



| Schools | No. of Yrs. Attended | Name/Location of Schools Attended | Diploma, Degree, Certificate or License | Date of Graduation |
|---------|----------------------|-----------------------------------|---|--------------------|
| GRAMMAR |                      |                                   |   |                    |
| HIGH    |                      |                                   |   |                    |
| COLLEGE |                      |                                   |   |                    |
| OTHER   |                      |                                   |   |                    |

**WORK EXPERIENCE**

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. List work experience beginning with most recent years.

| Name /Address of Company | Date |    | List Your Duties | Reason for Leaving |
|--------------------------|------|----|------------------|--------------------|
|                          | From | To |                  |                    |
|                          |      |    |                  |                    |
|                          |      |    |                  |                    |
|                          |      |    |                  |                    |
|                          |      |    |                  |                    |

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. \_\_\_\_\_

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

**REFERENCES**

| Name | Address | Occupation |
|------|---------|------------|
|      |         |            |
|      |         |            |
|      |         |            |

**FOR SUBSTITUTE TEACHERS ONLY**

**CERTIFICATE OR LICENSE CURRENTLY HELD:**

A. Type of certificate presently held:

- None
- Valid Texas
- Valid \_\_\_\_\_ state
- Emergency (Texas)
- Texas one-year certificate—expires \_\_\_\_\_  
Month      Year
- Texas temporary administrative—expires \_\_\_\_\_  
Month      Year

B. Areas of Specialization:

- Administrator
- Superintendent
- Principal
- Mid-management Adm.
- Elementary
- Elementary & Kindergarten
- Secondary (Jr./Sr. High) subjects: \_\_\_\_\_
- All Level Art
- All Level Health and PE
- All Level Music
- Librarian
- Counselor
- Nurse
- Visiting Teacher
- Supervisor
- Special Education \_\_\_\_\_
- Vocational \_\_\_\_\_

Please list the days you are available to substitute and your assignment preferences. Day(s) of week

- Every Day
- Only the following days:
  - Monday
  - Tuesday
  - Wednesday
  - Thursday
  - Friday

- Assignment
  - Any or only the following:
    - Elementary
    - Intermediate
    - Secondary
    - Special Education

Are you receiving Texas Teacher Retirement (TRS) benefits?  Yes  No (The amount of time that an individual receiving TRS benefits may be employed without affecting benefits is governed by TRS rules and laws.)

**EVERYONE MUST COMPLETE VERIFICATION.**

**VERIFICATION:**

I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge. I understand that any deliberate falsifications, misrepresentations, or omissions of facts 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 X22.083 to obtain criminal history record information on applicants the district intends to employ.

DATE: \_\_\_\_\_, 20\_\_\_\_  
Legal Signature of Applicant

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 12 months. If you have not received a response during this time period, you may reapply or reactivate your applications.