

Hitchcock

INDEPENDENT SCHOOL DISTRICT

8117 Highway 6, Hitchcock, TX 77563

(409) 986-5514 Office, 409-986-5141 Fax

Michael F. Bergman, Ed.D.
Superintendent
mbergman@hitchcockisd.org

Application for Professional Employment

Name _____
(Last) (First)

To the Applicant

Credentials required of Applicant for consideration for employment

1. A properly completed application. Include:
 - a. Application
 - b. Completed criminal history background check form
 - c. Resume
 - d. A transcript for all college and/or university work. An Official transcript is required, if employed.
 - e. Copy of teaching certificate
 - f. Copy of Eligibility of Internship, if applicable
 - g. Copy of ExCet or TExES test results
 - h. Copy of PDAS training certificate, if applicable
 - i. The names of at least four (4) persons who can provide a professional recommendation for you (College Placement file will be acceptable). Please provide complete mailing address, including zip code, and a telephone number.

Applications may be obtained at the Hitchcock ISD Administration Office or the Hitchcock ISD website: www.hitchcockisd.org

Submit application by mail or by fax to 409-986-5141.

Brenda J. Taylor, Superintendent's Secretary
Hitchcock ISD
8117 Highway 6
Hitchcock, TX 77563

Phone: 409-986-5514
Job openings posted at www.hitchcockisd.org

2. Applications will be active for one (1) year from date of receipt.

Certification

Type of Certificate held now

- None
- Valid Texas
- Valid other state _____
- Emergency (Texas)
- Texas one-year certificate: (out-of-state/country): Expiration date ____/____/____
- Other _____

Category/Level(s) of Certification: _____

Areas of Specialization/supplemental Certificates/Endorsements as listed on certification):

Teaching Experience

List teaching experience beginning with most recent years

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

Total creditable years _____ (Full-time teaching in college, public schools, 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 resume, 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 positions for which you are applying? Yes No If yes, please explain:

Do you have a relative who is a member of the Hitchcock ISD Board of Education? Yes No If yes, please give the name of the relative and relationship: _____

Have you ever resigned in lieu of nonrenewal or termination of contract? Yes No If yes, please explain: _____

Have you ever been convicted of a felony or offense involving moral turpitude (including, but not limited to, theft, attempted theft, rape, murder, swindling, and indecency with a minor) and/or received probation or deferred adjudication? 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 offense and the position for which you are applying.)

References

Please list below 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/Firm Name	Mailing Address	Position/Title	Area Code/Phone No.

CRIMINAL HISTORY RECORD INFORMATION REQUEST

The Hitchcock Independent School District is required by Texas Education Code Chapter 22, Subchapter C to review the criminal history of applicants, employees, independent contractors, student teachers, and certain volunteers. The information requested below is necessary to obtain criminal history record information.

Please print

Name _____
Last First Middle

Social Security Number _____ Date of Birth _____

Driver's License _____
State and Number

Mailing address _____
Street City State Zip

Sex: Male Female Ethnicity: Black White/Other

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 filed separately in the HR office.

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I, _____, have been notified that a computerized criminal history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB information I supply.

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process I must have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, L1 Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by your agency. Required for future DPS Audits)

Signature of Applicant or Employee

____/____/____
Date

Hitchcock ISD
Agency Name (Please print)

Brenda J. Taylor
Agency Representative Name (Please print)

Signature of Agency Representative

____/____/____
Date

Please:		
Check and Initial each Applicable Space		
CCH Report Printed:		
YES _____	NO _____	_____ initial
Purpose of CCH: _____		
Hired _____ Not Hired _____		
		_____ initial
Date Printed: ____/____/____		_____ initial
Destroyed Date: ____/____/____		_____ initial
Retain in your files		

**Hitchcock Independent School District
Professional Reference Release Form**

Fill in the top portion of the reference for each employment reference you have listed on your application. If no employment references are available, you may then list personal references. **The top portion of the reference report must be filled out, signed and returned with your application.** The Human Resources Department will mail the reference forms. **ONLY** reference forms mailed from the Human Resources Department will be acceptable and valid references.

I, the undersigned, give Hitchcock Independent School District (Hitchcock ISD) authorization to contact this reference. I hereby authorize all persons, schools, companies, corporations, law enforcement agencies, and the Industrial Accident Board to release any information contained in my employment record, school records, criminal records, and Workers' Compensation records to the Hitchcock ISD. I do release them from any liability and responsibility arising from their doing so. I am willing that a true copy of this authorization be accepted as the same authority as the original.

To: _____ Applicant Name (print) _____
 Address: _____ Position Desired _____
 _____ Social Security Number _____

Date: _____ Applicant Signature _____

Applicant must fill in information above this line.

Please indicate by a check mark your rating of the applicants qualities as listed below.

	Clearly Outstanding	Exceeds Expectations	Satisfactory	Below Expectations	Unsatisfactory
Teaching Effectiveness or probable effectiveness					
Attitude Toward Children recognizes needs					
Work Habits					
Personality wholesome, pleasing					
Intellectual Capacity					
Emotional Stability self-control					
Social Qualities evidence of social maturity					
Adaptability to Job Assignment					
Use of English in writing, conversation, and speech					
Public Relations					
Between what dates have you know the applicants' work?	Mon/day/year From:		Mon/day/year To		
What position did the applicant occupy and at what school or organization?					
If considering this person for a position, would you: ___ Employ without looking further ___ Consider strongly, but look at additional applicant ___ Not consider for employment					

Please add any comments that might be helpful to us in evaluating this applicant on the reverse side of this sheet.

Signature: _____	Position: _____	Date: _____
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Please return to:
 Hitchcock Independent School District
 Personnel
 8117 Highway 6
 Hitchcock, Texas 77563

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