

REFUGIO INDEPENDENT SCHOOL DISTRICT

Application for Professional Employment

212 W. Vance  
Refugio, Texas

(361) 526-2325  
(361) 526-2326 Fax



This Application will be kept on file for twelve months from the date of application.

Date of Application \_\_\_\_\_

For a position as \_\_\_\_\_

Preference (grade or subject) \_\_\_\_\_

\_\_\_\_\_ Social Security Number

Name \_\_\_\_\_  
Last First Middle Maiden

Present Address \_\_\_\_\_  
Street City State & Zip Telephone

Permanent Address \_\_\_\_\_  
Street City State & Zip Telephone

Degree \_\_\_\_\_ College or University \_\_\_\_\_ Date \_\_\_\_\_ Teaching Fields 1 \_\_\_\_\_  
2 \_\_\_\_\_

Degree \_\_\_\_\_ College or University \_\_\_\_\_ Date \_\_\_\_\_ Teaching Fields 1 \_\_\_\_\_  
2 \_\_\_\_\_

Certification: Prov. \_\_\_\_\_ Prof. \_\_\_\_\_ State Elementary \_\_\_\_\_ Secondary \_\_\_\_\_  
Standard \_\_\_\_\_ Mid Management \_\_\_\_\_ Other \_\_\_\_\_

Have you ever pled guilty or nolo contendere (no contest) to, or been convicted of a felony or a misdemeanor involving moral turpitude, regardless of the disposition (i.e., an actual sentence, suspended sentence, deferred adjudication, probation, etc.)?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain on a separate sheet

(For Office Use only)

Interview date \_\_\_\_\_

Interviewed by \_\_\_\_\_

## TRAINING AND EXPERIENCE

Teaching Experience – Note: Do not include student teaching and substitute teaching  
(List all teaching experience in descending chronological order starting with the current position.)

Continued on page 3

YEAR	SCHOOL DISTRICT	PRINCIPAL OR SUPERVISOR	SALARY	MONTHS EMPLOYED	NAME OF SCHOOL

**EDUCATION:**

Name of School or Institution	Course		Degree or Diploma	Date
	Major	Minor		
College				
Graduate Work				
Special				

List courses in which you have 18 hours or more.

English..... Chemistry.....

Mathematics..... Natural Science.....

Physics..... Commercial Subjects.....

Home Economics..... Foreign Language.....

Vocational Education..... History.....

Music..... Government.....

Art..... Physical Education.....

Biology.....

What was your Major? \_\_\_\_\_ Chief Minor? \_\_\_\_\_

(Send copy of transcripts obtained from your colleges)

**PERSONAL:**

1. Are you related, in any way, to any member currently serving on the RISD school board? \_\_\_\_\_
  
2. Are you currently under contract in another district? \_\_\_\_\_

If yes, when does contract expire? \_\_\_\_\_ District \_\_\_\_\_

TEACHING ASSIGNMENT	EXTRA-CURRICULAR ASSIGNMENT	REASON FOR LEAVING THIS POSITION

REFERENCES:

Give at least five references, including Superintendents, Principals, Cooperating Teachers and Supervisors under whom you have taught, and who would have first-hand knowledge of your character, scholarship, and teaching ability.

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1. Name \_\_\_\_\_  
Street number City State Zip  
 Official Position \_\_\_\_\_ Phone \_\_\_\_\_

2. Name \_\_\_\_\_  
Street number City State Zip  
 Official Position \_\_\_\_\_ Phone \_\_\_\_\_

3. Name \_\_\_\_\_  
Street number City State Zip  
 Official Position \_\_\_\_\_ Phone \_\_\_\_\_

4. Name \_\_\_\_\_  
Street number City State Zip  
 Official Position \_\_\_\_\_ Phone \_\_\_\_\_

5. Name \_\_\_\_\_  
Street number City State Zip  
 Official Position \_\_\_\_\_ Phone \_\_\_\_\_

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PERSONAL:

3. Have you ever held a teacher certificate in any state, which was cancelled, revoked, or suspended:

\_\_\_\_\_ Yes \_\_\_\_\_ No

4. Have you ever been dismissed, asked to resign, or refused re-employment as a teacher?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If your answer is yes, please provide details on a separate sheet of paper.

5. Underscore any of the following which you are able to direct or coach: Debate, School plays, Orchestra, Clubs, Football, Basketball, Baseball, Track, Golf, Tennis, Volleyball, U.I.L. Academic competitions, Playground activities.

