

HUBBARD INDEPENDENT SCHOOL DISTRICT

P.O. BOX 218, HUBBARD, TEXAS 76648-0218

Phone Number: 254-576-2564

Fax Number: 254-576-5019

EMPLOYMENT APPLICATION FOR SERVICE & SUPPORT PERSONNEL

We consider applicants for all positions without regard to race, color, national origin, age, religion, sex, marital status, veteran or military status, the presence of a medical condition, disability, or any other legally protected status.

An Equal Opportunity Employer

Personnel Data	Date of Application: _____ Social Security No.: _____ Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Last First Middle Initial </div> Current Address: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Street / Box City State Zip Code </div> Work Phone No. _____ Home Phone No.: _____ Cell Phone No. _____																				
Position Data	Position for which you are applying: _____ Type of Employment: Full-time _____ Part-time _____ Summer Only _____ Date Available: _____ Former Hubbard ISD Employee: Yes _____ No _____ If yes, give dates of employment: _____																				
Education / Training	Check highest level attained. ___ Not high school graduate. (Circle last grade completed.) 1 2 3 4 5 6 7 8 9 10 11 12 ___ High school graduate ___ GED ___ Less than two years college ___ Two or more years college ___ Bachelor's degree ___ Master's degree ___ Other training or education _____ Licenses / Certifications held: _____ _____ _____ Schools Attended: List all applicable information. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 35%;">Name of School and Location</th> <th style="width: 25%;">Course of Study Major/Minor Fields</th> <th style="width: 30%;">Diploma, Degree, or Certificate</th> <th style="width: 10%;">Year Graduated</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree, or Certificate	Year Graduated																
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Job History	<p>Please provide a complete listing of all jobs or positions you have held in the past 10 years. List most recent first. Attach additional sheets if necessary. (Bus driver applicants, see Addendum.)</p>				
	Employer and Location	Position / Title	Dates Employed	Reason for Leaving	
Skills	<p>List specific skills and/or any machines or equipment you can operate. Include typing speed and number of years experience.</p>				
	1. _____		2. _____		
General Information	<p>Do you have a relative who is a member of the Hubbard ISD Board of Education? Yes ____ No ____ If yes, please give the name of relative and relationship: _____</p> <p>_____</p>				
	<p>Have you ever been convicted of or plead guilty or no contest (nolo contendere) to a felony or offense involving moral turpitude (including, but not limited to: theft, rape, murder, swindling and indecency with a Minor)? Yes ____ No ____</p> <p>If yes, please state where, when, and the nature of the offense; indicate whether the charges were dismissed as a condition of probation, suspension, or deferred adjudication: _____</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>				
	<p>_____</p>				
References	<p>Please list below references who may be contacted regarding your work history. Please include all managers/supervisors at the last two places of employment who evaluated or supervised your performance.</p>				
	Full Name Of Reference	School District / Firm Name	Mailing Address	Position / Title	Area Code / Phone No.

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 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.

I understand that the district is authorized by Texas Education Code 522.083 to obtain criminal history record information on applicants the district intends to employ.

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 a period of time not to exceed 365 days. Any applicant wishing to be considered for employment beyond this time may inquire as to whether or not applications are being accepted at that time.

