LOUISE INDEPENDENT SCHOOL DISTRICT

408 2nd Street Louise, Texas 77455 979-648-2982

EMPLOYMENT APPLICATION FOR PROFESSIONAL PERSONNEL

An Equal Opportunity Employer*

Date of	of Application					
	Name					
ıta				Middle		
Dŝ	Current Address		City Sto	ate ZIP Code		
ıal	2		,			
Personal Data	Other address where you					
er	Home Phone					
ш.	Other name that may appear on records					
	List the position for whi	ch you are applying				
- m	Credentials included with application:					
ata	Resumé					
u C	All teaching and professional certificates or licenses					
tio	All transcripts showing degrees					
Position Data	Date you can begin work					
_	Have you been employed by Louise ISD in the past? Yes No					
	If you answered yes, provide dates of employment					
ning	Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license granted	Year graduated (College only)		
n/Traii						
Education/Training						
E						

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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)					
	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			
ience	Supervisor's name and phone		Dept Chair's name and phone			
Experience	Reason for leaving		Reason for leaving			
Teaching	Name and location of school		Name and location of school			
Теас	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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4)	Please provide a list of all administrative positions you have held within the last 10 years. Resumé attached.						
rience	Name and location of school			Name and loc school	ation of		
Expe	Type of assignment			Type of assign	nment		
Administrative Experience	Dates as Admin.			Dates as Adm	in.		
minis	Supervisor's name and phone			Supervisor's r	name and		
Ad	Reason for leaving			Reason for lea	iving		
	Name and location of school			Name and loc school	ation of		
	Type of assignment			Type of assign	nment		
	Dates as Admin.			Dates as Adm	in.		
	Supervisor's name and phone			Supervisor's r	name and		
	Reason for leaving			Reason for lea	ving		
	Please list references the district can contact regarding your work history						
	Full name	School district		ng Address		ion/Title	Area Code/Phone
suces							
References							

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	Do you have a relative who serves on the Louise Board of Education or is an employee of Louise ISD?				
tion	Yes No If yes, provide the relative's name and relationship				
General Information	Have you ever been convicted of, pled guilty or no contest (nolo contender) 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 No				
If yes, please state where, when, and the nature of the offense					
0					
	(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 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.				
Verifi	I understand that the district is required by Texas Education Code to review criminal history of applicants.				
	Signature Date				
	This application becomes the property of the district. The district reserves the right to accept or reject it.				

The district Title IX Coordinator is

Dr. Garth Oliver, Superintendent 408 2nd Street, PO Box 97 Louise, TX 77455 979-648-2982 x 105

^{*}Applicants for all positions are considered without regard to race, color, national origin, religion, sex, marital status, veteran or military status, disability, or any other legally protected status.

DPS Computerized Criminal History (CCH) Verification (AGENCY COPY)

I,	, have been notified that a Computerized Criminal
APPLICANT or EMPLOYEE NAME (Please print)	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 conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using name and DOB method. Therefore, the agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB 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	Agency Use Only: Please check and Initial Each Space
Date of Birth	CCH Report Printed: Y N
Date of Application Agency Name: <u>Louise ISD</u>	Purpose of CCH: Pre-Employment Hire Not Hired Date of Inquiry:
Agency Representative (Please Print)	
Signature of Agency Representative	
Date	Retain in your files