



<b>Certification</b>	<p>Certificates or Licenses Currently held:</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Valid Texas</p> <p><input type="checkbox"/> Valid Other State _____</p> <p><input type="checkbox"/> Texas One-Year (out-of state/country): Expiration date: _____</p> <p><input type="checkbox"/> Other: _____</p> <p>Category/Level(s) of Certification: _____</p> <p>Areas of Specialization/Supplemental Certificates/Endorsements (as listed on certification)</p> <p>_____</p> <p>_____</p>
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<b>Teaching Experience</b>	List teaching experience beginning with most recent years.			
	Name and location of school	Type of assignment	Dates taught	Reason for leaving

<b>Other Work Experience</b>	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 resume if available.			
	School district/firm name	Position/title	Dates employed	Reason for leaving

<b>Assignment Preference</b>	<p>Please list the days you are available to substitute and your assignment preferences.</p> <p>Day(s) of week   <input type="checkbox"/> Every day  <input type="checkbox"/> Monday   <input type="checkbox"/> Tuesday   <input type="checkbox"/> Wednesday   <input type="checkbox"/> Thursday   <input type="checkbox"/> Friday</p> <p>Assignment   <input type="checkbox"/> Any assignment  <input type="checkbox"/> Elementary   <input type="checkbox"/> Middle   <input type="checkbox"/> Junior High   <input type="checkbox"/> High School  PK-3                      4-6                      7-8                      9-12  <input type="checkbox"/> Special Education</p> <p>Preferred campuses _____</p> <p>Are you receiving Texas Teacher Retirement (TRS) benefits?   <input type="checkbox"/> Yes   <input type="checkbox"/> No  (The amount of time that an individual receiving TRS benefits may be employed without affecting benefits is governed by TRS rules and laws.)</p>																													
<b>General Information</b>	<p>Have you ever been convicted of, pled guilty or no contest (nolo contendere) 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 minor)?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>If yes, please state where, when and the nature of the offense _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(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.)</p>																													
<b>References</b>	<p>Please list references the District can contact regarding your work history. Include all managers and supervisors who evaluated or supervised your performance at your last two employers.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Full name of reference</th> <th style="width: 20%;">School district/ firm name</th> <th style="width: 20%;">Mailing address</th> <th style="width: 20%;">Position/title</th> <th style="width: 20%;">Area code, phone number</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					Full name of reference	School district/ firm name	Mailing address	Position/title	Area code, phone number																				
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