



**West Independent School District**

801 N. Reagan St. West, Texas 76691  
 (254) 826-7500 - fax (254) 826-7503

**Employment Application for Professional Personnel**

*An Equal Opportunity Employer\**

	Date of Application _____			
<b>Personal Data</b>	Name _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Last</span> <span>First</span> <span>Middle Initial</span> </div>			
	Current Address _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Street/Box</span> <span>City</span> <span>State</span> <span>Zip</span> </div>			
	Other Address Where _____			
	You May Be Reached _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Street/Box</span> <span>City</span> <span>State</span> <span>Zip</span> </div>			
	Home Phone _____ Cell Phone _____ Other Phone _____			
Other name that may appear on records _____ <small>(Used for certification, reference, and criminal history record checks.)</small>				
<b>Position Data</b>	List the position(s) you are applying for: _____			
	Credentials included with application (These should only be copies – not originals):			
	<input type="checkbox"/> Résumé <input type="checkbox"/> All teaching and professional certificates or licenses (front & back, if appropriate) <input type="checkbox"/> All transcripts showing degrees			
	Date you can begin work _____			
Have you been employed by West ISD in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If you answered yes, provide dates of employment _____				
<b>Education / Training</b>	Name and location of schools attended	Course of study major/minor fields	Diploma, degree certificate, or license held	Year Graduated

<b>Certification/Licensure</b>	<p>Certification or License Currently Held:</p> <p>Ⓒ None</p> <p>Ⓒ Valid Texas</p> <p>Ⓒ Valid Other State _____</p> <p>Ⓒ Texas One-Year (out-of-state/country): Expiration date _____</p> <p>Ⓒ 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> <p>_____</p>
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<b>Teaching Experience</b>	List teaching experience beginning with most recent years.				
	Name and location of school	Type of assignment	Dates taught	Reason for leaving	Principal's Name and phone

<b>Other Work Experience</b>	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	Position/title	Dates Employed	Reason for leaving	Supervisor's name & phone



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 authorized by Texas Education Code to review criminal history of applicants.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
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 a period of time not to exceed one year. If you have not received a response during this time period, you may reapply or reactivate your application.

**Personal Comments**

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*\*Applicants for all positions are considered without regard to race, color, national origin, religion sex, marital status, veteran or military status, disability, or any other legally protected status.*

The District Title IX Coordinator is  
Jan Hungate, Assistant Superintendent,  
801 N. Reagan Street,  
West, Texas 76691  
254-826-7500

**Mail Application To:**

Personnel Department  
West Independent School District  
801 N. Reagan St.  
West, Texas 76691

**CRIMINAL HISTORY RECORD INFORMATION REQUEST**

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**Confidential\***

The West 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 Middle*

Social Security Number \_\_\_\_\_ Date of birth \_\_\_\_\_

Driver's License \_\_\_\_\_  
*State and Number*

Mailing Address \_\_\_\_\_  
*Street City State Zip*

Sex:  Male  Female      Ethnicity:  Black  White/Other

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.