



**JUNCTION INDEPENDENT SCHOOL DISTRICT
APPLICATION FOR EMPLOYMENT**



Date of application _____		Position Applying For _____		
Personal Data	Name _____ <small style="display: inline-block; width: 20%; text-align: center;">Last</small> <small style="display: inline-block; width: 40%; text-align: center;">First</small> <small style="display: inline-block; width: 20%; text-align: center;">Middle initial</small>			
	Mailing address _____ <small style="display: inline-block; width: 25%; text-align: center;">Street/Box</small> <small style="display: inline-block; width: 20%; text-align: center;">City</small> <small style="display: inline-block; width: 20%; text-align: center;">State</small> <small style="display: inline-block; width: 15%; text-align: center;">ZIP Code</small>			
	E-mail address _____			
	Home phone _____ Cell phone _____ Other phone _____			
	Other name that may appear on records _____ <small>(Used for certification, reference, and criminal history record checks)</small>			
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 JUNCTION 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 <small>(College only)</small>



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



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Other Work Experience	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 name and location	
	Position/title held		Position/title held	
	Dates employed		Dates employed	
	Supervisor's name and phone		Supervisor's name and phone	
	Reason for leaving		Reason for leaving	
	Employer name and location		Employer name and location	
	Position/title held		Position/title held	
	Dates employed		Dates employed	
	Supervisor's name and phone		Supervisor's name and phone	
Reason for leaving		Reason for leaving		
References	Please list references the district can contact regarding your work history.			
	Full name of reference	School district/ firm name	Mailing address	Position/title
				Area code/ phone



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General Information

Do you have a relative who serves on the Board of Education or is an employee of JUNCTION ISD? Yes No

If yes, please provide the relative's name and relationship: _____

Have you ever been convicted of, pled guilty or no contest (nolo contendere) 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 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 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, Superintendent of Schools – 325-446-3510.

**An Equal Opportunity Employer*



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CRIMINAL HISTORY RECORD INFORMATION
ADDENDUM
CONFIDENTIAL

The information requested below is necessary to obtain criminal history record information.

Please Print

Name _____
(First, Middle, Last)

Mailing Address: _____
Street City State Zip

Social Security Number _____ Date of Birth _____

Drivers License # _____ DL State _____

Email Address: _____

I understand that the above information that I am providing 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



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This letter provides notice of reasonable assurance of continued employment with the district when each school term resumes after a scheduled school break. By virtue of this notice, please understand that you may not be eligible for unemployment insurance benefits drawn on school district wages during any scheduled school breaks including, but not limited to, the summer, winter, and spring breaks. This assurance is contingent upon continued school operations and will not apply in the event of any disruption that is beyond the control of the district (e.g., lack of school funding, natural disasters, court orders, public insurrections, war, etc.).

This is not an employment contract. Your continued employment is on an at-will basis. Employers may terminate at-will employees at any time for any reason or for no reason, except for legally impermissible reasons. At-will employees are free to resign at any time for any reason or for no reason.

Your services on behalf of the children of the district are appreciated, and we hope that you will be able to continue your association with the district.

Please complete the following information and return the original to the Superintendent's secretary.

Name (Print)

Address (City, State ZIP Code)

Telephone

Signature

Date



**JUNCTION INDEPENDENT SCHOOL DISTRICT
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**Junction Independent School District
Direct Deposit Authorization Form**

Date: _____

Employee's Name: _____

Name of Bank/Credit Union: _____

Address: _____

Checking

Savings

Routing Number: _____

Account Number: _____

I hereby authorize Junction ISD to initiate direct deposit to the account specified below and authorize the bank/credit union named below to credit the entries to the account specified.

ATTACH CANCELLED CHECK

Employee's Signature

Date

**PLEASE FILL OUT A W4 FORM WHEN HIRED -
HERE IS THE LINK: <https://www.irs.gov/pub/irs-pdf/fw4.pdf>
PLEASE BRING OR ATTACH A COPY OF YOUR DRIVERS LICENSE AND SOCIAL SECURITY CARD**