



## CLARENDON CONSOLIDATED INDEPENDENT SCHOOL DISTRICT

416 South Allen  
Clarendon, Texas 79226  
(806) 310-7220 FAX (806) 874-2579

We appreciate your interest in a position with the Clarendon Consolidated Independent School District. The following information is provided to help you in completing the enclosed application. If you are disabled, please advise the District of any need for reasonable accommodation.

### GENERAL INFORMATION

Application forms are sent to all who request them. If there is not an immediate vacancy for which you are qualified, your application will receive consideration as vacancies occur for a period of ONE YEAR. You will need to reactivate your application after twelve months for continued consideration.

The application becomes the property of the Clarendon Consolidated Independent School District, which reserves the right to accept or reject it. Submission of an application authorizes the school district to contact the references listed on the application for employment from any pertinent source and authorizes any law enforcement agency, including, but not limited to, any police department or the Department of Public Safety as well as the Texas Department of Corrections to furnish the school district any such record.

### APPLICATION FORM

1. All information called for on the **application form** should be filled out accurately, and completely and the application must be signed.
2. Enclose a complete **transcript** of all college and university work.
3. Enclose a copy of your virtual teacher's **certificate** from the Texas Education Agency website at <https://tea.texas.gov/texas-educators/certification/certificate-lookup>. If not certified, please enclose a letter from the college certification officer indicating completion and recommendation for certification.
4. Enclose a copy of your teacher **service record**.
5. **References** must be listed as requested. Include full names, titles, telephone numbers with area codes, and correct addresses with zip codes for all references. Unsolicited letters of reference are not encouraged. The Administration Office will solicit confidential inquiries from references.
6. Please notify the Administration Office if you have a change of name, address, or telephone number.

### PERSONAL INTERVIEWS

*It is not possible to interview every applicant interested in a professional position in Clarendon CISD. Interviews will be arranged based on known needs in the various fields. After careful evaluation of the application and the information required as listed above, the applicants best suited to our needs will be selected for personal interviews.*

## **APPOINTMENT TO POSITIONS**

1. Basis of Appointment

The appointment of any person to any position shall depend solely upon qualifications as opposed to the date of filing application, race, color, sex national origin, age, religion, marital status, veteran or military status, disability, or any other legally protected status.

2. Time of Appointment

Appointments to positions are made at any time of the year as the need arises but occur more frequently during the spring and summer. For this reason, there is no established date after which applications are not considered.

3. Degrees and Certificates

According to the laws of the State of Texas, every person paid for instructional work in the public schools must have registered a valid Texas Teacher's Certification with the Superintendent of Schools of that district. An applicant must have at least a bachelor's degree from an accredited college or university. Exceptions to the degree rule may be made for teachers of vocational and trade classes who submit trade and industrial training records and other applicants accepted into programs, which comply with Texas Education Agency requirements. Graduates of a Texas college or university should apply through the Certification Office of the college to secure a Texas Teacher Certificate.

4. Out-of-State Certification

Those who have out-of-state certification need to work directly with the Administration Office to obtain Texas Certification at the time of employment. This process is completed online <https://tea.texas.gov/texas-educators/certification/out-of-state-certification/out-of-state-certified-educators>.

5. Offer of Employment (Contract)

If an offer of employment is given, the applicant is subject to the Superintendent's or his designee's recommendation and approval by the Board of Trustees as required by state law. Professional employees are employed by contract for a term of one year. The first three years of continuous employment in the District are considered to be a probationary period.

6. Career Ladder

If employed, the employee agrees to waive career ladder standing.

## **SALARIES**

A "single schedule" of salaries is in operation in the Clarendon schools, which means that the salary of a professional employee is determined by his/her preparation and experience without regard to whether he/she teaches kindergarten, elementary, or junior high, or high school. The initial salary is determined entirely by the salary schedule. Salary increases are determined by Board approved general pay increases determined annually and other regulations may from time to time be enacted to govern such increases. Financial conditions in the state of Texas and Clarendon CISD will of necessity influence all salary adjustments. Salaries are paid in twelve equal monthly installments throughout the calendar year on or about the 25<sup>th</sup> of the month.

## **RETIREMENT**

All employees must participate in the Texas State Retirement System.



