***An Equal Opportunity Employer\****

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| Date of application \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Personal Data** |  Name  *Last First Middle initial*Mailing address  *Street/Box City State ZIP Code*E-mail address Home phone Cell phone Other phone Other name that may appear on records  *(Used for certification, reference, and criminal history record checks)* |
| Position Data | List the position(s) for which you are applying Credentials included with application:  Résumé   All teaching and professional certificates or licenses   All transcripts showing degrees Date you can begin work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Have you been employed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ISD in the past?  Yes  NoIf you answered yes, provide dates of employment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Education/Training | Name and location of schools attended | Course of study and major/minor | Diploma, degree, certificate, or license granted | Year graduated*(College only)* |
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| Certification/Licensure | Certificates or Licenses Currently Held:* None
* Valid Texas
* Valid Other State
* Texas One-Year (out-of-state/country): Expiration date:
* Other:

Category/Level(s) of Certification: Areas of Specialization/Supplemental Certificates/Endorsements (as listed on certification):    |
| **Teaching Experience** | List teaching experience beginning with most recent years. |
| Name and location of school |  | Name and location of school |  |
| Type of assignment |  | Type of assignment |  |
| Dates taught |  | Dates taught |  |
| Principal’s name and phone |  | Principal’s name and phone |  |
| Reason for leaving |  | Reason for leaving |  |
| Name and location of school |  | Name and location of school |  |
| Type of assignment |  | Type of assignment |  |
| Dates taught |  | Dates taught |  |
| Principal’s name and phone |  | Principal’s name and phone |  |
| Reason for leaving |  | Reason for leaving |  |

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| **Other Work Experience** | Please provide a list of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Attach résumé if available. |
| 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 |  |
| 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 |   |
| **References** | 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 |
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| General Information | Do you have a relative who serves on the Board of Education or is an employee of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ISD?❑ Yes ❑ No If yes, please provide the relative’s name and relationship:  Have you ever been convicted of, pled guilty or no contest (nolo contendre) 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  NoIf 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.) |
| 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 sub sequent 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, per sonal 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 required by Texas Education Code to review criminal history of applicants.  Signature DateThis application becomes the property of Oakwood ISD. The district reserves the right to accept or reject it. |

*\*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 Russell Holden.



**OAKWOOD INDEPENDENT SCHOOL DISTRICT**

**631 N. HOLLY**

**OAKWOOD, TX 75855**

**PHONE: 903-545-2600 FAX: 903-545-2310**

**ADDENDUM TO APPLICATION**

Employment with Oakwood ISD is contingent upong a satisfactory clearance of an investigation of record for felony or misdemeanor conviction in compliance with TEC 22.083. By completing this Addendum to Application for employment with Oakwood ISD, I hereby authorize all persons, schools, companies, corporations, credit bureaus and law enforcement agencies to supply Oakwood ISD any information concerning my backgroumd in connection with employment consideration and release them from any liability and responsibility arising from doing so.

A copy of this authorization may be accepted with the same authority as the original.

Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

Other names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Maiden) (Other)

Social Security No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex: [ ] Male [ ] Female Ethnicity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand the information I am providing about age, sex, and ethnicity will not be used to determine eligibility, but will be used solely for the purpose of obtaining criminal history record information.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date