

**CHARLOTTE INDEPENDENT SCHOOL DISTRICT**  
**P.O. BOX 489 CHARLOTTE, TEXAS 78011**  
**(830) 277-1431/FAX (830) 277-1551**

Employment Application for Service and Support Personnel  
 We consider applicants for all positions without regard to race, color, age, religion, sex, marital or veteran status, the presence of a medical condition, disability, or any other legally protected status.  
*An Equal Opportunity Employer*

<b>Personal Data</b>	Date of Application _____ Social Security No. _____ Name _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-left: 40px;"> <span><i>Last</i></span> <span><i>First</i></span> <span><i>Middle Initial</i></span> </div> Current Address _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-left: 40px;"> <span><i>Street/Box</i></span> <span><i>City</i></span> <span><i>State</i></span> <span><i>Zip Code</i></span> </div> Other Address where you may be reached _____ Work Phone No. _____ Home Phone No. _____
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<b>Position Data</b>	Position for which you are applying _____ Type of Employment: Full-time _____ Part-time _____ Summer Only _____ Date Available _____ Former <u>Charlotte I.S.D.</u> Employee: Yes _____ No _____ If yes, give dates of employment: _____
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<b>Education/Training</b>	Check highest level attained. <input type="checkbox"/> Not high school graduate (Circle last grade completed.) 1 2 3 4 5 6 7 8 9 10 11 12 <input type="checkbox"/> High School Graduate <input type="checkbox"/> GED <input type="checkbox"/> Two or more years college <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's degree <input type="checkbox"/> Other training or education _____ Licenses/Certifications held _____ <hr/> Schools Attended: List al information. <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 30%;">Name of School And Location</th> <th style="width: 30%;">Course of Study Major/Minor Fields</th> <th style="width: 20%;">Diploma, Degree, Or Certificate</th> <th style="width: 20%;">Year Graduated (College Only)</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> </tbody> </table>	Name of School And Location	Course of Study Major/Minor Fields	Diploma, Degree, Or Certificate	Year Graduated (College Only)												
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<b>Work Experience</b>	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.)			
	Employer and Location	Position/Title	Dates Employed	Reason for Leaving
<b>Special Skills</b>	List Specific skills and/or any machines or equipment you can operate. Include typing speed and number of years experience.			
	1. _____		4. _____	
2. _____		5. _____		
3. _____		6. _____		
<b>General Information</b>	<ul style="list-style-type: none"> <li>• Do you have a relative you is a member of the <u>Charlotte</u> ISD Board of Education?  <input type="checkbox"/> Yes   <input type="checkbox"/> No   If yes, please give the name of relative and relationship: _____</li> </ul> <hr/> <hr/>			
	<ul style="list-style-type: none"> <li>• Have you ever been convicted of a felony or 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  If yes, please state where, when, and the nature of the offense: _____</li> </ul> <hr/> <hr/> <hr/> <hr/>			
	<p style="font-size: small;">(Conviction of 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.)</p>			





**DPS Computerized Criminal History (CCH) Verification  
(AGENCY COPY)**

I, \_\_\_\_\_, have been notified that a Computerized Criminal History (CCH)  
APPLICATN OR EMPLOYEE NAME  
verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB identifiers 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 conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using the name and DOB method. Therefore, the agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprint 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 make an appointment with L1 Enrollment Services, submit a full and complete set of my fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$24.95 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

\_\_\_\_\_  
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: _____	
Hire_____ Not Hired_____	___ Initial
Date Printed: _____	___ Initial
Destroyed Date: _____	___ Initial
<b>Retain in your files</b>	