6. When could you begin work here? \_\_\_\_\_

7. Present salary \_\_\_\_\_ Least Salary, per month, you would accept.

**INSTRUCTIONS:**

This application will be processed and placed on file for consideration when vacancies occur or are anticipated. When references have been returned, an interview may be requested. (This application will remain on file for ONE YEAR ONLY. It must be renewed, in writing, if further consideration is desired.)

IF EMPLOYED BY THIS DISTRICT, you will be required to provide the Office of the Superintendent with an official college transcript, a teaching certificate, teaching service records, oath of office, X-ray or tuberculosis test, physical examination and a recent photograph.

Have you requested that your Placement file be sent to the RISD? \_\_\_\_\_ (Recent graduates only)

ALL APPLICATIONS MUST BE TYPED OR PRINTED IN INK.

ALL APPLICATIONS MUST BE ACCOMPANIED BY A COPY OF THE APPLICANT'S COLLEGE TRANSCRIPT.

Out-of-state applicants must submit evidence of being entitled to a certificate in Texas in order to secure consideration.

**PERSONAL STATEMENTS**

Please include in longhand on an 8 1/2" X 11" paper your answers to any two of the questions under your area of employment. If you wish you may give us additional information (resume) which might help us to be better acquainted with your personal and professional qualifications.

**ELEMENTARY APPLICANT:**

1. Identify and briefly describe any specific program you have worked with in teaching reading and state your philosophy to each approach as to its strengths and weaknesses.
2. Briefly state your philosophy on phonics and other skill-building activities in developing a reading program for children.
3. Briefly state your thoughts concerning what instructional skills a competent teacher should demonstrate.
4. List what you feel are your strongest assets relative to the position for which you are making application.

**SECONDARY APPLICANT:**

1. What basic skills, attitudes and knowledge do you feel students should achieve from your classes?
2. List the major objectives you would hope to accomplish in our teaching field.
3. Briefly state your thoughts concerning what instructional skills a competent teacher in your teaching field should demonstrate.
4. List what you feel are your strongest assets relative to the position for which you are making application.

The detailed information sought here will be carefully evaluated in considering a candidate. The accuracy and completeness of the form is absolutely essential.

"I hereby affirm that the information given by me in this application is true and complete to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission will be sufficient cause for cancellation of the application, or discharge, if I have been employed.

I have applied for employment with the Refugio Independent School District. I hereby give the District permission to make inquiries of references and former employers concerning my performance in the past and general character. The permission form enclosed may be attached to requests for information, and I hereby authorize the party receiving this form to give full and complete information as may be requested by the Refugio Independent School District. I further agree that the information requested may become a part of my personnel file if I am employed by the District.

\_\_\_\_\_  
Applicant's Signature

*Refugio I.S.D. is an equal opportunity employer. Applicants for all positions are considered without regard to race, color, sex (including pregnancy), national origin, religion, age, disability, genetic information, veteran or military status, or any other legally protected status. Additionally, the district does not discriminate against an applicant who acts to oppose such discrimination or participates in the investigation of a complaint related to a discriminating employment practice.*

The district Title IX Coordinator is Melissa Gonzales, Superintendent, 212 West Vance Street, Refugio, TX 78377, (361)526-2325.

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Applicant’s Signature

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Applicant’s Signature

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# DPS Computerized Criminal History (CCH) Verification

## (AGENCY COPY)

I, \_\_\_\_\_, acknowledge that a Computerized Criminal

APPLICANT or EMPLOYEE NAME (Please print)

History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. (This is not a consent form, but serves as information for the applicant.) Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411; Subchapter F.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is not allowed to discuss with me any CHRI obtained using the name and DOB method. The agency may request that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

In order to complete the fingerprint process I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online at [www.txdps.state.tx.us /Crime Records/Review of Personal Criminal History](http://www.txdps.state.tx.us/CrimeRecords/ReviewofPersonalCriminalHistory) or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$25.00 to the fingerprinting services company.

Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

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

\_\_\_\_\_  
Signature of Applicant or Employee (optional)

\_\_\_\_\_  
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 _____ NO _____	_____ initial
Purpose of CCH: _____	
Empl ___ Vol/Contractor ___	_____ initial
Date Printed: _____	_____ initial
Destroyed Date: _____	_____ initial
<b>Retain in your files</b>	

## Criminal History Information Request

**Confidential\***

The Refugio 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 \_\_\_\_\_  
*State and Number*

Mailing Address \_\_\_\_\_  
*Street City State Zip*

Sex:  Male  Female

Ethnicity:  Black  White/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 record information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\* This form will be removed from the application and filed separately in the HR office.

**Pre-Employment Affidavit for Applicant**

For purposes of this affidavit:

*Adjudication and conviction refer to a conviction, plea of guilty or no contest (nolo contendere), probation, suspension, or deferred adjudication.*

*Charge refers to a formal criminal charge as documented by a primary charging instrument (a complaint, information, or indictment) under the Texas Code of Criminal Procedure.*

*Inappropriate relationship refers to the crime of improper relationship between educator and student in Texas Penal Code section 21.12, and any other inappropriate relationship as determined by the State Board for Educator Certification.*

I declare the following:

- I have never been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor.
- I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be **false**. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction: \_\_\_\_\_.
- I have been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The charge, adjudication, or conviction was determined to be **true**. The following are all of the relevant facts pertaining to the charge, adjudication, or conviction: \_\_\_\_\_.

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**Declaration of Applicant**

*The following affidavit is offered to satisfy the requirement of Texas Education Code section 21.009 for a pre-employment affidavit, in accordance with Texas Civil Practices and Remedies Code section 132.001. An applicant who is offered employment will be asked to complete a notarized affidavit attesting to the same.*

I declare under penalty of perjury that the foregoing is true and correct.

Name (First, Middle, Last)	Date of Birth
Address (Street, City, State, Zip Code)	County
Executed in _____ County, State of _____, on the _____ day of _____, _____.	
County	State
Date	Month
	Year

\_\_\_\_\_  
(Signature of Declarant)

*I understand that the date of birth I am providing will not be used to determine eligibility for employment but will be used solely for the purpose of this unsworn declaration.*

\_\_\_\_\_  
\*This form will be processed separately and not shared with the hiring manager.



REFUGIO INDEPENDENT SCHOOL DISTRICT

**Texas Education Agency  
Texas Public School Student/Staff Ethnicity and Race Data Questionnaire**

The United States Department of Education (USDE) requires all state and local education institutions to collect data on ethnicity and race for students and staff. This information is used for state and federal accountability reporting as well as for reporting to the Office of Civil Rights (OCR) and the Equal Employment Opportunity Commission (EEOC).

School district staff and parents or guardians of students enrolling in school are requested to provide this information. If you decline to provide this information, please be aware that the USDE requires school districts to use observer identification as a last resort for collecting the data for federal reporting.

Please answer both parts of the following questions on the student's or staff member's ethnicity and race. *United States Federal Register (71 FR 44866)*

**Part 1. Ethnicity: Is the person Hispanic/Latino? (Choose only one)**

- Hispanic/Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Not Hispanic/Latino**

**Part 2. Race: What is the person's race? (Choose one or more)**

- American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American** - A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

\_\_\_\_\_ Student/Staff Name (please print)

\_\_\_\_\_ (Parent/Guardian)/(Staff) Signature

\_\_\_\_\_

\_\_\_\_\_ Date

Student/Staff Identification Number

This space reserved for Local school observer – upon completion and entering data in student software system, file this form in student's permanent folder.

Ethnicity – choose only one:

- \_\_\_\_\_ Hispanic / Latino
- \_\_\_\_\_ Not Hispanic/Latino

Race – choose one or more:

- \_\_\_\_\_ American Indian or Alaska Native
- \_\_\_\_\_ Asian
- \_\_\_\_\_ Black or African American
- \_\_\_\_\_ Native Hawaiian or Other Pacific Islander
- \_\_\_\_\_ White

Observer signature:

Campus and Date:

REFUGIO INDEPENDENT SCHOOL DISTRICT

Agencia de Educación de Texas

Cuestionario de Información de Datos Raciales y de Etnicidad de Estudiantes/Miembros de Personal de las Escuelas Públicas de Texas

El Departamento de Educación de Estados Unidos (USDE) requiere que todas las instituciones estatales y locales de educación, recopilen datos sobre etnicidad y raza de los estudiantes y de miembros de personal. Esta información es utilizada para los reportes estatales y federales así como para reportar a la Oficina de Derechos Civiles (OCR) y a la Comisión de Igualdad en el Empleo (EEOC).

