



**SAN ISIDRO**  
**INDEPENDENT SCHOOL DISTRICT**  
P.O. Box 10  
SAN ISIDRO, TEXAS 78588  
Telephone (956)481-3110

**Application for Employment for Professional Personnel**

**Personal Data**

Date of Application \_\_\_\_\_ Social Security No. \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Initial

Current Address \_\_\_\_\_  
Street/Box City State Zip Code

Other address where you may be reached \_\_\_\_\_

Work Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

Position for which you are applying \_\_\_\_\_

Name used on records if different from present name \_\_\_\_\_  
(to be used for reference checks)

Credentials included with application

- Resume
- All teaching & professional certificates (front & back, if appropriate)
- All transcripts showing degrees

Date Available \_\_\_\_\_

Former \_\_\_\_\_ ISD Employee: Yes \_\_\_\_\_ No \_\_\_\_\_

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**An Equal Opportunity Employer**

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

**Education/Training**

Schools Attended: List all applicable information.

Name of School And Location	Course of Study Major/Minor Fields	Diploma, Degree or Certificate	Year Graduated (College)

**Certification**

Type of Certificate held now

- None
- Valid Texas
- Valid other state \_\_\_\_\_
- Emergency ( Texas )
- Texas one-year certificate: Expiration date \_\_\_\_\_/\_\_\_\_\_

Areas of specialization

- Administrator
- Superintendent
- Principal
- Midmanagement administrator
- Elementary
- Elementary and kindergarten
- Secondary (junior and senior high)
- All level art
- All level health and PE
- All level music
- Librarian
- Counselor
- Special education (specify): \_\_\_\_\_
- Vocational (specify): \_\_\_\_\_
- Nurse
- Visiting teacher
- Supervisor
- Other (specify): \_\_\_\_\_

**Teacher Experience**

List teaching experience beginning with most recent years.

Name of School And Location	Type of Assignment	Dates Taught	Reason for leaving

**Other Work Experience**

Please provide a complete listing of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary. Please attach resume, if available.

School District/ Firm Name	Position/Title	Dates Employed	Reason for Leaving

**Professional Date**

- Omit references to organizations that would reveal race, age, ethnic origin, or religious persuasion.
- Publications/articles \_\_\_\_\_  
\_\_\_\_\_
- Seminars/workshops conducted \_\_\_\_\_  
\_\_\_\_\_

**General Information**

- Do you have a relative who is a member of the San Isidro ISD Board of Education? Yes [ ] No [ ]  
If yes, please give the name of relative and relationship \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Have you ever been convicted of a felony or 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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Conviction of a felony 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 below references who may be contacted regarding your work history. Please include all managers/supervisors at the last two employing organizations who evaluated or supervised your performance.

Full Name Of Reference	School District Firm Name	Mailing Address	Position Title	Area Code/ 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 pertinent information they may have, personal or otherwise, and release all such parties from liability for any damage that may result from furnishing same to you.

I understand that the district is required by Texas Education Code 21.917 to obtain criminal history record information on applicants selected for employment.

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 ten months. Any applicant wishing to be considered for employment beyond this time period may inquire as to whether or not applications are being accepted at that time.

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

\_\_\_\_\_  
**Date**

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