An Equal Opportunity Employer*

Dat	Date of application					
nal Data	Name		N	liddle initial		
	E-mail address	reet/Box City	State Z	IP Code		
Personal	Home phone	Cell phone	Other phone			
Ā	Other name that may appear on records					
	(Used for certification, reference, and criminal history record checks)					
	List the position(s) for whi	List the position(s) for which you are applying				
	Credentials included with	application:				
ıta	☐ Résumé					
n Da	☐ All teaching and professional certificates or licenses					
Position Data	☐ All transcripts showing degrees					
Pos	Date you can begin work					
	Have you been employed	by	ISD in the past? \square Yes \square No			
	If you answered yes, provide dates of employment					
	Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license granted	Year graduated (College only)		
aining						
Education/Trai						
Educa						



Certification/Licensure	Certificates or Licenses Currently Held: None Valid Texas Valid Other State Texas One-Year (out-of-state/country): Expiration date: Other: Category/Level(s) of Certification: Areas of Specialization/Supplemental Certificates/Endorsements (as listed on certification):				
	List teaching experience beginning with most recent years.				
Experience	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		
eaching	Name and location of school				
Те	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		



BRAZOS ISD APPLICATION FOR PROFESSIONAL PERSONNEL

	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		
Other Work Experience	Position/title held			Position/titl	e held		
	Dates employed			Dates emplo	oyed		
	Supervisor's name and phone			Supervisor's and phone	name		
	Reason for leaving			Reason for I	eaving		
	Employer name and location			Employer na location	ame and		
	Position/title held			Position/title held			
	Dates employed			Dates emplo	oyed		
	Supervisor's name and phone			Supervisor's and phone	name		
	Reason for leaving			Reason for leaving			
	Please list references the district can contact regarding your work history.						
	Full name of reference			Mailing Posit		on/title	Area code/ phone
References							
Refer							



	Do you have a relative who serves on the Board of Education or is an employee ofISD?				
_	☐ Yes ☐ No If yes, please provide the relative's name and relationship:				
General Information	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)? Yes No If yes, please state where, when, and the nature of the offense				
	(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.)				
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 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, , sexual orientation or gender identity), 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.

In accordance with Title IX, the district does not discriminate on the basis of sex and is required not to discriminate on the basis of sex in its educational programs or activities. The requirement not to discriminate extends to employment. Inquiries about the application of Title IX may be referred to the district's Title IX coordinator, to the Assistant Secretary for Civil Rights of the Department of Education, or both.

Inquiries about the application of Title IX to employment should be referred to Title IX Coordinator, (Teresa Ressler, Special Programs Coordinator, 227 Educator Lane, Wallis, TX, 77485, tressler@brazosisd.net, 979-478-6551).



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

I,, acknown	owledge that a Computerized Criminal				
APPLICANT or EMPLOYEE NAME (Please print)					
History (CCH) check may be performed by accessing the	he Texas Department of Public Safety Secure				
Website and may be based on name and DOB identifie	ers. (This is not a consent form, but serves as				
information for the applicant.) Authority for this agency	to access an individual's criminal history data				
may be found in Texas Government Code 411; Subchapter F.					
Name-based information is not an exact search and only fingerprint record searches represent					
true identification to criminal history record information (CHRI), therefore the organization conducting					
the criminal history check is not allowed to discuss with	h me any CHRI obtained using the name and				
DOB method. The agency may request that I also have a fingerprint search performed to clear any					
misidentification based on the result of the name and DOE	3 search.				
In order to complete the fingerprint process I mu	ust make an appointment with the Fingerprint				
Applicant Services of Texas (FAST) as instructe	ed online at www.txdps.state.tx.us /Crime				
Records/Review of Personal Criminal History or by calling	ng the DPS Program Vendor at 1-888-467-2080,				
submit a full and complete set of fingerprints, request a co	opy be sent to the agency listed below, and pay				
a fee of \$25.00 to the fingerprinting services company.					
Once this process is completed the information on my fingerprint criminal history record may be					
discussed with me.					
(This copy must remain on file by this agence	ev. Required for future DPS Audits)				
(1 min cold)	,, , , , , , , , , , , , , , , , , , ,				
Signature of Applicant or Employee (optional)	<u> </u>				
	Please: Check and Initial each Applicable Space				
Date	CCH Report Printed:				
Brazos ISD	l ·				
Agency Name (Please print)	YES NO initial				
Scott Rogers	Purpose of CCH:				
Agency Representative Name (Please print)	Empl Vol/Contractor initial				
5 Son Row	Date Printed: initial				
Signature of Agency Representative	Destroyed Date: initial				
8/23/2021	Retain in your files				

Date

BRAZOS INDEPENDENT SCHOOL DISTRICT CRIMINAL HISTORY RECORD INFORMATION REQUEST

CONFIDENTIAL*

The Brazos 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.

Last Name	First Name	Middle Initial
Other names on records:		
Social Security Number	Date of Birth (mm	/dd/yyyy)
Driver's License State	Number	
Mailing Address:		
Street	City	StateZip
Physical Address:		
Street	City	StateZip
Sex: Male Female Race: Hispanic/Latino	BlackWhiteAsia	an Other
	n I am providing about age, sex, and ement but will be used solely for the p	_
SIGNATURE	DAT	TE

^{*}This form will be removed from the application and filed separately in the HR office.

Pre-Employment Affidavit for Applicant (No Notarization) *For purposes of this affidavit:*



Adjudication and **conviction** refer to a conviction, plea of guilty or no contest (nolo contendre), probation, suspension, or deferred adjudication.

Charge refers to a formal criminal charge as documented by a primary charging instrument (a complaint, information, or indictment) under the Texas Code of Criminal Procedure.

Inappropriate relationship refers to the crime of improper relationship between educator and student in Texas Penal Code section 21.12, and any other inappropriate relationship as determined by the State Board for Educator Certification.

I declare the following:

Name (First, Middle, Last)

(Signature of Declarant)

Executed in

Address (Street, City, State, Zip Code)

County

I understand that the date of birth I am providing will not be used to determine eligibility for employment but

______County, State of_____, on the_____day of___

State

Date of Birth

Month

Year

County

Date

*This form will be processed separately and not shared with the hiring manager.

Approved by the Texas Commissioner of Education, May 2020.

will be used solely for the purpose of this unsworn declaration.*