An Equal Opportunity Employer*

Dat	Date of application							
Personal Data	Name Current address Other address whe Home phone Other name that m	ast Street/Box re you may be reached Cell phone	First City S	er phone				
Position Data	Type of employme Date you can begin Have you been em	ent:	ISD in					
Special Skills	Include number of 1 2	software proficiency, a years of experience.	4 5	uipment you can operate.				
nce	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 applicants, see addendum). Attach résumé if available. Employer name and location Employer name and location							
Work Experience	Position/title held		Position/title held					
	Dates employed		Dates employed					
	Supervisor's name and phone		Supervisor's name and phone					
	Reason for leaving		Reason for leaving					

CELESTE ISD - EMPLOYMENT APPLICATION FOR SERVICE AND SUPPORT PERSONNEL

Work Experience	Employer name and location			Employer name and location				
	Position/title held				Position/title held			
	Dates employed				Dates employed			
Work	Supervisor's name and phone				Supervisor and phone	's name		
	Reason for leaving				Reason for leaving			
	Please list references the district can contact regarding your work history.							
References	Full name of reference	School district/ firm name		Mailing address		Position/title		Area code/ phone number
	List the highest level of education attained:							
	Licenses and certificates granted							
5	·							
Education/Training	Name and location of schools attended		Course of study and major/minor		Diploma, degree, certificate, or license granted		Year graduated (College only)	
Educa								

	 Do you have a relative who serves on the Board of Education or is an employee of Celeste ISD? Yes I No If yes, please provide the relative's name and relationship: 					
General Information	Have you ever been convicted of, pled guilty or no contest (nolo contendre) 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)? \Box Yes \Box No					
neral	If yes, please state where, when, and the nature of the offense					
Ger						
	(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 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 such parties from liability for any damage that may result from furnishing the same to you.					
	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. This application shall be considered active for 24 months. If you have not received a response during this time period, you may reapply or reactivate your application.

*Applicants for all positions are considered without regard to race, color, sex (including pregnancy), national origin, religion, age, disability, genetic information, veteran or military status, or any other legally protected status.

Confidential^{*}

The Celeste Independent 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.

Please print.

Name				
Last	Fir	st	Middle	
Social Security Number	Date	Date of birth		
Driver's License				
St	ate and Number			
Mailing Address				
Stree	t City	State	Zip	
Sex: 🗆 Male 🗅 Female	Ethnicity:	□ Black □ White/Other	r	

I understand that the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment but will be used *solely* for the purpose of obtaining criminal history record information.

Signature

Date



^{*} This form will be removed from the application and filed separately in the HR office.