

**APPLICATION FOR PROFESSIONAL EMPLOYMENT  
CALVERT INDEPENDENT SCHOOL DISTRICT  
P.O. BOX 7 CALVERT, TEXAS 77837  
Phone: 979-364-2824 Fax: 979-364-2468**

**We consider applicants for all positions without regard to race, color, national origin, age, religion, sex, marital status, veteran or military status, disability, or any other legally protected status.**

**Personal Data**

Last Name: _____		First Name: _____		MI: _____
Date of Application: _____		Social Security Number: _____		
Current Address: _____		City, State and Zip: _____		
Work Phone: _____		Home Phone: _____		
Other name that may appear on records _____ (Used for certification, reference, and criminal history record checks)				
Person to notify in case of emergency:				
Name: _____				
Address: _____				
Phone: (    ) _____				

**Position Data**

List the position(s) you are applying for _____	
Credentials included with application:	
<input type="checkbox"/>	Resume
<input type="checkbox"/>	All teaching and professional certificates or licenses
<input type="checkbox"/>	All transcripts showing degrees
<input type="checkbox"/>	Excet or TExES scores
Date you can begin work _____	
Have you been employed by Calvert ISD in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you answered yes, provide dates of employment _____	
Total years teaching experience _____	

**Education/Training**

High School: \_\_\_\_\_ Date Graduated: \_\_\_\_\_

**Please List in order from most recent to earliest attended**

College/University: \_\_\_\_\_ Date Graduated: \_\_\_\_\_ Degree: \_\_\_\_\_

Major Field of Study: \_\_\_\_\_ Minor Field of Study: \_\_\_\_\_

College/University: \_\_\_\_\_ Date Graduated: \_\_\_\_\_ Degree: \_\_\_\_\_

Major Field of Study: \_\_\_\_\_ Minor Field of Study: \_\_\_\_\_

College/University: \_\_\_\_\_ Date Graduated: \_\_\_\_\_ Degree: \_\_\_\_\_

Major Field of Study: \_\_\_\_\_ Minor Field of Study: \_\_\_\_\_

**Circle any of the following you are able to direct or coach successfully: Football, Basketball, Drama, Speech, Student Council, Track, UIL Sponsor, Volleyball, Tennis, or:**  
**Other:** \_\_\_\_\_

**New Graduates – Student Teaching Experience**

University: _____	Phone: _____
Address: _____	Subject/Grade Taught: _____
College Supervisor: _____	Phone: _____
Student Teaching Experience: District _____	From: _____ To: _____
District Address: _____	
Campus Cooperating Teacher: _____	Campus: _____
Work Phone: _____	Home Phone: _____

**Teaching Experience**  
(Begin with Most Recent)

School District: \_\_\_\_\_ Campus: \_\_\_\_\_ Phone: \_\_\_\_\_

District Address: \_\_\_\_\_ Subject/Grade Taught: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Other District Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

School District: \_\_\_\_\_ Campus: \_\_\_\_\_ Phone: \_\_\_\_\_

District Address: \_\_\_\_\_ Subject/Grade Taught: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Other District Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

School District: \_\_\_\_\_ Campus: \_\_\_\_\_ Phone: \_\_\_\_\_

District Address: \_\_\_\_\_ Subject/Grade Taught: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Other District Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

School District: \_\_\_\_\_ Campus: \_\_\_\_\_ Phone: \_\_\_\_\_

District Address: \_\_\_\_\_ Subject/Grade Taught: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Other District Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

**Other Work Experience:**

Name of Company: \_\_\_\_\_

Address of Company : \_\_\_\_\_

Position/Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_ Current Phone of Supervisor: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address of Company: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Current Phone of Supervisor: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Name of Company: \_\_\_\_\_

Address of Company: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Name of Company: \_\_\_\_\_

Address of Company: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

**Certification**

<p>Certificate or License Currently Held:</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Valid Texas</p> <p><input type="checkbox"/> Valid Other State _____</p> <p><input type="checkbox"/> Texas Emergency</p> <p><input type="checkbox"/> Texas One-Year: Expires: _____</p> <p><input type="checkbox"/> Texas Temporary Administrative: Expires _____</p>	<p>Submit copies of these documents with this application.</p>
<p>Level(s) of Certification: _____</p>	
<p>Areas of Specialization/Endorsements (as listed on certification):</p> <p>_____</p> <p>_____</p>	

**Professional Data**

<p>Please list relevant professional activities. Omit references to organizations that would reveal race, age, ethnic origin, or religion.</p> <p>Paper/articles published: _____</p> <p>_____</p> <p>Seminars/workshops conducted: _____</p> <p>_____</p> <p>Other related professional activities: _____</p> <p>_____</p>
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**General information**

Do you have a relative who serves on the Calvert ISD Board of Education?

- Yes
- No

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

\_\_\_\_\_

Have you ever been convicted of, plead 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.)

**References**

Please list references the district can contact regarding your work history. Include all managers and supervisors who evaluated or supervised your performance at your last two employers.

Full name of reference: \_\_\_\_\_

School district/firm name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Position/title: \_\_\_\_\_

Phone number: (    ) \_\_\_\_\_

Full name of reference: \_\_\_\_\_

School district/firm name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Position/title: \_\_\_\_\_

Phone number: ( ) \_\_\_\_\_

Full name of reference: \_\_\_\_\_

School district/firm name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Position/title: \_\_\_\_\_

Phone number: ( ) \_\_\_\_\_

Full name of reference: \_\_\_\_\_

School district/firm name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Position/title: \_\_\_\_\_

Phone number: ( ) \_\_\_\_\_

Full name of reference: \_\_\_\_\_

School district/firm name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Position/title: \_\_\_\_\_

Phone number: ( ) \_\_\_\_\_

**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 22.083 to obtain criminal history record information on applicants the district intends to employ.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
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 12 months. If you have not received a response during this time period, you may reapply or reactivate your application.



Calvert Independent School District  
P.O. Box 7, Calvert, Texas 77837  
979-364-2824 \* Fax 364-2468

Date: \_\_\_\_\_

The Calvert Independent School District is required by state law to obtain criminal history record information on applicants being considered for employment with the district (Texas Education Code Section 21.917). The information requested below is necessary to obtain criminal history record information.

Full Name: \_\_\_\_\_  
(Please Print) Last, First Middle

Social Security No. \_\_\_\_\_

Sex: M F Ethnicity: African American  
Caucasian  
Hispanic  
Other \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
(mm/dd/yy)

**I understand 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

(This form will be removed from the application and filed separately in the personnel office.)