

**EMPLOYMENT APPLICATION FOR AUXILIARY POSITIONS,  
INCLUDING VOLUNTEER SERVICES**

**Doss Consolidated Common School District**

**P. O. Box 50 11431 Ranch Road 648 Doss, TX 78618  
(830) 669-2411 (Telephone) (830) 669-2303 (Fax)**

[www.dosscsd.org](http://www.dosscsd.org)

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

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

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

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

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Other name that may appear on records: \_\_\_\_\_  
(Used only for certification, reference, and criminal history record checks)

**Check the Position(s) You Are Applying For:**

- |   |  |                                     |
|---|--|-------------------------------------|
| <input type="checkbox"/> Instructional Aide | <input type="checkbox"/> Clerical/Office | <input type="checkbox"/> Volunteer  |
| <input type="checkbox"/> Substitute Teacher | <input type="checkbox"/> Bus Driver      | <input type="checkbox"/> Janitorial |

Type of Employment:  Full-time  Part-time  Other \_\_\_\_\_

Date you can begin work: \_\_\_\_\_

Have you been employed by **Doss CCSD** in the past?  Yes  No

If you answered yes, provide dates of employment: \_\_\_\_\_

**Check the highest level of education attained:**

- |   |  |                          |  |   |   |   |   |   |   |    |    |
|---|--|--------------------------|--|---|---|---|---|---|---|----|----|
| <input type="checkbox"/> Not a high school graduate (circle last grade completed) | 1  | 2                        | 3  | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| <input type="checkbox"/> High school graduate                                     | <input type="checkbox"/> GED               | <input type="checkbox"/> | <input type="checkbox"/> Less than two years college |   |   |   |   |   |   |    |    |
| <input type="checkbox"/> Two or more years of college                             | <input type="checkbox"/> bachelor's degree | <input type="checkbox"/> | <input type="checkbox"/> master's degree             |   |   |   |   |   |   |    |    |
| <input type="checkbox"/> Other training or education: _____                       |  |                          |  |   |   |   |   |   |   |    |    |

Do you possess a valid driver's license?  Yes  No Do you have a CDL Class B License  Yes  No

If no, would you consider obtaining a CDL?  Yes  No

Other licenses and/or certificates held \_\_\_\_\_

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Name and location of schools attended	Course of study and major/minor	Diploma, degree, certificate, or license held	Year Graduated

**Provide a 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.**

Employer and Location	Position/Title	Dates Employed	Reason for Leaving

**List specific skills, software proficiency, and any machines or equipment you can operate. Include typing speed and number of years of experience.**

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

Do you have a relative who serves on the Board of Education or is an employee of **Doss CCSD**?

Yes       No If yes, please provide the relative's name and relationship:

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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)?     Yes         No

If yes, please state where, when, and the nature of the offense:

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(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.)

**List references the district can contact regarding your work history.**

Full Name of Reference	School District/Firm Name	Mailing Address	Position/Title	Area Code/Phone Number

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 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.

I understand that the district is required by Texas Education Code to review criminal history of applicants.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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 **12 months**. If you have not received a response during this time period, you may reapply or reactivate your application.

**Equal Employment Opportunity:**

*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.*



## 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 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: 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>		