

**CARTHAGE INDEPENDENT SCHOOL DISTRICT**  
 #1 BULLDOG DRIVE  
 CARTHAGE, TEXAS 75633-2370  
**APPLICATION - PROFESSIONAL EMPLOYMENT**

**I. PERSONAL DATA**

Name \_\_\_\_\_ Date \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

Permanent Address \_\_\_\_\_ Phone# \_\_\_\_\_  
(Mailing Address) (City) (State) (Zip)

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ When will you be available? \_\_\_\_\_

**II. PROFESSIONAL DATA**

Position Applying For \_\_\_\_\_ Highest degree held \_\_\_\_\_ Date conferred \_\_\_\_\_

College conferring degree \_\_\_\_\_ Major(s) \_\_\_\_\_ Minor(s) \_\_\_\_\_

Do you hold a valid Texas Teaching Certificate? \_\_\_\_\_ / \_\_\_\_\_ Other State? \_\_\_\_\_  
Yes No (Give Name of State)

Type of Certificate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ If temporary: \_\_\_\_\_ Certificate \_\_\_\_\_  
Professional Provisional All-Level Standard Date of Expiration Endorsements

Test Date: \_\_\_\_\_ Passed \_\_\_\_\_ / \_\_\_\_\_ Test Date: \_\_\_\_\_ Passed \_\_\_\_\_ / \_\_\_\_\_  
EXCET Yes No TXxES Yes No

Elementary Applicant: (a) \_\_\_\_\_ (b) College Hours of Preparation in:  
(Grade Preference)

(1) Art \_\_\_\_\_ (2) Math \_\_\_\_\_ (3) PE \_\_\_\_\_ (4) Science \_\_\_\_\_ (5) Social Studies \_\_\_\_\_ (6) Reading \_\_\_\_\_ (7) English \_\_\_\_\_

Secondary Applicant: (a) Name subjects you are certified to teach:

(1) \_\_\_\_\_ Sem Hrs. \_\_\_\_\_ (2) \_\_\_\_\_ Sem Hrs. \_\_\_\_\_ (3) \_\_\_\_\_ Sem Hrs. \_\_\_\_\_

**EDUCATIONAL & PROFESSIONAL PREPARATION:**

NAME OF SCHOOL OR INSTITUTION	COURSE	DIPLOMA OR DEGREE	YEAR OF GRAD.	DATES FROM - TO	TOTAL TIME SPENT YEARS	SEM HRS CREDIT
COLLEGE						
UNIVERSITY						
GRADUATE WORK						
SPECIAL						

*Equal Opportunity Employer*  
 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.  
 CISD Title IX Coordinator is J. Glenn Hambrick, Superintendent, #1 Bulldog Drive, Carthage, TX 75633 (903)693-3806

### **III. TO THE APPLICANT:**

In the space provided below and in your own handwriting, please give a statement of your attitude toward teaching, your concepts of a teacher's responsibilities and rights, your attitude toward the school and the community, and your attitude toward youth. In brief, this may well bear the title:

*"MY PHILOSOPHY OF EDUCATION."*

### **REQUIREMENTS FOR FINAL APPOINTMENT:**

Requirements include: service record (if applicable), official transcripts of college work (bearing the college seal), teaching certificate and two (2) professional references (preferably past employers).

No appointment to a teaching position is final until all required materials and records are on file in the Superintendent's Office of Carthage Independent School District.

### **PLEASE ATTACH A COPY OF COLLEGE TRANSCRIPTS TO THIS APPLICATION**

Return completed application to:  
Carthage Independent School District  
#1 Bulldog Drive  
Carthage, TX 75633-2370



# DPS Computerized Criminal History (CCH) Verification

## (AGENCY COPY)

I, \_\_\_\_\_, have been notified that a Computerized Criminal History (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB identifiers I supply.

APPLICANT or EMPLOYEE NAME (Please print)

Because the name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using the name and DOB method. Therefore, the agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (Automated Fingerprint Identification System). I have been made aware that in order to complete this process I must make an appointment with L1 Enrollment Services, submit a full and complete set of my fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$24.95 to the fingerprinting services company, L1 Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

**(This copy must remain on file by your agency. Required for future DPS Audits)**

\_\_\_\_\_  
Signature of Applicant or Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agency Name (Please print)

\_\_\_\_\_  
Agency Representative Name (Please print)

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

<b>Please:</b>	
<b>Check and Initial each Applicable Space</b>	
CCH Report Printed:	
YES <input type="checkbox"/>	NO <input type="checkbox"/> _____ initial
Purpose of CCH: _____	
Hire <input type="checkbox"/>	Not Hired <input type="checkbox"/> _____ initial
Date Printed: _____	_____ initial
Destroyed Date: _____	_____ initial
<b>Retain in your files</b>	

**REFERENCES:** List three references who are qualified to evaluate you for the position sought. Do not send general letters of reference with this application. Character references and college or university teachers should be included in this list.

NAME	ADDRESS	OCCUPATION	ASSOCIATION WITH APPLICANT	PHONE NO. (Required)
1.				
2.				
3.				

Give full and accurate data regarding your teaching experience (accredited schools only).

NAME OF SCHOOL OR INSTITUTION AND LOCATIONS	GRADES OR HS SUBJECT TAUGHT OR POSITION HELD	DATES FROM - TO	NO. OF YEARS	NAME AND ADDRESS PRINCIPAL OR SUPERINTENDENT
1.				
2.				
3.				

Other - than - Teaching Experience (military, business, or other work experience. Explain fully; give dates.)

BUSINESS/ ORGANIZATION	IMMEDIATE SUPERVISOR	DATES FROM - TO	ADDRESS AND PHONE NUMBER
1.			
2.			
3.			