

APPLICATION FOR EMPLOYMENT

(AIDE – CUSTODIAN – CAFETERIA – SECRETARY)
 MONAHANS-WICKETT-PYOTE INDEPENDENT SCHOOL DISTRICT

PERSONAL INFORMATION

DATE _____

NAME _____ SOC. SEC. NO. _____

STREET, CITY, STATE, ZIP _____

PHONE NO. _____ ARE YOU 18 YEARS OR OLDER? _____

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? _____

Driver's License No. _____ State _____ Expiration Date _____

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? _____ IF SO, MAY WE INQUIRE WITH YOUR PRESENT EMPLOYER? _____

EVER APPLIED TO THIS COMPANY BEFORE? _____ WHEN? _____

| EDUCATION | NAME AND LOCATION OF SCHOOL | NO. OF YEARS ATTENDED | DID YOU GRADUATE? | SUBJECTS STUDIED |
|--|-----------------------------|-----------------------|-------------------|------------------|
| GRAMMAR SCHOOL | | | | |
| HIGH SCHOOL | | | | |
| COLLEGE | | | | |
| TRADE, BUSINESS OR CORRESPONDENCE SCHOOL | | | | |

FORMER EMPLOYERS (List below last three employers, starting with last one first)

| DATES EMPLOYED | NAME AND ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|----------------|------------------------------|--------|----------|--------------------|
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |

REFERENCES (Give names and addresses of two people not related to you and by whom you have not been employed.)

| NAME | ADDRESS | BUSINESS | YEARS ACQUAINTED |
|------|---------|----------|------------------|
| | | | |
| | | | |

GENERAL

Do you have a relative that is a member of the M-W-P Independent School District Board of Education?

If yes, give the names of relative and relationship:

How did you hear about us?

Summarize your special skills or qualifications:

Do you have any physical limitations that preclude you from performing any work for which you are being considered?

If Yes, what can be done to accommodate your limitation?

Comments

The Monahans-Wickett-Pyote ISD complies with House Bill 1498, pursuant to Subchapter2, Texas Education Code, Section 21.917 which requires the school district to run a criminal history check on any person applying for employment.

I authorize investigation of all statements contain in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Signature

Date

CONSENT TO PERFORM CRIMINAL HISTORY/BACKGROUND CHECK IN COMPLIANCE WITH THE FCRA (FAIR CREDIT REPORTING ACT)

Last Name First Name Middle Name or Initial

Maiden or other name(s) used in any and all other records of birth or records of residence.

*Address Apartment or #

City County State Zip

**Date of Birth Social Security Number **Gender **Race

***AS SHOWN ON THE ORIGINAL APPLICATION**
****TO BE USED FOR CRIMINAL HISTORY CHECKS ONLY AND NOT A PART OF THE PERSONNEL FILE.**

I, _____, am an applicant for employment / volunteerism with _____ and have been advised that as a part of the application process, the district conducts a criminal history background check. I do hereby consent to the district use of any information provided during the application process in performing the criminal history check. The district has informed me that I have the right to

The following are my responses to questions about my criminal history (if any).

1. YES NO Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (exclude minor traffic misdemeanors).

If yes, please provide details below.

State: _____ County: _____ Date of Offense: _____

Details of conviction:

2. YES NO Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense?

If yes, please provide details below.

State: _____ County: _____ Date of Offense: _____

Details of conviction:

3. YES NO Have you ever received probation or community supervision for any federal, state or municipal offense?

If yes, please provide details below.

State: _____ County: _____ Date of Offense: _____

Details of conviction:

4. YES NO Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States?

If yes, please provide details below.

Country: _____ City: _____ Date of Offense: _____

Details of conviction:

5. YES NO As of the date of this consent form, do you have any pending charges against you?

If yes, please provide details below.

State: _____ County: _____ Date of Arrest: _____

Details of conviction:

THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18.

| CITY / TOWN | COUNTY | STATE |
|-------------|--------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT AND COMPLETE. IF ANY INFORMATION PROVES TO BE INCORRECT OR INCOMPLETE, I UNDERSTAND THAT GROUNDS FOR CANCELLING OF ANY AND ALL OFFERS OF EMPLOYMENT / VOLUNTEERISM WILL E

Signed this _____ day of _____, **20**_____

APPLICANT (PRINT NAME): _____

APPLICANT'S SIGNATURE: _____