SUBSTITUTE (TEACHER/AIDE/BUS DRIVER/FOOD SERVICE) An Equal Opportunity Employer*

Dat	Date of application				
Personal Data	Name	First reet/Box City Cell phone on records criminal history record checks) ing for? Retirement System (TR) time employee by a TR ict will be assessed a month	Social Security No. Other phone S) retirement benefits? Y S-covered employer? Y Sly surcharge as required by TRS	Tes □ No es □ No rules.)	
Assignment Preference	Please list the days you are available to substitute and your assignment preferences. Day(s) of week Monday Tuesday Wednesday Thursday Friday Assignment Elementary Intermediate Secondary Special Education				
Position Data	Credentials included with ap Résumé All teaching and profe All transcripts showing Have you been employed by If you answered yes, provide	essional certificates or lag degrees New Summerfield ISE	o in the past? ☐ Yes ☐ No		
aining	List the highest level of education attained: Licenses and certificates granted				
Education/Train	Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license granted	Year graduated (College only)	
Edı					

Certification	Certificates or Licenses Cur None Valid Texas Valid Other State Texas One-Year (out- Other: Category/Level(s) of Certification/Sup	of-state/country)				ertification):
	List teaching experience beg necessary.	List teaching experience beginning with most recent years. Attach additional sheets if necessary.				
	Name and location of school		Name and location of school			
	Type of assignment		Type of assignment			
nce	Dates taught		Dates taught			
Experience	Principal's name and phone		Principal's name and phone			
	Reason for leaving		Reason for leaving			
Teaching	Name and location of school		Name and location of school			
	Type of assignment		Type of as	signment		
	Dates taught		Dates taug	ht		
	Principal's name and phone		Principal's phone	name and		



	Provide a list of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Attach résumé if available.					
			Employer name and location			
	Position/title held		Position/title held			
) e	Dates employed		Dates employed			
oerienc	Supervisor's name and phone		Supervisor's name and phone			
Other Work Experience	Reason for leaving		Reason for leaving			
her Wo	Employer name and location		Employer name and location			
Q	Position/title held		Position/title held			
	Dates employed	tes employed				
	Supervisor's name and phone		Supervisor's name and phone			
	Reason for leaving		Reason for leaving			
nce	What special quali	fications do you have?				
perience						
Other Work Ex	What equipment ca	What equipment can you operate?				
er Wo						
Oth						

	Li	st references the di	strict can contact r	egarding your worl	k history	
		Full name of reference	School district/ firm name	Mailing address	Position/title	Area code/ Phone number
		reference	Titiii name			1 none number
nces						
References						
R						
		ave you ever been obation, suspension				
						decency with a
turpitude (including, but not limited to, theft, rape, murder, swindling, and minor)? \(\text{Yes} \) 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)					nse	
al Inf		jes, preuse state w				
ener	_	(A felony conviction is n	ot an automatic har to en	onlowment. The district w	vill consider the nature of	ate and relationship
(A felony conviction is not an automatic bar to employment. The district will consider between the offense and the position for which you are applying.)					in consider the nature, u	are, and relationship

New Summerfield ISD 13307 Hwy 110 S New Summerfield, TX 75780

Verification

903-726-3306 903-726-3405 (Fax) www.nsisd.sprnet.org

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 sub sequent 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 required by Texas Education Code to review criminal history record information of substitute teachers.

I understand that I am required to report any outside employment with a TRS-covered employer to the district and provide a monthly record of hours worked so the district can determine if it will be subject to the monthly surcharge.

Signature Date

This application becomes the property of the district. The district reserves the right to accept or reject it.



^{*}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. Additionally, the district does not discriminate against an applicant who acts to oppose such discrimination or participates in the investigation of a complaint related to a discriminating employment practice.

New Summerfield ISD

The New Summerfield Independent School District is required by state law, Texas Education Code, Section 21.917, to obtain criminal history record information on all applicants for employment with the district. The information requested below is necessary to obtain criminal history record information and will be used only for this purpose. This is not considered a part of your application for employment and will be promptly removed from your application.

