

MT. ENTERPRISE I. S. D.

FOR OFFICE USE ONLY	
Date Received _____	Updated _____
Interviewed _____	Comments _____

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.

An Equal Opportunity Employer

Personal Data	Date of application _____ Social Security Number _____
	Name _____ <div style="display: flex; justify-content: space-between; width: 90%; margin-left: 10%;"> Last First Middle Initial </div>
	Current Address _____ <div style="display: flex; justify-content: space-between; width: 90%; margin-left: 10%;"> Street Box City State Zip Code </div>
	Work phone _____ Home phone _____
	Other Name that may appear on records _____ (to be used for reference checks)

Position Data	List the positions for which you are applying _____
	Type of employment: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer only
	Date you can begin work _____
	Have you ever been employed by this school district? <input type="checkbox"/> YES <input type="checkbox"/> NO
	If yes, give dates of employment: _____

Education / Training	Check highest educational level attained:
	<input type="checkbox"/> Not high school graduate (Circle last grade completed.) <div style="display: flex; justify-content: center; gap: 10px;"> 123456789101112 </div>
	<input type="checkbox"/> High school graduate <input type="checkbox"/> GED <input type="checkbox"/> Less than two years college
	<input type="checkbox"/> Two or more years college <input type="checkbox"/> Bachelor's degree
	<input type="checkbox"/> Master's degree <input type="checkbox"/> Other training or education _____
	Licenses/certifications held _____ _____

SCHOOLS ATTENDED: LIST ALL APPLICABLE INFORMATION

Names and locations of schools attended	Course of study: major/minor fields	Diploma, degree, certificate, or license held	Year Graduated (college only)

Name of Applicant: _____

Work Experience	Please provide a complete listing of all jobs or positions you have held in the past ten years. List most recent first. Attach additional sheets if necessary. Attach resume, if available. (Bus driver applicants, see Addendum)			
	Employer and Location	Position/Title	Dates Employed	Reason for Leaving
Work Experience	List specific skills and any machines or equipment you can operate. Include typing speed and Number of years of experience.			
	1. _____	4. _____		
	2. _____	5. _____		
3. _____	6. _____			
General Information	Do you have a relative who is member of the Mt. Enterprise Board of Trustees? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please provide the name of the relative and the relationship:			

	Have you ever been convicted of or plead guilty or no contest (no lo 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)?			
	<input type="checkbox"/> yes <input type="checkbox"/> 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.)				

Please list references the District may contact regarding your work history. 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	Area code/ Phone #

Please make a statement in your own handwriting concerning your reasons for desiring a position with the Mt. Enterprise I. S. D. (Please use additional sheets of paper if necessary.)

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 Pertinent information they may have, personal or otherwise, and release all such parties from liability for any damage that may result from furnishing same tot you.

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 period, You may reapply or reactivate you application.

Please return application to:

Mt. Enterprise Independent School District
301 NW 3rd St.
Mt. Enterprise, TX 75681