#### EMPLOYMENT APPLICATION FOR SERVICE AND SUPPORT PERSONNEL

# Doss Consolidated Common School District P. O. Box 50 11431 Ranch Road 648 Doss, TX 78618 (830) 669-2411 (830) 669-2303 (Fax)

An Equal Opportunity Employer

Name:	
Name:  Last First Middle Initial	
Current Addraga:	
Current Address: Street/Box City State/Zip Code	
Other address where you may be reached:	
Home phone: Cell phone:	
Other name that may appear on records:	
(Used only for certification, reference, and criminal history record checks	)
Check the Position(s) You Are Applying For:	
☐ Substitute Teacher ☐ Bus Driver ☐ Substitute Bus Driver ☐ Clerical/Office	)
☐ Instructional Aide ☐ Janitorial ☐ Other	
Type of Employment: ☐ Full-time ☐ Part-time	
Date you can begin work:	
Have you been employed by <b>Doss CCSD</b> in the past? ☐ Yes ☐ No	
If you answered yes, provide dates of employment:	
Check the highest level of education attained:	
□ Not a high school graduate (circle last grade completed) 1 2 3 4 5 6 7 8 9 10 11	
☐ High school graduate ☐ GED ☐ Less than two years of college	
☐ Two or more years of college ☐ Bachelor's degree ☐ Master's degree	
□ Other training or education:	
Do you possess a valid driver's license? ☐ Yes ☐ No Do you have a CDL Class B License ☐ Yes	□No
If no, would you consider obtaining a CDL? □ Yes □ No	
☐ Other licenses and/or certificates held	

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Name and location of schools attended	Course of study and major/min		Diploma, degre licens	Year Graduate	
Provide a list of all positions additional sheets, if necessal			ars. List the r	nost recent firs	st. Attach
Employer and Location	Position/Title	Position/Title Dates		Employed Reason fo	
		***			
	<u> </u>			***************************************	
ist specific skills, software p	proficiency, and any ma	achines (	or equipment	you can operat	e. Include
ping speed and number of	years of experience.			,	
:					
		Ιυ		talahada da da ayan ayan ayan ayan ayan ayan	
o vou have a relative who cor	was on the Roard of Educ	cation or	is an employed	of Doce CCET	12
Do you have a relative who ser	ease provide the relative				<b>,</b> :
🕽 Yes 🔲 No If ves, pla					

EMPL	OYMENT APPLICATION	ON FOR SERVICE A	ND SUPPORT PERS	ONNEL
suspension, or defer	convicted of, pled guilty red adjudication for a fe , murder, swindling, and	lony or any offense inv	olving moral turpitude	
If yes, please state w	here, when, and the na	ture of the offense:		
	t an automatic bar to employs or which you are applying.)	ment. The district will consi	der the nature, date, and re	elationship between the
List references the	district can contact re	garding your work hi	story.	
Full Name of Reference	School District/Firm Name	Mailing Address	Position/Title	Area Code/Phone Number
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.				
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.				
I understand that the	district is required by T	exas Education Code t	o review criminal histo	ory of applicants.
Sign	nature		 	
_				
This application becomes the property of the district. The district reserves the right to accept or reject it. This application shall be considered active for <u>12 months</u> . If you have not received a response during this time period, you may reapply or reactivate your application.				
Applicants for all posi	tions are considered with	out regard to race, color,	sex (including pregnav	ncy), natíonal origín,
religion, age, disabilit	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 inv	estigation of a complaint	related to a discriminat	zing employment practi	ce.

## Doss CCSD Criminal History Record Information Request (Confidential)\*

The Doss Consolidated Common 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.

lame	Last	First	Middle
Social Security Number _		Date of Birth	
Oriver's License Number _	7 Paris	State Issued	
Malling Address	Street		
	City	State	Zip
Gex: □ Male □ Fe	emale Ethnicity:	□ Asian □ Black □ His	spanic 🗆 Indian 🗆 White
dome Phone Number		Cell Phone Nu	ımber
		Cell Phone Nu	
E-mail address understand that the inform	nation I am províding		not be used to determine eligibility for
E-mail address understand that the inform	nation I am províding	about age, sex, and ethnicity will	not be used to determine eligibility for

### DPS Computerized Criminal History (CCH) Verification (Agency Copy)

I,		have	been	notified	that	а	Computerized
Criminal	APPLICANT or EMPLOYEE NAME (Please print) History (CCH) verification check will be perform	rmed b	у ассе	essing the	e Tex	as	Department of
Public S	afety Secure Website and will be based on Nam	ne and	DOB id	dentifiers	I supp	ply.	

Because the name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization conducting the criminal history check for background screening is not allowed to discuss <u>any</u> criminal history record information obtained using the <u>Name and DOB</u> method. Therefore, the agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the <u>Name and DOB</u> search.

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 make an appointment with L1 Enrollment Services, submit a full and complete set of my fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$24.95 to the fingerprinting services company, L1 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	Please:
orginature of Applicant of Employee	Check and Initial each Applicable Space
	CCH Report Printed:
Date	
	YES NO Dinitial
Agency Name (Please print)	Purpose of CCH:
3, (	Him D Not Him d D initial
	Hire □ Not Hired □ initial
Aganay Dangagantatiya Nama (Dlagga print)	Date Printed: initial
Agency Representative Name (Please print)	Bate Frinced.
	Destroyed Date: initial
Signature of Agency Representative	,
olgilatare of rigorof, representative	Retain in your files
Date	

#### **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 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 <u>false</u> . 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 <a href="true">true</a> . 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. Date of Birth Name (First, Middle, Last) Address (Street, City, State, Zip Code) County Executed in \_\_\_\_\_County, State of \_\_\_\_\_, on the \_\_\_\_\_day of \_\_\_ 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 unsworn declaration.\*