An Equal Opportunity Employer*

Dat	Date of application						
ıta	Name	Five		Aiddle initial			
Da	Current address	1 11 31		Tiaaie iniiiai			
Personal Data	Current addresss	treet/Box City	State				
	Other address where you may be reachedOther phoneOther phone						
ers	Home phone	Cell phone	Other phone				
4	Other name that may appear						
	(Used for certification, reference, and	d criminal history record checks)					
o	Please list the days you are Day(s) of week Every	Please list the days you are available to substitute and your assignment preferences.					
rer	• ` '	•	Vednesday ☐ Thursday ☐	l Friday			
ssignment Preference	Assignment Any as	•					
t P		•	☐ Secondary ☐ Specia				
nen	Preferred campuses						
gnr	Ana von na sainina Tanas T						
Assi		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					
1							
Data	Credentials included with application: ☐ Résumé						
	☐ All teaching and professional certificates or licenses						
ior	☐ All transcripts showing degrees						
Position	Have you been employed by Merkel ISD in the past? Yes No						
Pc	nt	_					
	List the highest level of education attained:						
	Licenses and certificates granted						
Education/Training	Name and location of school attended	s Course of study and major/minor	Diploma, degree, certificate, or license granted	Year graduated (College only)			
Educ							



	Certificates or Licenses Currently Held:				
	□ None				
	☐ Valid Texas				
	☐ Valid Other State				
uc	☐ Texas One-Year (out-of-state/country): Expiration date:				
atic	□ Other:				
Certification	Category/Level(s) of Certification:				
Cer	$Areas\ of\ Specialization/Supplemental\ Certificates/Endorsements\ (as\ listed\ on\ certification):$				

	List teaching experience beginning with most recent years.				
Teaching Experience	Name and location of school		Name and location of school		
	Type of assignment		Type of assignment		
	Dates taught		Dates taught		
	Principal's name and phone		Principal's name and phone		
	Reason for leaving		Reason for leaving		
	Name and location of school		Name and location of school		
Ť	Type of assignment		Type of assignment		
	Dates taught		Dates taught		
	Principal's name and phone		Principal's name and phone		
	Reason for leaving		Reason for leaving		

	Please 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.						
Other Work Experience	Employer name and location	ame and		Employer name and location			
	Position/title held			Position/title	e held		
	Dates employed			Dates emplo	yed		
	Supervisor's name and phone			Supervisor's name and phone			
	Reason for leaving			Reason for leaving			
	Employer name and location			Employer name and location			
	Position/title held			Position/title held			
	Dates employed			Dates employed			
	Supervisor's name and phone			Supervisor's and phone	s name		
	Reason for leaving			Reason for leaving			
	Please list references the district can contact regarding your work history.						
	Full name of reference			Mailing ddress Positi		on/title	Area code/ phone number
nces							
References							



ıtion	Have you ever been convicted of, pled guilty or no contest (nolo contendre) to, or received probation, suspension, or deferred adjudication for a felony or any offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with a				
General Information	minor)?				
Genera	(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.)				
u	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.				
Verification	I understand that the district is required by Texas Education Code to review criminal history record information of substitute teachers.				
	Signature Date				
	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 <u>24 months</u> . If you have not received a response during this time period, you may reapply or reactivate your application.				



^{*}Applicants for all positions are considered without regard to race, color, national origin, religion, sex, marital status, veteran or military status, disability, or any other legally protected status

The district Title IX Coordinator is

(Bryan Allen, Supeintendent, P.O. Box 430 Merkel, Texas 79536, and 325-928-2000.)

Please Mail Application to:
Bryan Allen, Superintendent
P.O. Box 430
Merkel, Texas 79536
Email:ballen@merkelisd.net



P.O. BOX 430, MERKEL, TEXAS 79536 AREA CODE 325-928-5813

CRIMINAL HISTORY RECORD INFORMATION ADDENDUM

CONFIDENTIAL*

THE MERKEL INDEPENDENT SCHOOL DISTRICT IS REQUIRED BY STATE LAW TO OBTAIN CRIMINAL HISTORY RECORD INFORMATION ON APPLICANTS THE DISTRICT INTENDS TO EMPLOY EITHER ON A FULL-TIME, PART-TIME, OR SUBSTITUTE BASIS, (ACCORDING TO Texas Education Code §22.083 and Senate Bill 9). THE INFORMATION REQUESTED BELOW IS NECESSARY TO OBTAIN CRIMINAL HISTORY AND FINGER PRINTING RECORD INFORMATION.

PLEASE P	RINT.				
NAME					
	LAST		FIRST		MIDDLE
	ECURITY NUMB	ER		DATE OF	
SEX	MALE	FEMALE	ETHNICITY:	BLACK	WHITE/OTHER
NOT BE U	JSED TO DETERM	MINE ELIGIBILT	N I AM PROVIDING Y FOR EMPLOYMEN VE NECESSARY INFO	NT BUT WILL BE	EX, ETHNICITY WILL USED SOLELY FOR
	STAND THAT IS I THIS INFORMAT		ILITY TO PAY FOR A	ALL FEES THAT A	RE REQUIRED TO
SIGNATU	RE				
DATE					

