

LORENZO INDEPENDENT SCHOOL DISTRICT

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 or handicap that is not job related, or any other legally protected status.

An Equal Opportunity Employer

Personal Data

Date of Application _____ Social Security No. _____

Name _____
Last *First* *Middle Initial*

Current Address _____
Street/Box *City* *State* *Zip Code*

Other address where you may be reached _____

Work Phone No. _____ Home Phone No. _____

Position Data

Position for which you are applying _____

Type of Employment: Full-time _____ Part-time _____ Summer Only _____

Date Available _____

Former LORENZO ISD Employee: yes _____ no _____

If yes, give dates of employment: _____

Education/Training

Check highest level attained.

- Not high school graduate (Circle last grade completed.) 1 2 3 4 5 6 7 8 9 10 11 12
- High school graduate GED Less than two years in college
- Two or more years college Bachelor's degree
- Master's degree Other training or education _____
- Licenses/certifications held _____

Schools Attended: List all applicable information.

Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree, or Certificate	Year Graduated (College Only)

Please provide a complete listing of all jobs or positions you have held in the past 10 years. List most recent first. Attach additional sheets if necessary. [Bus driver applicants, see Addendum.]

Work Experience

Employer and Location	Position/Title	Dates Employed	Reason for Leaving

Special Skills

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

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

General Information

• Are you aware of any reasons you would not be able to perform the duties of the position for which you are applying? yes no If yes, please explain: _____

• Do you have a relative who is a member of the _____ ISD Board of Education?
 yes no If yes, please give the name of relative and relationship: _____

• Have you ever been convicted of a felony or offense involving moral turpitude (including, but not limited to, theft, attempted theft, rape, murder, swindling, and indecency with a minor) and/or received probation or deferred adjudication? yes no If yes, please explain: _____

(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.)

Employment References

Please list below references who may be contacted regarding your work history. Please include all managers/supervisors at the last two employing organizations who evaluated or supervised your performance.

Full Name of Reference	School District/ Firm Name	Mailing Address	Position Title	Area Code/ Phone No.
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.....

Personal Statement

Please make a statement in your own handwriting concerning your reasons for desiring a position with the **LORENZO** ISD. (Use the back side of this page if necessary.)

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 above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand that the district is required by Texas Education Code §21.917 to obtain criminal history record information on applicants for employment.

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 a period of time not to exceed ____ days. Any applicant wishing to be considered for employment beyond this time period may inquire as to whether or not applications are being accepted at that time.

Signature of Applicant

Date