## Texas 21<sup>st</sup> Century Community Learning Center/ Texas ACE (After School Centers on Education)

### APPLICATION FOR EMPLOYMENT

Coleman County Community Network c/o Coleman I.S.D. P.O. Box 900 Coleman, TX 76834

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

( PLEASE PRINT)					
Position(s) Applied For: _	Project Director Family Engagement		Date of Applic	ation:	
<b></b>					
Last Name	First Name	Middle Name	e	Maiden Na	ame
	Otra at	O'the	Otata	7:- 0	
Address	Street	City	State	Zip C	ode
Telephone Number(s):			Social Securit	y No. (volunta	ry)
Email:					
Best time to contact you is	÷			::	_a.m./p.m.
If yes, District:	byed with a school distrie	ct before?		Yes	No
Do you have a relative wh	o is a member of the Co	leman ISD Board of Trustees	?	Yes	No
If yes, please give the r	name of relative and rela	ationship:			
				Voo	No
May we contact your prese	ent employer?			Yes	No
Date available for work _	///				
		emeanor involving moral turpit ch crimes?		Yes	No
Have you ever been arres	ted in connection with th	e above described crimes? .		Yes	No

# EDUCATION

EDUCATION AND PROFESSIONAL PREPARATION							
Name of Institution	Location	Dates From To		Date of Graduation	Degree or Diploma	GPA	
High School:		High School dates not required					
		High School dates not required					
College(s):							
	Do you hold a valid Texas Teaching Certificate? Yes No f yes, what areas are you certified to teach?						
Specialized Skills:							
Microsoft Office	e Microsoft	Word		_Excel			
Windows 7 Windows 8 Other							
Describe any specialize	ed training, apprentio	ceship, sl	kills and o	extra-curric	ular activitie	S.	
List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:							

## **EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. Employer		Dates Worked From To		Work Performed
Address				
Telephone No				
Telephone No.	Que en ince			
Job Title	Supervisor			
Reason for Leaving				
2. Employer		Dates Worked From To		Work Performed
Address				
Telephone No.				
Job Title	Supervisor			
Reason for Leaving				
3. Employer				
3. Employer		Dates \ From	Worked To	Work Performed
3. Employer Address		Dates \ From	Norked To	Work Performed
Address		Dates \ From	Worked To	Work Performed
		Dates \ From	Worked To	Work Performed
Address	Supervisor	Dates \ From	Worked To	Work Performed
Address Telephone No. Job Title	Supervisor	Dates \ From	Worked To	Work Performed
Address Telephone No.	Supervisor	Dates \ From	Worked To	Work Performed
Address Telephone No. Job Title	Supervisor	Dates V From Dates V From	То	Work Performed
Address Telephone No. Job Title Reason for Leaving	Supervisor	From	To	
Address Telephone No. Job Title Reason for Leaving 4. Employer	Supervisor	From	To	
Address Telephone No. Job Title Reason for Leaving 4. Employer	Supervisor	From	To	
Address Telephone No. Job Title Reason for Leaving 4. Employer Address	Supervisor	From	To	

If you need additional space, please continue on a separate sheet of paper.

### REFERENCES

REFERENCES					
PROFESSIONAL (List four Employers, Supervisors, Professional Business Persons, Professors, etc.)					
Full Name	School District/ Firm Name	Position	Mailing Address	Phone Number	

PERSONAL (List two persons known for several years; these may also be educators)					
Full Name	School District/ Firm Name	Position	Mailing Address	Phone Number	

#### **APPLICANT'S STATEMENT**

I hereby certify that the information herein to the best of my knowledge is true, accurate, and complete. Misrepresentation or fraud in any part of this application or interview(s) may be grounds for dismissal or refusal of employment. In the event of employment, I understand, also, that I am required to abide by all rules and regulations of the employer.

I hereby authorize Coleman I.S.D. to contact previous employees and references listed on this application. I agree that all information obtained by the District shall be confidential and shall not be made available to me. I also authorize C.I.S.D. to obtain any criminal history record information relevant to this application from any pertinent source in accordance with the provisions of the Texas Education Code Section 21.917, and I further authorize any law enforcement agency, including, but not limited to, any police department or the Department of Public Safety and the Texas Department of Corrections to furnish C.I.S.D. any such records. (The District may use information obtained under this section only for the purposes of evaluating applicants for employment.)

I hereby understand and acknowledge that, unless employed in a professional or contract position, 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.

\_DATE: \_\_\_\_\_

RETURN TO: Coleman I.S.D. Attn: Community Learning Center Program P.O. Box 900 Coleman, Texas 76834