

LULING INDEPENDENT SCHOOL DISTRICT
212 East Bowie, Luling, Texas 78648 (830)875-3191

Application for Support Staff

GENERAL INFORMATION

Date: _____

Name: _____
Last First Middle Social Security Number

Present Address: _____
Number Street Apt. # (_____) Area Code Current Telephone

City State Zip Code (_____) Area Code Alternate Telephone

Person to notify in case of emergency: _____
Name Relationship
(_____) _____
Area Code Telephone Number

POSITION(S) DESIRED

PLEASE CHECK: Maintenance Custodial Food Service

List Specific Position(s): _____ Are you interested in Part time? Yes No

Were you previously employed by Luling ISD? Yes No

If yes, please state your position _____ When employed? _____

Reason for leaving position _____

When will you be available to begin work with the Luling Independent School District? _____

EDUCATIONAL TRAINING AND WORK EXPERIENCE

Indicate your highest grade completed: _____ Are you a high school graduate? Yes No

Name of High School: _____ City: _____ State: _____

College(s)/University(ies) Attended: _____ Degree/Hours: _____

LIST IN CHRONOLOGICAL ORDER

Name of Employer & Address	Dates	Kind of Work	Salary	Reason for Leaving

This application will become the property of the Luling Independent School District and will remain in the personnel file for *one* year. The application will be activated upon request. Any changes to your information should be reported to the personnel office in writing.

PLEASE MAIL OR RETURN THIS APPLICATION TO THE LULING INDEPENDENT SCHOOL DISTRICT PERSONNEL OFFICE.

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

REFERENCES

List four references. Include at least two Employer References for whom you have worked, who have first hand knowledge of you character personality and job performance.

Name	Position	Address	Zip Code	Phone Number

ADDITIONAL INFORMATION

1. Please make a statement concerning your reason(s) for wanting to work with Luling Independent School District.

2. Please list specific skills and/or any machines or equipment you can operate and the number of years experience (related to the position applied for).

3. Are you aware of any reason you would not be able to perform the duties of the position for which you are applying? Yes No

If yes, please explain:

4. Have you ever been involuntarily terminated from another job? Yes No
If yes, please explain:

5. Have you ever been convicted of a felony or offense involving moral turpitude and/or received probation or deferred adjudication? Yes No
If yes, please explain:

6. Do you have any relatives employed by Luling ISD? Yes No
If yes, please indicate:

Name _____ Position _____ Relationship _____

7. Are you related to a current School Board member? Yes No
If yes, please indicate:

Name _____ Relationship _____

AGREEMENT

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 falsification misrepresentation or omissions of fact may be ground for rejection of my application or dismissal from subsequent employment. I authorize the reference 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 Luling Independent School District is required by Texas Education Code 21.917 to obtain criminal history record information of applicants for employment. Furthermore, this application becomes that property of Luling Independent School District which reserves the right to accept or reject it.

Signature of Applicant

Date

LULING INDEPENDENT SCHOOL DISTRICT

212 East Bowie Street, Luling, Texas 78648

Telephone (830) 875-3191

Fax (830) 875-3193

CRIMINAL HISTORY RECORD INFORMATION ADDENDUM

CONFIDENTIAL*

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

Please print.

Name

Last	First	Middle
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Social Security Number _____

Date of birth _____

Sex: Male Female

Ethnicity:

Native American Asian
 African American Hispanic
 White

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.

Signature

Date

*This form will be removed from the application and filled separately in the personnel office.

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