Lasara ISD P.O. Box 57 Lasara, TX 78561 (956) 642-3598 (956) 642-3546 FAX An Equal Opportunity Employer*

| Date of application | | | | | |
|---------------------|---|--|--|-------------------------------------|--|
| Personal Data | Name | <i>First</i> <i>reet/Box City</i> y be reached Cell phone on records | State ZOther phone | | |
| Position Data | List the position(s) for which you are applying Credentials included with application: □ Résumé □ All teaching and professional certificates or licenses □ All transcripts showing degrees Date you can begin work Have you been employed by Lasara ISD in the past? □ Yes □ No If you answered yes, provide dates of employment | | | | |
| Education/Training | Name and location of schools attended | Course of study and major/minor | Diploma, degree, certificate, or license granted | Year graduated (College only) | |
| | | | | | |

| Certification/Licensure | Certificates or Licenses Currently Held: Valid Texas Valid Texas Valid Other State Texas One-Year (out-of-state/country): Expiration date: Other: 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 and location of school | | Name and location of school | of | | |
| | 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 | | | |
| | 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. | | | | | | |
|-----------------------|--|-------------------------------|--|------------------------|---------|----------|----------------------------|
| | Employer name and location | | | Employer na location | ame and | | |
| | Position/title held | | | Position/title | e held | | |
| e | Dates employed | | | Dates emplo | oyed | | |
| beriend | Supervisor's name and phone | | | Supervisor's and phone | s name | | |
| ork Exp | Reason for leaving | | | Reason for 1 | eaving | | |
| Other Work Experience | Employer name and location | | | Employer na location | ame and | | |
| ot | Position/title held | | | Position/title | e held | | |
| | Dates employed | | | Dates emplo | oyed | | |
| | Supervisor's name and phone | | | Supervisor's and phone | s name | | |
| | Reason for leaving | | | Reason for 1 | eaving | | |
| | Please list references the district can contact regarding your work history. | | | | | | |
| | Full name of reference | School district/ firm name | | lailing ddress | Positi | on/title | Area code/ phone number |
| References | | | | | | | |
| Refer | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| | Do you have a relative who serves on the Board of Education or is an employee of Lasara ISD? | | | | |
|---------------------|---|--|--|--|--|
| General Information | □ Yes □ No If yes, please provide the relative's name and relationship: | | | | |
| | 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 minor)? \Box Yes \Box No | | | | |
| | If yes, please state where, when, and the nature of the offense | | | | |
| | | | | | |
| Verification | (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.) | | | | |
| | 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, per sonal or otherwise, and release all such parties from liability for any damage that may result from furnishing the same to you. | | | | |
| Verif | I understand that the district is required by Texas Education Code to review criminal history of applicants. | | | | |
| | Signature Date | | | | |
| | This application becomes the property of the district. The district reserves the right to accept or reject it. | | | | |

*Applicants for all positions are considered without regard to race, color, sex (including pregnancy), national origin, religion, age, disability, genetic information, veteran or military status, or any other legally protected status. Additionally, the district does not discriminate against an applicant who acts to oppose such discrimination or participates in the investigation of a complaint related to a discriminating employment practice.

The district Title IX Coordinator is <u>Janie Livas</u>.

Confidential^{*}

The Lasara 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 | st | Middle | |
| Social Security Number | Date | Date of birth | | |
| Driver's License | | | | |
| Stat | e and Number | | | |
| Mailing Address | | | | |
| Street | City | State | Zip | |
| Sex: 🗆 Male 🗖 Female | Ethnicity: | □ Black □ White/Othe | r | |

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.