

LISD

LEVELLAND INDEPENDENT SCHOOL DISTRICT

Attn: Superintendent's Secretary
704 11th Street
Levelland, TX 79336
Phone: (806) 894-9628
Fax: (806) 894-2583
www.levellandisd.net

Dear Applicant:

We are pleased to learn of your interest in the Levelland Independent School District.

Professionally appropriate conduct is required of every employee of this district regardless of the duties or position held. If you complete and return this employment application, the Human Resources Department of this Employer may check a variety of sources, including, but not limited to: official criminal records sources, media sources, social and networking websites, internet logs or blogs, or other internet sources where text, photographic images, audio or video clips, clipart, or other images of any kind or where other similar information is posted. Any information obtained by their Employer will be used solely for the purposes of evaluation of a candidate's qualification and will be confidentially maintained in accordance with Employer policies and state or federal law. If you do not wish to have these sources reviewed, please do not complete this application.

Enclosed is an application and a criminal history records check permission form. In order to make a formal application with the district, it is necessary for you to complete each of the following items:

1. Fill out the entire application form. Provide all information requested.
2. Complete the criminal history records check permission form.
3. Return the completed application along with the criminal history records check permission form to the Superintendent's secretary at the above address.

We look forward to receiving your application and thank you for your interest.

Employment Application for Substitute Teachers/Substitute Teacher Aides

An Equal Opportunity Employer

Please provide a complete list of all positions you have held in the past 10 years. List the most recent first. Attach additional sheets if necessary. Attach resume if available.

Work Experience

Employer and Location	Position/Title	Date Employed	Reason for Leaving

Employment Application for Substitute Teachers/Substitute Teacher Aides

An Equal Opportunity Employer

General Information

Do you have a relative who serves on the Levelland I.S.D. Board of Education? YES NO
 If yes, please provide the relative's name and relationship: _____

Are you physically and mentally able to perform the job(s) for which you are applying?
 YES NO
 If yes, please explain.

Have you been asked to resign or been discharged from any position? YES NO
 If yes, explain. _____

Have you ever been convicted of, pled guilty to, or no contest (nolo contendere) to, or received probation, suspension, or deferred adjudication for a felony or offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with a minor)?
 YES NO
 If YES, please state where, when, and the nature of the offense:

(A felony 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.)

References

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 employments.

Full Name of Reference	School District Firm Name	Mailing Address	Position/Title	Area Code & Phone Number

Employment Application for Substitute Teachers/Substitute Teacher Aides

An Equal Opportunity Employer

Citizenship

Are you a U.S. citizen, U.S. national, lawful permanent resident, lawful temporary resident, or refugee? YES NO

Upon hiring, I agree to complete the I-9 form provided by the District.

Date

Signature

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 above 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 Educational Code §22.083 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 12 months. If you have not received a response during this time period, you may reapply or reactivate your application.

Employment Application for Substitute Teachers/Substitute Teacher Aides

An Equal Opportunity Employer

Confidential

Criminal History Record Information Addendum

The Levelland Independent School District is required by state law to obtain criminal history record information on applicants being considered for employment with the district (Texas Education Code §21.917). The information requested below is necessary to obtain criminal history record information.

Full Name (Print): _____

Social Security Number: _____

Date of Birth: _____

Drivers License Number: _____

I give my consent to obtain my criminal history record.

I understand 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. I also understand that this form can/will be used on an annual basis.

Signature: _____

Date: _____

This form will be removed from the application and filed separately.

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, L1Enrollment 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

Agency Name (Please print)

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		