Full Name:						
		Last	First		Middle	
Driver License Number:			Social S	Security Number: _		
Date of Birth:			E-Mail address:			
Sex: D	//ale	□ Female				
Ethnicity:	□ Black	□ Hispanic	□ White	□ Other		

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

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

I,, ack	nowledge 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 identif	iers. (This is not a consent form, but serves as
information for the applicant.) Authority for this agenc	y to access an individual's criminal history data
may be found in Texas Government Code 411; Subchap	ter F.
Name-based information is not an exact search	and only fingerprint record searches represent
true identification to criminal history record informatio	n (CHRI), therefore the organization conducting
the criminal history check is not allowed to discuss w	ith me any CHRI obtained using the name and
DOB method. The agency may request that I also ha	ve a fingerprint search performed to clear any
misidentification based on the result of the name and DO	<u>DB</u> search.
In order to complete the fingerprint process I	nust make an appointment with the Fingerprint
Applicant Services of Texas (FAST) as instruc	ted online at www.txdps.state.tx.us /Crime
Records/Review of Personal Criminal History or by cal	ling the DPS Program Vendor at 1-888-467-2080,
submit a full and complete set of fingerprints, request a	copy be sent to the agency listed below, and pay
a fee of \$25.00 to the fingerprinting services company.	
Once this process is completed the information of	on my fingerprint criminal history record may be
discussed with me.	
(This copy must remain on file by this age	ncv. Required for future DPS Audits)
(
Signature of Applicant or Employee (optional)	
	Please: Check and Initial each Applicable Space
Date	CCH Report Printed:
	74.00.00
Agency Name (Please print)	YES NO initial
	Purpose of CCH:
Agency Representative Name (Please print)	Empl Vol/Contractor initial
Signature of Agency Representative	Date Printed: initial
organist of regards, respectively.	Destroyed Date: initial
	· ·

Date

Rev. 09/2015

Retain in your files

Pre-Employment Affidavit for Applicant

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 complaint, 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 Educator Certification.

Ιd

County

I decla	re the following:				
0	 I have never been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. 				
0	 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 false. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction: 				
0	 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: 				
Declar	ration of Applicant				
a pre-e 132.00	lowing affidavit is offered to satisfy the requirement of Texas Edu imployment affidavit, in accordance with Texas Civil Practices and 1. An applicant who is offered employment will be asked to comp ing to the same.	d Remedies Code section			
I decla	re under penalty of perjury that the foregoing is true and correc	ct.			
Name	Name (First, Middle, Last) Date of Birth				
Addre	Address (Street, City, State, Zip Code) County				

County County, State of _____, on the ____ day of ____ State Date Month

Year

(Signature of Declarant)					
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 unsworn declaration.*					

Approved by the Texas Commissioner of Education, October 2017.

^{*}This form will be processed separately and not shared with the hiring manager.

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 complaint, 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 Educator Certification.

I declare the following:

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

0	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
	false. The following are all of the relevant facts pertaining to the charge, adjudication, or
	conviction:

0	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	
true. The following are all of the relevant facts pertaining to the charge, adjudication		
	conviction:	

Affidavit of Applicant Offered Employment

The following affidavit is offered to satisfy the requirement of Texas Education Code section 21.009 for a pre-employment affidavit.

I declare under penalty of perjury that the fe	oregoing is true and	d correct.		
Name (First, Middle, Last)		Date	Date of Birth	
Address (Street, City, State, Zip Code)		Coun		
Executed in County, State	of Texas, on the	day of	Month	, Year
(Signature of Declarant)				
State of Texas County of				
Before me, (insert the	name of the notar	y), on this day	y persona	lly appeared
(insert the name of the ap	plicant), known to	me [or prove	d to me o	n the oath of
or through	(description c	of identity car	d or othe	document) to
be the person whose name is subscribed to	the foregoing instr	ument] and a	cknowled	ged to me that
he executed the same for the purposes and	consideration there	ein expressed	. Given un	der my hand
and seal of office this day of	, (year).			
(Personalized Seal)				
		Notar	y Public's	Signature
I understand that the date of birth I am providing will for the purpose of this pre-employment affidavit.*	not be used to determine	e eligibility for er	nployment b	ut will be used solely
*This form will be processed separately and not share	d with the hiring mana	iger.		

Approved by the Texas Commissioner of Education, October 2017.