# West Rusk County Consolidated Independent School District

P.O. Box 168 • New London, TX 75682 • Telephone (903) 392-7850 • Fax (903) 392-7866						
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, disability, or any other legally protected status.						
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	An Equa	al Opportunity Employe	er 			
	Date of applicationSocial Security number					
ta	Name Last F	Middle Initial				
Da	Current addressStreet/Box					
onal			State	Zip		
Personal Data	Other address where you may be reached Work phone					
-	Other name that may appear on records					
	(to be used for reference checks)					
Ø	List the positions for which you are apply	ring				
Dat	Type of employment: Full-time ☐ Pa	rt-time 🗆 Summe	r only □			
	Date you can begin work					
<u>.</u>	Date you can begin work					
ositio	Have you ever been employed by this sch	nool district? yes 🗆				
Position Data		nool district? yes 🗆				
Position	Have you ever been employed by this sch	nool district? yes 🗆				
Position	Have you ever been employed by this sch	nool district? yes 🗆		Year graduated (college only)		
Position	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
Education/Training Position	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		
	Have you ever been employed by this sch  If yes, provide dates of employment  Names and locations of	nool district? yes   Course of study:	Diploma, degree, certificate, or	Year graduated		

c Expe	Employer and location	Position / Title	Dates Employed	Reason for leaving		
Work Experience Other Work Experience						
Specific Skills W	List specific skills and any machines or equipment you can operate. Include typing speeds and					
	Do you have a relative who is a member of the West Rusk CCISD Board of Trustees?  ☐ yes ☐ no  If yes, please provide the name of the relative and the relationship:					
General Information	Have you ever been convicted of or plead guilty or no contest (nolo contendere) to, or received probation, suspension, or deferred adjudication for a felony or offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, or indecency with a minor)?    yes   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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## **Addendum for School Bus Driver Applicants Only**

Each person who applies to be a bus driver must provide the following information at the time of application. Note: Bus drivers must pass a physical examination and a drug screening test.

Faual Opportunity Employer

	<b>—</b>	qual Opportunity Emplo	70.		
	Name				
	Home phone Hours available for work				
	Driver's license number Type				
	Do you have a Texas School Bus Training Certificate? ☐ yes ☐ no				
Data	Have you ever had a license suspe	ended, revoked, or canc	elled? 🗌 yes	□ no	
õ	If yes, explain on additional page	э.			
ه	Are there any criminal charges or	proceedings pending a	gainst you? 🛚 y	es 🗆 no	
SOL	If yes, explain on additional page	9.			
Personal	Have you ever been convicted of o				
<u>a</u>	probation, suspension, or deferre				
	If yes, state where, when, and the nat charges were dismissed as a condition	ure of the offense on the b	ack of this page; also	o indicate wether the	
	In the past two years, have you fai				
	If yes, explain on additional pag		nor or arag toot.	_ , , , ,	
			ara an all iaha farr	which you were a driver	
	Provide your work history information of a commercial motor vehicle. List	tion for the past ten yea st most recent experien	ce first. Use addit	ional paper if necessary.	
စ္ပ	Names and locations of schools			Reason for leaving	
enc	Names and locations of schools	Type of Assignment	Dates Worked	reason for leaving	
eric					
άX					
×					
Work Experience					
	I hereby affirm that all information provided in this application is true and accurate to the best of				
	my knowledge, and understanding that any deliberate falsifications, misrepresentation, or				
	omissions of fact may be grounds for rejection of my application or dismissal from subsequent				
	employment.				
_	I understand that the District is authorized by federal regulations to obtain alcohol and drug testing				
ıţio	results from previous employers for two years prior to the date of this application and required by				
Verification	the Texas Education Code 22.084 and Transportation Code 521.002(f) to obtain criminal history				
erif	record information on persons the District intends to employ.				
>	Furthermore, I authorize the information I have provided to be used and for previous employers to				
	be contacted for investigation purposes; and I release all parties from any liability for any damage				
	that may result from furnishing in	formation to you.			
	Signature of Applicant Date				

and supervisors who evaluated or supervised your performance at your last two employing organizations. Area Code/ **Full name of School district Mailing Address** Position/Title **Phone Number** reference /Firm name References I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge, and understanding that any deliberate falsification, 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 same to you. Verification I understand that the District is authorized by Texas Education Code 22.083(b) to obtain criminal history record information on persons the District intends to employ. Signature of Applicant Date This application becomes the property of the District. The District reserves the right to accept or reject it. This application will be considered active for 24 months. If you have not received a response during this time, you may reapply or reactivate your application.

Please list references the District may contact regarding your work history. Include all managers

For information about your rights or grievance procedures, contact the Title IX Coordinator and/or the Section 504 Coordinator, Lawrence Coleman at P.O. Box 168, New London, Texas 75682, or call (903) 392-7850.

It is the policy of West Rusk CCISD to not discriminate on the basis of sex, disability, race color, age, or national origin in its educational programs, activities, or employment required by Title IX, Section 504 and Title VI.

# DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

, acknowledge that a Computerized Criminal					
APPLICANT or EMPLOYEE NAME (Please print)					
History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure					
Website and may be based on name and DOB identifiers. (This is not a consent form, but serves as					
information for the applicant.) Authority for this agency	to access an individual's criminal history data				
may be found in Texas Government Code 411; Subchapter	r F.				
Name-based information is not an exact search a	and only fingerprint record searches represent				
true identification to criminal history record information	(CHRI), therefore the organization conducting				
the criminal history check is not allowed to discuss with m	e any CHRI obtained using the name and DOB				
method. The agency may request that I also have a	fingerprint search performed to clear any				
misidentification based on the result of the name and DOE	search.				
In order to complete the fingerprint process I mu	ast make an appointment with the Fingerprint				
Applicant Services of Texas (FAST) as instructed	online at www.dps.texas.gov/Crime Records				
Information/Review of Personal Criminal History or by	calling the DPS Program Vendor at 1-888-467-				
2080, submit a full and complete set of fingerprints, requ	nest a copy be sent to the agency listed below,				
and pay a fee of \$25.00 to the fingerprinting services compared to the final services of the final services compared to the final services of the final services compared to the final services of the services of the final services of the services of the final services of the services of the final services of the servi	pany.				
Once this process is completed the information on	my fingerprint criminal history record may be				
discussed with me.					
(This copy must remain on file by this agenc	y. Required for future DPS Audits)				
Signature of Applicant or Employee (optional)	Please: Check and Initial each Applicable Space				
Date	CCH Report Printed:				
	YES NO initial				
Agency Name (Please print)	Purpose of CCH:				
Agency Representative Name (Please print)	Empl Vol/Contractor initial				
	Date Printed: initial				
Signature of Agency Representative	Destroyed Date: initial				
	Retain in your files				

Date

Rev. 06/2021

### West Rusk County Consolidated Independent School District P. O. Box 168

New London, Texas 75682-0168

Telephone: 903-392-7850 Fax: 903-392-7866

To the Custodian of the Information:

I, an appl with the West Rusk County Consolidated In West Rusk County Consolidated Schools to information that relates to me.	ndependent School Di	strict, authoriz	ervice e the
I understand that this information may be of further understand that the West Rusk Cour information in evaluating me for employme	nty Consolidated Scho		
Signed this the day of Month/Y	 Tear		
Signature of Applicant			
Please print the following information:			
Name:	Sex:		
Other names that may appear on records:			
Your email address registered with TEA:			
Your email address registered with TEA: ${(I)}$	ositions Requiring TI	EA Certification	on)
Mailing Address: P. O. Box/Street Address			
P. O. Box/Street Address	City	State	Zip
Date of Birth:	Race:		
Social Security #:	_ Driver's License #	:	
Usser I.D. #: 0107e			
21:917 Access to Police Records of Employ	ment Applicants		

- (1) A school district is entitled to obtain criminal history record information that relates to a volunteer applicant with the district if, at the time of the request for the information, the district submits to the custodian of the information a signed statement from the volunteer applicant authorizing the district to obtain the information.
- (2) A school district may obtain information under this section from any law enforcement agency, including the police department or the Department of Public Safety, or from the Texas Department of Corrections.

(3) A school district may use information obtained under this section only for the purpose of evaluating volunteer applicants.

Added by Acts 1981, 67<sup>th</sup> leg., p. 1867, ch. 444, paragraph 1, effective August 31, 1981

### Pre-Employment Affidavit for Applicant Offered Employment

#### For purposes of this affidavit:

**Adjudication** and **conviction** refer to a conviction, plea of guilty or no contest (nolo contendre), probation, suspension, or deferred adjudication.

**Charge** refers to a formal criminal charge as documented by a primary charging instrument (a compliant, information, or indictment) under the Texas Code of Criminal Procedure.

**Inappropriate relationship** refers to the crime of improper relationship between educator and student in Texas Penal Code section 21.12, and any other inappropriate relationship as determined by the State Board for Education Certification.

#### I declare the following:

I have never been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor.

I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be <u>false</u>. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction:

I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be <u>true</u>. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction:

Affidavit of Applicant Offered Employment			
The following affidavit is offered to satisfy the requirent employment affidavit.	ment of Texas Ed	ucation Code Sec	tion 21.009 for a pre-
I declare under penalty of perjury that the foregoing is	s true and correc	t.	
Name (First, Middle, Last)		Date of	Birth
Address (Street, City, State, Zip Code)		County	
Executed in County, State of Texas, on the County	day of _ Date	Month	 Year
(Signature of Declarant)		-	

State of Texas			
County of			
Before me,(Notary Public)	on this day perso	onally appeared	(Applicant Offered Employment)
(**************************************	to an incomplete disease	itu aan ta tho f	orogoing instrument of writing and
Known to me to be the person whose name			
after being duly sworn by me executed such	instrument of w	riting and acknow	vledged in my presence that he or
she signed the same for the purposes and co	onsideration ther	ein expressed.	
Given under my hand and seal of office this	day of _ (Date)	(Month)	(Year)
(Personalized Seal)			
		(Sign	nature of Notary Public)
		(Prir	nted Name of Notary Public)
		Commission Exp	ires:

I understand that the date of birth I am providing will not be used to determine eligibility for employment but will be used solely for the purpose of this pre-employment affidavit.\*

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

Approved by the Texas Commissioner of Education, October 2017.