Al personal del distrito escolar y los padres o representante legal de estudiantes que deseen matricularse en la escuela, se le requiere proporcionar esta información. Si usted rehúsa proporcionarla, es importante que sepa que el USDE requiere que los distritos escolares usen la observación para identificación como último recurso para obtener estos datos utilizados para reportes federales.

Favor de contestar ambas partes de las siguientes preguntas sobre la etnicidad y raza del estudiante así como del miembro de personal. Registro Federal de Estados Unidos (71 FR 44866).

**Parte 1. Etnicidad: ¿Es la persona Hispana/Latina? (Escoja solo una respuesta)**

- Hispano/Latino** – Una persona de origen cubano, mexicano, puertorriqueño, centro o sudamericano o de otra cultura u origen español, sin importar la raza.
- No Hispano/Latino**

**Parte 2. Raza. ¿Cuál es la raza de la persona? (Escoja uno o más de uno)**

- Indio Americano o Nativo de Alaska** – Una persona con orígenes o de personas originarias de Norte y Sudamérica (incluyendo América Central), y que mantiene lazos o apego comunitario con una afiliación de alguna tribu.
- Asiático** – Una persona con orígenes o de personas originarias del Lejano Este, Sureste de Asia o el subcontinente indio, incluyendo, por ejemplo a Cambodia, China, India, Japón, Corea, Malasia, Pakistán, las Islas Filipinas, Tailandia y Vietnam.
- Negro o Africano-Americano** – Una persona con orígenes de cualquier grupo racial negro de África.
- Nativo de Hawai u otras islas del pacífico** – Una persona con orígenes o de personas originarias de Hawai, Guam, Samoa u otras Islas del Pacífico.
- Blanco** – Una persona con orígenes de personas originarias de Europa, el Medio Este o el Norte de África.

Nombre del Estudiante/Miembro de Personal  
(por favor use letra de imprenta)

Firma (Padre/Representante legal)  
/(Miembro de personal)

Número de Identificación del  
Estudiante/Miembro del personal

Fecha

This space reserved for Local school observer – upon completion and entering data in student software system, file this form in student's permanent folder.

Ethnicity – choose only one:  
 Hispanic / Latino  
 Not Hispanic/Latino

Race – choose one or more:  
 American Indian or Alaska Native  
 Asian  
 Black or African American  
 Native Hawaiian or Other Pacific Islander  
 White

Observer signature:

Campus and Date:

# Employee's Withholding Certificate

▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**  
 ▶ **Give Form W-4 to your employer.**  
 ▶ **Your withholding is subject to review by the IRS.**

**2020**

<b>Step 1:</b> <b>Enter Personal Information</b>	(a) First name and middle initial	Last name	(b) Social security number
	Address		▶ <b>Does your name match the name on your social security card?</b> If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to <a href="http://www.ssa.gov">www.ssa.gov</a> .
	City or town, state, and ZIP code		
	(c) <input type="checkbox"/> <b>Single or Married filing separately</b> <input type="checkbox"/> <b>Married filing jointly</b> (or Qualifying widow(er)) <input type="checkbox"/> <b>Head of household</b> (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

**Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, when to use the online estimator, and privacy.

**Step 2: Multiple Jobs or Spouse Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3-4); **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . . . . ▶

**TIP:** To be accurate, submit a 2020 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

**Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

<b>Step 3:</b> <b>Claim Dependents</b>	If your income will be \$200,000 or less (\$400,000 or less if married filing jointly): Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ _____ Multiply the number of other dependents by \$500 . . . . . ▶ \$ _____ Add the amounts above and enter the total here . . . . . <b>3</b> \$ _____		
<b>Step 4 (optional): Other Adjustments</b>	(a) <b>Other income (not from jobs).</b> If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . .	<b>4(a)</b>	\$ _____
	(b) <b>Deductions.</b> If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . .	<b>4(b)</b>	\$ _____
	(c) <b>Extra withholding.</b> Enter any additional tax you want withheld each pay period . . . . .	<b>4(c)</b>	\$ _____

<b>Step 5:</b> <b>Sign Here</b>	Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.		
	▶ _____ ▶ <b>Employee's signature</b> (This form is not valid unless you sign it.)		▶ _____ ▶ <b>Date</b>

<b>Employers Only</b>	Employer's name and address	First date of employment	Employer identification number (EIN)
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