

B.I.S.D. APPLICATION FOR SUBSTITUTE TEACHER

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.

An Equal Opportunity Employer

Personal Data	Date of application _____ Name _____ <div style="text-align: center; font-size: small;"> Last First Middle Initial </div> Current Address _____ <div style="text-align: center; font-size: small;"> Street / Box City State ZIP Code </div> Other address where you may be reached _____ Work Phone _____ Home Phone _____ Cell Phone _____ Email Address _____ Other name that may appear on records _____ <div style="text-align: center; font-size: x-small;">(Used for certification, reference, and criminal history record checks)</div>			
Position Data	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 Have you been employed by Brackett ISD in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide dates of employment _____			
Education / Training	Check highest level of education attained: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> High school graduate <input type="checkbox"/> Two or more years of college <input type="checkbox"/> Master's degree </div> <div> <input type="checkbox"/> GED <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Other training or education _____ </div> <div> <input type="checkbox"/> Less than two years of college </div> </div>			
	Name and location of schools attended	Course of study and major / minor	Diploma, degree, certificate, or license held	Year graduated

Certification	Certificate or License Currently Held: _____			
	Level(s) of Certification: _____			
	Areas of Specialization /Endorsement (as listed on certification):			
	_____		_____	
	_____		_____	
	_____		_____	
Teaching Experience	List teaching experience beginning with most recent years.			
	Name and location of school	Type of Assignment	Dates taught	Reason for leaving
Work Experience	Please provide a complete list of all positions you have held in the past 10 years. List the most recent first. Attach additional sheets if necessary. Attach resume if available.			
	School district / firm name	Position / title	Dates employed	Reason for leaving

Assignment Preference	<p>Please list the days you are available to substitute and your assignment preferences.</p> <p>Day(s) of week <input type="checkbox"/> Every day or only the following:</p> <p style="padding-left: 100px;"><input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday</p> <p>Assignment <input type="checkbox"/> Any or only the following:</p> <p style="padding-left: 100px;"><input type="checkbox"/> Elementary / Intermediate <input type="checkbox"/> Junior High <input type="checkbox"/> High School</p> <p style="padding-left: 100px;"><input type="checkbox"/> Special Education <input type="checkbox"/> Alternative Education</p> <p>Are you receiving Texas Teacher Retirement (TRS) benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><small>(the amount of time that an individual receiving TRS benefits may be employed without affecting benefits is governed by TRS rules and laws.)</small></p>																													
General Information	<p>Have you ever been convicted of, pled 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)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please state where, when and the nature of the offense _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><small>(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.)</small></p>																													
References	<p>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.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Full name of reference</th><th style="width: 20%;">School district / firm name</th><th style="width: 25%;">Mailing address</th><th style="width: 20%;">Position / title</th><th style="width: 15%;">Area code, phone #</th></tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					Full name of reference	School district / firm name	Mailing address	Position / title	Area code, phone #																				
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Personal Statement	<p>Please make a statement in your own handwriting concerning your reasons for desiring a position with the Brackett ISD. (Please use additional sheets of paper if necessary.)</p>
Verification	<p>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.</p> <p>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.</p> <p>I understand that the district is authorized by Texas Education Code Statute 22.083 to obtain criminal history record information on applicants the district intends to employ.</p> <hr/> <div style="display: flex; justify-content: space-between;"> Signature Date </div> <p>This application becomes the property of the district. The district reserves the right to accept or reject it.</p>

CRIMINAL HISTORY RECORD REQUEST
Confidential

The Brackett 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: _____
*Number**State Issued by*

Mailing Address: _____
*PO or Street**City**State**Zip Code*

Sex: ☐ Male ☐ Female Ethnicity: ☐ Black ☐ White ☐ Hispanic/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 information.

Signature

Date

RETURN TO: Brackett I.S.D.
 Attn: Superintendent
 P.O. Box 586
 Brackettville, TX 78832

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

Personal Recommendation for Substitute

Complete the top portion of this form, sign it, and give to the person of your choice for a personal recommendation. They can return it to you or mail directly to BISD.

RETURN TO: SUPERINTENDENT'S OFFICE, BRACKETT ISD, PO BOX 586, BRACKETTVILLE, TX 78832

Name of Applicant

Other name, if any, under which I attended school or worked.

Present _____
Address _____ Street and number _____ City _____ State _____ Zip Code _____

Permanent _____
Address _____ Street and number _____ City _____ State _____ Zip Code _____

I have submitted an application to substitute teach with the BRACKETT ISD.

Your personal recommendation will be considered in determining my employment. I appreciate your taking the time to fill this out and returning as soon as possible. Thank You.

Applicant's Signature

Areas of Inquiry

1. Dates of employment _____
2. How long have you known applicant? _____
3. What was your relationship to applicant? _____
4. Applicant's job title/responsibilities _____

5. Reason for leaving _____
6. Good attendance? _____
7. Willingness to work hard (self-disciplined?) _____
8. Does applicant possess good communication skills? _____
9. Ability to plan, organize, and complete projects on time _____
10. Relationship with coworkers and supervisor _____
11. Is applicant dependable? _____
12. Detail oriented? _____
13. Percent of work that needed correction or had to be redone _____
14. Does applicant have any specific or technical skills? _____

15. Describe the work environment that was best for this applicant _____

16. Would you rehire this person? _____

17. Do you feel the applicant is suited to the position for which they have applied? Why? _____

Additional Comments

Printed Name of Reference

Relationship to Applicant

Phone Number for Reference

Signature

Name of School or Business

Street/P.O.

City, State, Zip

Date

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28. Is applicant dependable? _____

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Areas of Inquiry

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