin with your current or last position and work back to your first position.
- 2. Employment history should include each position held, even those with the same employer.
- 3. Give a brief summary of the technical and, if appropriate, the managerial responsibilities of each position you have held.
- 4. For supervisory/managerial positions, indicate the number of employees you supervised.

If you need additional space to adequately describe your employment history, you may use this employment history sheet or attach a typed employment history providing the same information in the same format as this application form.

me Last Name	First Name	Middle Name	Social Security No.
osition Title: mployer: lailing Address: ity and State/Zip: mployer's Telephone No: AC ( ) Starting Date	Current/Final Salary	Immediate Supervisor Name	Summer [
specific reason for leaving: Position Title: Employer:		Immediate Supervisor Name	Full- Time Part-Time
Aailing Address: City and State/Zip: Employer's Telephone No: AC ( ) Starting Date Leaving Date	Final Salary	TitleSupervisor's Telephone No.	Summer
M Da Yr. M Da Yr.	•		worked per wee

Position Title:	Immediate Supervisor	Full- Time
Employer:	Name	Part-Time
Mailing Address:		Summer
City and State/Zip:	Title	Temp/Project □
Employer's Telephone No: AC ( )	Supervisor's Telephone No.	Give average
Starting Date Leaving Date Final Salary	AC ( )	number of hours
M Da Yr. M Da Yr.		worked per week
o. y o. y		-
		if part-time
Summary of experience:		
Specific reason for leaving:		
Position Title:	Immediate Supervisor	Full- Time
Employer:	Name	Part-Time
Mailing Address:		Summer
City and State/Zip:	Title	Temp/Project
Employer's Telephone No: AC ( )	Supervisor's Telephone No.	Give average
		number of hours
Starting Date Leaving Date Final Salary  M Da Yr. M Da Yr.	AC ( )	worked per week
W    Da   11.   W    Da   11.		worked per week
		if part-time
Summary of experience:		
1		
Specific reason for leaving:		
Specific reason for leaving:		
	Immediate Supervisor	Full Time
Position Title:	Immediate Supervisor	Full- Time
Position Title: Employer:	Immediate Supervisor Name	Part-Time
Position Title: Employer: Mailing Address:	Name	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip:	Name	Part-Time Summer Temp/Project
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )	Name Title Supervisor's Telephone No.	Part-Time Summer Summer Give average
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( ) Starting Date Leaving Date Final Salary	Name	Part-Time Summer Summer Summer Simp/Project Sive average number of hours
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time Summer Summer Give average
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( ) Starting Date Leaving Date Final Salary	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time Summer Summer Summer Simp/Project Sive average number of hours
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time
Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: AC ( )  Starting Date	Name Title Supervisor's Telephone No.	Part-Time

### **Pre-Employment Affidavit for Applicant**

For purposes of this affidavit:

**Adjudication** and **conviction** refer to a conviction, plea of guilty or no contest (nolo contendre), 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 cha a minor.	rged with, adjudicate	ed for, or convicte	d of having an in	appropriate rela	tionship with
I have been charged minor. The charge, ad relevant facts pertaining	judication, or convict	tion was determin	ed to be <b>false.</b> Th		
I have been charged v minor. The charge, ad relevant facts pertainin	judication, or convict	tion was determin	ed to be <u>true.</u> Th		
Declaration of Applicant  The following affidavit is offer affidavit, in accordance with Temployment will be asked to contain the following affidavit.	Texas Civil Practices omplete a notarized d	and Remedies Co affidavit attesting	de section 132.00 to the same.		
I declare under penalty of perj	ury that the foregoing	g is true and corre	CT.		
Name (First, Middle, Last)			Date	e of Birth	
Address (Street, City, State, Z	ip Code)		Cou	inty	
Executed inCounty	County, State of _	, on the _	Date day of	Month	Year .
(Signature of Declarant)				_	
I understand that the date of b solely for the purpose of this u			determine eligibi	ility for employn	nent but will be used

<sup>\*</sup>This form will be processed separately and not shared with the hiring manager. Approved by the Texas Commissioner of Education, October 2017.

## CHEROKEE INDEPENDENT SCHOOL DISTRICT FINGERPRINT INFORMATION FOR EMPLOYMENT

PRINT IN BLUE OR BLACK INK: Please fill out the criminal history report completely. Be sure to sign when completed. The Cherokee ISD is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.

#### Confidential

The Cherokee 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.

You must also print out and complete the DPS Computerized Criminal History form that is found on the website in the same section as this application.

1				
Name				
L	ast	First		Middle
Social Security N	Number	Date of	oirth	
Driver's License				
	State and N	Number		
C	Street	City	State	Zip
Sex: ☐ Male	☐ Female	Ethnicity: 🗖	Black  White/C	other
		·		
		m providing about age, s	ex, and ethnicity wil	I not be used to (
	pioyment out win b	e used solely for the pur	pose of obtaining cri	
	pioyment out will b	e used <i>solely</i> for the pur	pose of obtaining cri	
information.*  Signature	pioyment out will b	e used <i>solely</i> for the pur	pose of obtaining cri	

<sup>\*</sup>This form will be removed from the application and filed separately in the HR office.