

McDADE INDEPENDENT SCHOOL DISTRICT

Box 400

(512) 273-2522

McDade, Texas 78650

(512) 273-2101 – fax

Employment Application for Professional Personnel

McDade ISD considers applicants for all positions without regard to race, color, national origin, age, religion, sex, marital status, veteran or military status, the presence of a medical condition, disability or any other legally protected status.

McDADE ISD IS AN EQUAL OPPORTUNITY EMPLOYER

| | | | | |
|-----------------------------|---|---------------------------------|--|----------------|
| PERSONNEL DATA | Date of Application _____ Social Security Number _____ | | | |
| | Name _____ | | | |
| | Current Address _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Street City State Zip </div> | | | |
| | Work Phone # _____ Home Phone # _____ | | | |
| | Name & phone # of person we may contact if unable to reach you Name _____ Phone # _____ Other name that may appear on official records _____ | | | |
| POSITION DATA | Position for which you are applying _____ | | | |
| | Please include the following credentials with your application <ul style="list-style-type: none"> ▪ Resume ▪ All teaching and professional certificates or licenses ▪ All transcripts showing degrees earned | | | |
| | Date available for employment _____ | | | |
| | Have you ever been employed by McDade ISD? _____ YES _____ NO If you answered yes, provide dates of employment _____ | | | |
| EDUCATION / TRAINING | Name & Location of School Attended | Course of Study and Major/Minor | Diploma, Degree, Certificate or License Held | Year Graduated |
| | | | | |
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CERTIFICATION

Certificate or license currently held:

- None
- Valid Texas
- Texas Emergency
- Texas One-Year – expiration date _____
- Texas Temporary Administrative – expiration date _____

Please include copy of teaching certificate with application

Areas of Specialization:

- | | | |
|---|---|---|
| <input type="checkbox"/> Superintendent | <input type="checkbox"/> All Level Art | <input type="checkbox"/> Special Ed - _____ |
| <input type="checkbox"/> Principal | <input type="checkbox"/> All Level Health | <input type="checkbox"/> 4-8 Elementary – Field _____ |
| <input type="checkbox"/> Mid-Management Administrator | <input type="checkbox"/> All Level Physical Education | <input type="checkbox"/> Secondary (7-12) – Field _____ |
| <input type="checkbox"/> EC- 4 Elementary | <input type="checkbox"/> All Level Music | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Elementary – Level _____ | <input type="checkbox"/> Social Studies Composite | <input type="checkbox"/> Highly Qualified – Area(s) _____ |
| <input type="checkbox"/> Elementary & Kindergarten | <input type="checkbox"/> Science Composite | <input type="checkbox"/> Other (specify) _____ |
| Specialization: _____ | <input type="checkbox"/> Librarian | |
| <input type="checkbox"/> All Level Reading | <input type="checkbox"/> Counselor | |

TEACHING EXPERIENCE

| Name & Location of School (begin with most recent) | Type of Assignment | Dates Taught | Reason for Leaving |
|---|--------------------|--------------|--------------------|
| | | | |
| | | | |
| | | | |
| | | | |

OTHER WORK EXPERIENCE

| Please provide a list of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Attach your resume. | | | |
|---|----------------|----------------|--------------------|
| School District/Firm Name | Position/Title | Dates Employed | Reason for Leaving |
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| | | | |
| | | | |

PROFESSIONAL DATA

Please list relevant professional activities. Omit references to organizations that would reveal race, age, ethnic origin, or religion.

Papers and articles published:

Seminars and workshops conducted:

Other related professional activities:

GENERAL

Do you have a relative who serves on the McDade ISD Board of Trustees? Yes No

If yes, please provide the relative's name and relationship: _____

Have you ever been arrested, convicted of or pleaded guilty or no contest (nolo contendere) to a felony or offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with a minor)? Yes No

(Failure to report any arrest, conviction, or deferred adjudication for any felony or any crime involving moral turpitude may be reasons for proposed nonrenewal of an employee's term contract.)

