

**BENAVIDES 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 status, veteran or military status, disability, or any other legally protected status.

*An Equal Opportunity Employer*

<b>Personal Data</b>	Date of application _____ Social Security Number _____ Name _____ Last First Middle Initial Current Address _____ Street/Box City State Zip Code Other address where you may be reached _____ Work phone (____)____-_____ Home phone (____)____-_____ Other name that may appear on records _____ (Used for certification, reference, and criminal history record checks)			
<b>Position Data</b>	List the position(s) you are applying for _____ 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 <u>Benavides ISD</u> 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 (College Only)

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<b>Work 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 applications, 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 serves on the <u>Benavides ISD</u> Board of Education? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide the relative's name and relationship: _____ _____			
	Have you ever been convicted of, plead 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 _____ _____ _____ _____			
	_____			
	_____			
(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.)				

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<b>References</b>	Please list references the district can contact regarding your work history. Please include all managers and 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 damages that may result from furnishing the same to you.</p> <p>I understand that the district is authorized by Texas Education Code §22.083 to obtain criminal history record information on applicants the district intends to employ.</p> <p style="text-align: center;">             _____              Signature             <span style="margin-left: 200px;">_____</span>              Date         </p> <p>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</u> months. If you have not received a response during this time period, you may reapply or reactivate your application.</p>				

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

I, \_\_\_\_\_, have been notified that a computerized criminal 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.  
APPLICANT or EMPLOYEE NAME(Please Print)

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

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 have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of Birth

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Today's Date

**Benavides ISD**

\_\_\_\_\_  
Agency Representative Name (Please print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**Office Use Only**

<b>Please:</b>		
<b>Check and Initial each Applicable Space</b>		
CCH Report Printed:		
Yes _____ NO _____		_____ initial
Purpose of CCH: _____		
Hired _____ Not Hired _____		_____ initial
Date Printed: _____/_____/_____		_____ initial
Destroyed Date: _____/_____/_____		_____ initial
<b>Retain in your files</b>		