

# HALLSBURG INDEPENDENT SCHOOL DISTRICT

2313 Hallsburg Road, Waco, Texas 76705

Phone Number: 254-875-2331

FAX Number: 254-875-2436

## EMPLOYMENT APPLICATION FOR SERVICE AND SUPPORT 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 any medical conditions, disability, or any other legally protected status.

*An Equal Opportunity Employer*

<b>Personal Data</b>	Date of application: _____ Social Security Number: _____ Name _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 20px;"> <span><i>Last</i></span> <span><i>First</i></span> <span><i>Middle Initial</i></span> </div> Current Address _____ <div style="display: flex; justify-content: center; width: 80%; margin-left: 20px;"> <span><i>Street/Box</i></span> </div> <hr style="width: 80%; margin-left: 20px;"/> <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 20px;"> <span><i>City</i></span> <span><i>State</i></span> <span><i>Zip Code</i></span> </div> Other address where you may be reached: _____ Home phone _____ Cell phone _____ Other name that may appear on records _____ <div style="text-align: center; font-size: small;"><i>(Used only for reference checks)</i></div>			
<b>Position Data</b>	List the position(s) for which you are applying _____ Type of employment: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer only Date you can begin work _____ Have you been employed by Hallsburg ISD in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answered yes, provide dates of employment _____			
<b>Education Training</b>	Check the highest level of education attained: <input type="checkbox"/> Not a high school graduate (Circle Last Grade Completed) 1 2 3 4 5 6 7 8 9 10 11 12 <input type="checkbox"/> High school graduate <input type="checkbox"/> GED <input type="checkbox"/> Less than two years of college <input type="checkbox"/> Two or more years of college <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Master's Degree <input type="checkbox"/> Other training or education _____ Licenses and certificates held _____			
	Name and Location of Schools Attended	Course of Study and Major/Minor	Diploma, degree, Certificate, or License Held	Year Graduated <i>(College Only)</i>

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<b>Working Experience</b>	Please provide a complete list of all positions you have held in the past 10 years. List the most recent first. Attach additional sheets if necessary (bus driver applicants, see addendum). Attach resume if available			
	Employer and Location	Position/Title	Dates Employed	Reason for Leaving
<b>Special Skills</b>	List specific skills and any machines or equipment you can operate. Include typing speed and number of years of experience.			
	1. _____		2. _____	
	3. _____		4. _____	
	5. _____		6. _____	
<b>General Information</b>	Do you have a relative who is a Hallsburg ISD Board Member?			
	<input type="checkbox"/> Yes <input type="checkbox"/> No   If yes, give the name of the relative and relationship: _____			
	Have you ever been convicted of, pled guilty or no contest (nolo contendere) 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)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	If yes, please state where, when and the nature of the offense; indicate whether the charges were dismissed as a condition of probation, suspension, or deferred adjudication: _____ _____ _____ _____			
	(Conviction of a felony 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.)			

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<b>References</b>	Please list references the district can contact regarding your work history. Please include all Superintendents, Principals, and/or 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

<b>Verification</b>	<p>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 subsequent employment.</p> <p>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 the same to you.</p> <p>I understand the district is required by Texas Education Code 22.083 to review criminal history record information on applicants the district intends to employ.</p> <p>_____</p> <p>Signature <span style="margin-left: 200px;">Date</span></p> <p>This application becomes the property of the district. The district reserves the right to accept or reject it.</p>
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# CRIMINAL HISTORY RECORD INFORMATION REQUEST

**Confidential\***

The Hallsburg 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.

*Please print.*

Name \_\_\_\_\_  
*Last First Middle*

Social Security Number \_\_\_\_\_ Date of birth \_\_\_\_\_

Driver's License \_\_\_\_\_  
*State and Number*

Mailing Address \_\_\_\_\_  
*Street City State Zip*

Sex:  Male  Female Ethnicity:  Black  White/Other

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_