

**GUTHRIE COMMON SCHOOL DISTRICT
301 JAGUAR LANE
PO BOX 70
GUTHRIE, TX 79236**

EMPLOYMENT APPLICATION FOR AUXILIARY PERSONNEL

**We consider applications for all positions without regard to race, color, national origin,
age, religion, sex, marital or veteran status, the presence of medical conditions,
disability, or any other legally protected status.**

An Equal Opportunity Employer

Positions(s) Applied For: _____

Date of Application: _____ Social Security Number: _____

Name _____
(Last) (First) (Middle Initial)

Current Address _____
(Street/Box) (City) (State) (Zip Code)

Telephone Number: _____ Email: _____

Name used on records if different from present name:
(to be used for reference check) _____

Have you ever filed an application with us before: Yes No

If yes, give date _____

Have you ever been employed with us before? Yes No

If yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

On what date would you be available for work? _____

Are you available to work: Full Time Part Time

Have you been convicted of a felony within the last 7 years?
(Conviction will not necessarily disqualify an applicant from employment) Yes No

If yes, please explain:

EDUCATION

	Name and Address of School	Course of Study	Years	Diploma/Degree
High School				
College				
Other (specify)				

Please list work experience beginning with most recent years

Business Name	Assignment	Dates Employed	Reason for Leaving

Describe any specialized training, apprenticeship, skills and extra-curricular activities:

Specialized Skills: Check skills/equipment operated:

- | | |
|---|--|
| <input type="checkbox"/> PC/Laptop | <input type="checkbox"/> MS Word |
| <input type="checkbox"/> Calculator | <input type="checkbox"/> MS Excel |
| <input type="checkbox"/> Copier/Scanner | <input type="checkbox"/> Google Platform |
| <input type="checkbox"/> Fax | <input type="checkbox"/> Other Software: |

Production/Mobile Machinery (list):

STATE ANY ADDITIONAL INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION:

REFERENCES:

1. _____ (Name) _____ (Telephone Number)
 2. _____ (Name) _____ (Telephone Number)
 3. _____ (Name) _____ (Telephone Number)
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Applicants Statement:

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an AT WILL nature, which means that the EMPLOYEE may resign at any time and the EMPLOYER may discharge employee at any time with or without cause. It is further understood that this AT WILL employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rule and regulations of the employer.

Signature of Applicant

Date

YOU MAY BE ASKED TO TAKE A PHYSICAL, PLEASE INDICATE BELOW YOUR APPROVAL OR DISAPPROVAL OF HAVING A PHYSICAL EXAMINATION.

- Yes, I am prepared to take a physical
- No, I do not wish to take a physical

CRIMINAL HISTORY INFORMATION REQUEST

Confidential

The Guthrie Common 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 #: _____ Date of Birth: _____
Month
Day
Year

Driver's License#: _____ State Issued: _____

Mailing Address: _____
Street
City
State
Zip

Have you ever been convicted of, or have you pleaded guilty or no contest to a felony offense involving moral turpitude?
_____ Yes
_____ No

If yes, please explain: (answering yes will not automatically bar you from employment. However, we would appreciate an explanation)

Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Ethnicity Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/>	Race American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/>
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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

FOR OFFICE USE ONLY:			
TEXAS EDUCATION AGENCY	FACT CLEARINGHOUSE		
TEA Upload	Date: _____	Subscribed	Date: _____
Do Not Hire Registry	Date: _____	Unsubscribed	Date: _____
		Subscribed	Date: _____
		Unsubscribed	Date: _____

PLEASE DO NOT REMOVE THIS FROM YOUR APPLICATION
This form will be removed and filed separately in the HR Office