If yes, please state where, when, and the nature of the offense; indicate whether the charges were dismissed as a condition of probation, suspension, or deferred adjudication:

(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.)

REFERENCES

Please list references that can verify 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 | Phone Number |
|------------------------|-------------------------------|-----------------|----------------|-----------------|
| | | | | |
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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 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 the same to you.

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

Signature of Applicant _____ 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 the current school year (Sept. 1 - Aug.30). If you have not received a response during this time period, you may reapply or reactivate you application.

McDADE INDEPENDENT SCHOOL DISTRICT

Phone
(512) 273-2522

P.O. Box 400
McDade, Texas 78650

Fax
(512) 273-2101

The McDade Independent School District is authorized by state law to obtain criminal history record information on applicants that the district may employ (Texas Education Code 22.083). The information requested below is necessary to obtain criminal history record information.

Name: _____
 Last First Middle Maiden

Social Security #: _____

Date of Birth: _____

Sex: _____ Male _____ Female

Ethnicity: _____ Black _____ White/other

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.

Application Signature: _____

Date: _____

This form will be removed from the application and filed separately in the personnel office

- Applicant forward to references for completion.

-References return by US Mail to the address below.

Phone
(512) 273-2522

McDADE ISD
P.O. Box 400
McDade, Texas 78650

Fax
(512) 273-2101

TO (Reference Name): _____

I have submitted an employment application with McDade ISD for the position of: _____.

I hereby authorize you to give full and complete information below as requested by McDade ISD. I hereby release you and your company or district from all liability for any damage whatsoever that may issue from furnishing same to McDade ISD.

Name _____ (print)

Signature _____

Date: _____

| CODES | 5 – Clearly Outstanding 2 – Below Expectations | | 4 – Exceeds Expectations 1 – Unsatisfactory | | 3 – Satisfactory | |
|---|---|-------|--|-------|------------------|--|
| | (1) | (2) | (3) | (4) | (5) | |
| Personal Appearance | _____ | _____ | _____ | _____ | _____ | |
| Health/Attendance | _____ | _____ | _____ | _____ | _____ | |
| Punctuality | _____ | _____ | _____ | _____ | _____ | |
| Warm-Outgoing Personality | _____ | _____ | _____ | _____ | _____ | |
| Rapport & Communication with Parents | _____ | _____ | _____ | _____ | _____ | |
| Rapport & Communication with Students | _____ | _____ | _____ | _____ | _____ | |
| Integrity / Professional Ethics | _____ | _____ | _____ | _____ | _____ | |
| Dependability | _____ | _____ | _____ | _____ | _____ | |
| Adaptability | _____ | _____ | _____ | _____ | _____ | |
| Enthusiasm | _____ | _____ | _____ | _____ | _____ | |
| Commitment | _____ | _____ | _____ | _____ | _____ | |
| Initiative | _____ | _____ | _____ | _____ | _____ | |
| Use of Acceptable Oral & Written English Communication Skills..... | _____ | _____ | _____ | _____ | _____ | |
| Knowledge of Subject Matter | _____ | _____ | _____ | _____ | _____ | |
| Makes Sound Professional Judgments | _____ | _____ | _____ | _____ | _____ | |
| Classroom Management / Discipline | _____ | _____ | _____ | _____ | _____ | |
| Leadership Ability | _____ | _____ | _____ | _____ | _____ | |
| Response to Supervision | _____ | _____ | _____ | _____ | _____ | |
| Probable Success as a Teacher | _____ | _____ | _____ | _____ | _____ | |

Reason for leaving? _____

How long have you known the applicant? _____ Would you rehire? _____ Y _____ N

If not, please explain: _____

Information given above is based on (check items which apply): Principal ____; Asst. Principal ____; Co-Worker ____; Worked under my supervision ____; Student teacher under my supervision ____; Student in my class ____; Personal acquaintance with applicant ____; Other ____.

Do you feel you can recommend this applicant without reservation? _____ Y _____ N

If not, please explain _____

Date _____

Name & Title _____