



## **EMPLOYMENT APPLICATION**

**Instructions: Please complete all of the questions accurately.**

Today's Date: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Driver License no: \_\_\_\_\_ State: \_\_\_\_\_

Best Time to Contact You: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you legally eligible to work in this country? \_\_\_\_Yes \_\_\_\_No

## **T.E.A. CERTIFICATES**

| Names of Teaching<br>Certificates Held | State | Date of Expiration | Subject/Grades<br>Covered by Certificates |
|--|-------|--------------------|---|
|  |       |                    |   |
|  |       |                    |   |
|  |       |                    |   |

**Attach your complete college or university transcripts, including grades and confirmation of degrees.**

Have you taken the TECAT or Excet? \_\_\_\_Yes \_\_\_\_No

If not, when you will be taking the Excet? \_\_\_\_\_

Note: If you do not hold a valid Texas Teaching Certificate, contact the Texas Education Agency, Austin, Texas for certification information. Attach a copy of your certificate.



## **TEACHING EXPERIENCE**

| From<br>Month-Year | To<br>Month-Year | Name, Address & Phone of<br>Schools | Name of<br>Superintendent | Subject or<br>Grade |
|--------------------|------------------|-------------------------------------|---------------------------|---------------------|
|                    |                  |                                     |                           |                     |
|                    |                  |                                     |                           |                     |
|                    |                  |                                     |                           |                     |
|                    |                  |                                     |                           |                     |
|                    |                  |                                     |                           |                     |

## **MISCELLANEOUS INFORMATION**

If selected, do you agree to remain the full school year, sickness alone preventing, unless excused after giving at least 30 days written notice for release?     \_\_\_Yes \_\_\_No

Have you ever failed reselection or been discharged from a teaching/administration position?  
\_\_\_Yes \_\_\_No

When can you begin to work? \_\_\_\_\_

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Have you ever been convicted of or plead guilty or no contest to a crime other than a minor traffic violation?     \_\_\_Yes \_\_\_No



Have you ever been accused of physically, sexually, or emotionally abusing a child or an adult?

☐ Yes ☐ NO

If you answered yes to either of these questions, please explain:

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I hereby certify that the above information is true, accurate, and complete to the best of my knowledge.

Any falsifications of this record will be sufficient cause for disqualification.

"I have applied for employment with St. Philip's Episcopal School. I hereby give St. Philip's Permission to make inquiries of references and former employers concerning my general character and past performance. I authorize the party receiving this form to give full and complete information as may be requested and will not become a part of my personnel file if St. Philip's employs me. I also agree that the information will not be disclosed to me but will be treated as confidential by St. Philip's and I waive any rights to see this information.

This application will remain on file for one (1) year. It must be renewed by the applicant if further consideration is desired. You will receive no further reply unless favorable consideration is given to your application.

Applicants are considered for all positions without regard to race, color, or religion.

St. Philip's Episcopal School is an equal opportunity employer.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

# The Episcopal Diocese of West Texas

## LEVEL 2 AND LEVEL 3 CONSENT DOCUMENT

(Level 2-Paid Clerical or Administrative positions, Level 3-Clergy, Head of School, etc.)

The Episcopal Diocese of West Texas contracts with SPIS a licensed, Private Investigations Agency to verify certain information contained in your application for employment, conditional job offer or provided by you during the interview process. The information requested below is necessary to complete this task. This information is NOT a part of the application for employment and will be used for the sole purpose of verification of information and or statements made by you. Please complete all requested information.

Prospective Employer: Church/School \_\_\_\_\_

Position Applying For: \_\_\_\_\_

Applicant's Legal Name: \_\_\_\_\_  
Last Name First M.I.

Address: \_\_\_\_\_  
Street City State Zip

Date of Birth: \_\_\_\_\_ Social Security # \_\_\_\_\_  
Month/day/year

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

### EDUCATION HISTORY: LIST SCHOOLS ATTENDED BEYOND HIGH SCHOOL

School: \_\_\_\_\_ Dates Attended: \_\_\_\_\_  
Name of College, University, or Trade School from to

Location: \_\_\_\_\_ Degree Earned: \_\_\_\_\_  
City State AA/BA/MA etc. /incomplete

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

School: \_\_\_\_\_ Dates Attended: \_\_\_\_\_  
Name of College, University, or Trade School from to

Location: \_\_\_\_\_ Degree Earned: \_\_\_\_\_  
City State AA/BA/MA etc. /incomplete

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

School: \_\_\_\_\_ Dates Attended: \_\_\_\_\_  
Name of College, University, or Trade School from to

Location: \_\_\_\_\_ Degree Earned: \_\_\_\_\_  
City State AA/BA/MA etc. /incomplete

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Applicant Name: \_\_\_\_\_  
(Please print) Last First MI.

EMPLOYMENT HISTORY: LIST ALL JOBS HELD IN THE LAST 7 YEARS

Most Recent: Can this employer be contacted: \_\_\_\_\_ Yes \_\_\_\_\_ No

Company Name \_\_\_\_\_ Phone: \_\_\_\_\_

Address City State Zip From \_\_\_\_\_ To \_\_\_\_\_  
Employment date (Month & Year)

Job Title Salary Reason for Leaving

2<sup>nd</sup> Company Name \_\_\_\_\_ Phone: \_\_\_\_\_

Address City State Zip From \_\_\_\_\_ To \_\_\_\_\_  
Employment date (Month & Year)

Job Title Salary Reason for Leaving

3<sup>rd</sup> Company Name \_\_\_\_\_ Phone: \_\_\_\_\_

Address City State Zip From \_\_\_\_\_ To \_\_\_\_\_  
Employment date (Month & Year)

Job Title Salary Reason for Leaving

4th Company Name \_\_\_\_\_ Phone: \_\_\_\_\_

Address City State Zip From \_\_\_\_\_ To \_\_\_\_\_  
Employment date (Month & Year)

Job Title Salary Reason for Leaving

**APPLICANT CONSENT**

I understand and agree that SPIS will verify all or part of the information I have given my prospective employer. I understand that this verification will include an inquiry into my credit history, motor vehicle driving record, criminal and civil records, education, prior employment as well as other public record information. I authorize the release of such information as may be necessary to verify the information I have provided. I release and hold harmless from all liability any individual or entity requesting or supplying information with respect to my application for employment.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_