

**GRANDVIEW INDEPENDENT SCHOOL DISTRICT**

**PO Box 310**

**Grandview, Texas 76050**

Employment Application for Professional 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 or handicap that is not job related or any other legally protected status.

An Equal Opportunity Employer

<b>Personal Data</b>	Date of Application _____ Social Security Number _____ Name _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 10%;"> <span>Last</span> <span>First</span> <span>Middle Initial</span> </div> Current Address _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 10%;"> <span>Street/Box</span> <span>City</span> <span>State</span> <span>Zip Code</span> </div> Other address where you may be reached _____ Work Phone _____ Home Phone _____ Email Address _____ Name used on records if different from present name _____ (To be used for reference checks)
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<b>Position Data</b>	College Major _____ Minor _____ Position for which applying _____ Credentials included with application <input type="radio"/> Résumé <div style="margin-left: 100px;"> <input type="radio"/> All teaching and professional certificates  <input type="radio"/> All transcripts showing degrees                 </div> Date available for position _____ Former Grandview ISD employee: <input type="radio"/> Yes <input type="radio"/> No If yes, give dates of employment _____
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<b>Education / Training</b>	<b>Schools Attended: List all applicable information</b>			
	Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree or Certificate	Year Graduated

**Certification**

Type of certificate held now  
 None  
 Valid Texas (Standard, Provisional or Professional)  
 Probationary (Intern in educator preparation program)  
 Texas one-year certificate (out-of-state): Expiration date \_\_\_\_\_  
 State of certification \_\_\_\_\_

Areas of specialization  
 Superintendent  
 Principal / Mid-management  
 Special Education  
 PreK / Kindergarten  
 Elementary  
 EC-4

School Counselor  
 Nurse  
 Librarian  
 4-8  
 8-12  
 EC-12

Vocational (specify) \_\_\_\_\_  
 Areas of certification:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Teaching Experience**

List teaching experience beginning with most recent years

Name of School and Location	Type of Assignment	Dates Taught	Reason for Leaving

Total creditable years \_\_\_\_\_ (Full-time teaching in college, public school or in an accredited private school is creditable)

**Other Work Experience**

Please provide a complete listing of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Please attach résumé, if available.

School District/Firm Name	Position/Title	Dates Employed	Reason for Leaving

Professional Data

Omit references to organizations that would reveal race, age, ethnic origin, or religious persuasion.

Publications/ articles \_\_\_\_\_

\_\_\_\_\_

Seminars/workshops conducted \_\_\_\_\_

\_\_\_\_\_

Other related professional activities \_\_\_\_\_

\_\_\_\_\_

General Information

Are you aware of any reasons you would not be able to perform the duties of the position for which you are applying?  Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Do you have a relative who is a member of the Grandview ISD Board of Education?  Yes  No If yes, please give the name of relative and relationship. \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a felony or offense involving moral turpitude (including, but not limited to, theft, rape, murder, and indecency with a minor)?  Yes  No If yes, please explain \_\_\_\_\_

\_\_\_\_\_

(Conviction of a felony 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 who may be contacted regarding your work history. Please include all managers/ supervisors at the last two employing organizations who evaluated or supervised your performance.

Full Name of Reference	School District or Firm Name	Mailing Address	Position or Title	Phone Number

Personal Statement

Please make a statement in your own handwriting concerning your reasons for desiring a position with the Grandview ISD. Use additional sheets of paper if necessary.

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 above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand that the district is required by Texas Education Code §21.917 to obtain criminal history record information on applicants for employment.

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 a period of time not to exceed two years. Any applicant wishing to be considered for employment beyond this time period may inquire as to whether or not applications are being accepted at that time.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

