

West Rusk County Consolidated Independent School District

P.O. Box 168 • New London, TX 75682 • Telephone (903) 392-7850 • Fax (903) 392-7866

Employment Application for Service and Support Personnel

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

An Equal Opportunity Employer

Personal Data	Date of application _____ Social Security number _____
	Name _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Last First Middle Initial </div>
	Current address _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Street/Box City State Zip </div>
	Other address where you may be reached _____
	Work phone _____ Home phone _____
	Other name that may appear on records _____ (to be used for reference checks)

Position Data	List the positions for which you are applying _____
	Type of employment: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer only <input type="checkbox"/>
	Date you can begin work _____
	Have you ever been employed by this school district? yes <input type="checkbox"/> no <input type="checkbox"/>
	If yes, provide dates of employment _____

Education/Training	Names and locations of schools attended	Course of study: major/minor fields	Diploma, degree, certificate, or license held	Year graduated (college only)

Work Experience Other Work Experience

Please provide a complete listing of all jobs or positions you have held in the past ten years. List the most recent first. Attach additional sheets if necessary. Attach resume, if available. (Bus driver applicants, see Addendum.)

Employer and location	Position / Title	Dates Employed	Reason for leaving

Specific Skills

List specific skills and any machines or equipment you can operate. Include typing speeds and number of years of experience.

- 1. _____ 4. _____
- 2. _____ 5. _____
- 3. _____ 6. _____

General Information

Do you have a relative who is a member of the West Rusk CCISD Board of Trustees?

yes no

If yes, please provide the name of the relative and the relationship:

Have you ever been convicted of or plead guilty or no contest (nolo contendere) to, or received probation, suspension, or deferred adjudication for a felony or offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, or indecency with a minor)?

yes no

If 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.)

Addendum for School Bus Driver Applicants Only

Each person who applies to be a bus driver must provide the following information at the time of application. Note: Bus drivers must pass a physical examination and a drug screening test.
Equal Opportunity Employer

Personal Data

Name _____
 Home phone _____ Hours available for work _____
 Driver's license number _____ Type _____
 Do you have a Texas School Bus Training Certificate? yes no
 Have you ever had a license suspended, revoked, or cancelled? yes no
 If yes, explain on additional page.
 Are there any criminal charges or proceedings pending against you? yes no
 If yes, explain on additional page.
 Have you ever been convicted of or plead guilty or no contest (nolo contendere) to, or received probation, suspension, or deferred adjudication for any serious traffic violation? yes no
If yes, state where, when, and the nature of the offense on the back of this page; also indicate whether the charges were dismissed as a condition or probation, suspension, or deferred adjudication.
 In the past two years, have you failed an employer's alcohol or drug test? yes no
 If yes, explain on additional page.

Work Experience

Provide your work history information for the past ten years on all jobs for which you were a driver of a commercial motor vehicle. List most recent experience first. Use additional paper if necessary.

Names and locations of schools	Type of Assignment	Dates Worked	Reason for leaving

Verification

I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge, and understanding that any deliberate falsifications, misrepresentation, or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment.

I understand that the District is authorized by federal regulations to obtain alcohol and drug testing results from previous employers for two years prior to the date of this application and required by the Texas Education Code 22.084 and Transportation Code 521.002(f) to obtain criminal history record information on persons the District intends to employ.

Furthermore, I authorize the information I have provided to be used and for previous employers to be contacted for investigation purposes; and I release all parties from any liability for any damage that may result from furnishing information to you.

 Signature of Applicant Date

References

Please list references the District may contact regarding your work history. Include all managers and supervisors who evaluated or supervised your performance at your last two employing organizations.

Full name of reference	School district /Firm name	Mailing Address	Position/Title	Area Code/ Phone Number

Verification

I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge, and understanding that any deliberate falsification, misrepresentations, or omissions of fact may be grounds for rejection of my application or dismissal from subsequent 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, personal or otherwise, and release all such parties from liability for any damage that may result from furnishing same to you.

I understand that the District is authorized by Texas Education Code 22.083(b) to obtain criminal history record information on persons the District intends to employ.

Signature of Applicant

Date

This application becomes the property of the District. The District reserves the right to accept or reject it. This application will be considered active for 24 months. If you have not received a response during this time, you may reapply or reactivate your application.

For information about your rights or grievance procedures, contact the Title IX Coordinator and/or the Section 504 Coordinator, Lawrence Coleman at P.O. Box 168, New London, Texas 75682, or call (903) 392-7850.

It is the policy of West Rusk CCISD to not discriminate on the basis of sex, disability, race color, age, or national origin in its educational programs, activities, or employment required by Title IX, Section 504 and Title VI.

West Rusk County Consolidated
Independent School District
P. O. Box 168
New London, Texas 75682-0168
Telephone: 903-392-7850 Fax: 903-392-7866

To the Custodian of the Information:

I, _____ an applicant for employment or volunteer service with the West Rusk County Consolidated Independent School District, authorize the West Rusk County Consolidated Schools to obtain any criminal history record information that relates to me.

I understand that this information may be obtained from any law enforcement agency. I further understand that the West Rusk County Consolidated Schools may use this information in evaluating me for employment purposes.

Signed this the _____ day of _____.
Day Month/Year

Signature of Applicant _____

Please print the following information:

Name: _____ Sex: _____

Other names that may appear on records: _____

Your email address registered with TEA: _____
(Positions Requiring TEA Certification)

Mailing Address: _____
P. O. Box/Street Address City State Zip

Date of Birth: _____ Race: _____

Social Security #: _____ Driver's License #: _____

Usser I.D. #: 0107e

21:917 Access to Police Records of Employment Applicants

- (1) A school district is entitled to obtain criminal history record information that relates to a volunteer applicant with the district if, at the time of the request for the information, the district submits to the custodian of the information a signed statement from the volunteer applicant authorizing the district to obtain the information.
- (2) A school district may obtain information under this section from any law enforcement agency, including the police department or the Department of Public Safety, or from the Texas Department of Corrections.
- (3) A school district may use information obtained under this section only for the purpose of evaluating volunteer applicants.

Added by Acts 1981, 67th leg., p. 1867, ch. 444, paragraph 1, effective August 31, 1981

**DPS Computerized Criminal History (CCH) Verification
for
West Rusk County Consolidated Independent School District**

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 West Rusk CCISD conducting the criminal history check is not allowed to discuss any information obtained using this method. The agency will ask you to have a fingerprint search performed in order to comply with the Texas Education Agency guidelines. Therefore, if any misidentification based on the name search occurs, the required fingerprint search would clear the matter.

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 automated fingerprint identification system. I have been made aware that in order to complete this process I must have the correct fingerprinting FAST Pass form from this agency, make an online or phone appointment, submit a full and complete set of my fingerprints, and pay the required fee to the fingerprinting services company, IdentoGO (formerly L-1 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 West Rusk CCISD. Required for future DPS Audits)

Signature of Applicant or Employee

_____/_____/_____
Date

West Rusk County Consolidated ISD

Agency Representative Printed Name

Signature of Agency Representative

_____/_____/_____
Date

For office use only:

Check and Initial each Applicable Space

CCH Report Printed:

Yes _____ No _____ _____ initial

Purpose of CCH: _____

Hired _____ Not Hired _____ _____ initial

Date Printed: ____/____/____ _____ initial

Date Destroyed: ____/____/____ _____ initial