**APPLICATION FOR PROFESSIONAL POSITION  
CLARENDON C.I.S.D.**

416 South Allen, Clarendon Texas 79226  
(806) 310-7220 FAX (806) 874-2579

---

*Applicants for support staff positions in Clarendon C.I.S.D. shall complete this form. Additional information that will give a more accurate estimate of the applicant's training, experience, character, and ability may also be included with the application. Please return a completed application to the above address.*

---

**PLEASE PRINT OR TYPE**

**SECTION I: PERSONAL INFORMATION**

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

Name used on record if different from present name: \_\_\_\_\_  
(used for certification, criminal history record, and reference checks)

Phone number where messages could be left \_\_\_\_\_  
Personal Email (Required for fingerprinting) \_\_\_\_\_

Date Available \_\_\_\_\_

**LEVEL DESIRED (IN ORDER OF PREFERENCE)**

(Enter number in the box – Use “1” for 1<sup>st</sup> choice; “2” for 2<sup>nd</sup> choice and “3” for 3<sup>rd</sup> choice)

\_\_\_\_ ELEMENTARY (PK-5) \_\_\_\_\_  
(List Grade/Subject in order of Preference)

\_\_\_\_ JUNIOR HIGH (6-8) \_\_\_\_\_  
(List Grade/Subject in order of Preference)

\_\_\_\_ HIGH SCHOOL (9-12) \_\_\_\_\_  
(List Grade/Subject in order of Preference)

\_\_\_\_ SPECIAL EDUCATION \_\_\_\_\_      \_\_\_\_ EL \_\_\_\_ JH \_\_\_\_ HS  
(List Area(s) of Specialization)      (List level(s) in Order of Preference)

\_\_\_\_ OTHER \_\_\_\_\_  
(Such as Administrator, Counselor, Librarian, Nurse, Speech Therapist, etc.)

\_\_\_\_ BILINGUAL – List Language(s) (other than English) that you speak, read, and write fluently.

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

**ACTIVITIES** – (Check the following which you are able to coach, direct, or sponsor. Circle “B” for Boys and/or “G” for Girls)

|               |   |          |   |   |                 |       |          |       |
|---------------|---|----------|---|---|-----------------|-------|----------|-------|
| Baseball      | B | Golf     | B | G | Cheerleaders    | _____ | Yearbook | _____ |
| Basketball    | B | Tennis   | B | G | UIL Academic    | _____ | Other    | _____ |
| Cross Country | B | Track    | B | G | Dramatics       | _____ |          |       |
| Football      | B | Softball | B | G | Student Council | _____ |          |       |

---

**SECTION II: CERTIFICATION**

Check one or more of the following:

\_\_\_\_ I am fully certified to teach in the state of Texas and have attached a copy of my credentials.

\_\_\_\_ I am fully certified to teach in another state and have attached a copy of my credentials.

\_\_\_\_ I am currently seeking Texas certification in the following:

Grade Level

Subject

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name, address, and phone number of the school where you completed student teaching:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

**SECTION III: EDUCATION/TRAINING**

**UNIVERSITIES ATTENDED:** Begin with the most recent.

| Name of School<br>And Location | Dates of<br>Attendance | Course of Study | Diploma or<br>Degree of<br>Certification | Year<br>Graduated | Grade Pt.<br>Average |
|--------------------------------|------------------------|-----------------|--|-------------------|----------------------|
|                                |                        |                 |  |                   |                      |
|                                |                        |                 |  |                   |                      |
|                                |                        |                 |  |                   |                      |
|                                |                        |                 |  |                   |                      |
|                                |                        |                 |  |                   |                      |
|                                |                        |                 |  |                   |                      |
|                                |                        |                 |  |                   |                      |

---

**SECTION IV: WORK EXPERIENCE**

How many years of teaching experience, including this year, do you have? \_\_\_\_\_

*(Full-time teaching in college, public school, or in an accredited private school is creditable.)*

May we contact your present employer? \_\_\_\_\_ Yes \_\_\_\_\_ No Current Salary \_\_\_\_\_

Begin with the most recent work experience. **Account for All periods of employment.**

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name of Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Name of Supervisory \_\_\_\_\_

Business Phone Number \_\_\_\_\_

Title of Position Held \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Description of work performed: \_\_\_\_\_

---

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name of Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Name of Supervisory \_\_\_\_\_

Business Phone Number \_\_\_\_\_

Title of Position Held \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Description of work performed: \_\_\_\_\_

---

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name of Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Name of Supervisory \_\_\_\_\_

Business Phone Number \_\_\_\_\_

Title of Position Held \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Description of work performed: \_\_\_\_\_

---

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name of Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Name of Supervisory \_\_\_\_\_

Business Phone Number \_\_\_\_\_

Title of Position Held \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Description of work performed: \_\_\_\_\_

---

---

**SECTION V: GENERAL INFORMATION**

A. Do you have a relative serving on the Clarendon School Board or employed in any capacity?  
 Yes  No (If yes please complete the information below)

| Name of Relative | Position | Relationship |
|------------------|----------|--------------|
|------------------|----------|--------------|

---

---

---

B. Have you ever been convicted of, plead guilty or no contest (nolo contendere) to, or received probation, suspension, or deferred adjudication for a felony or offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, or indecency with a minor)?  Yes  No

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

---

---

---

(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.)

C. Have you ever been involuntarily terminated or asked to resign from the employment of another school district?  Yes  No

If yes, please give the name of the district, the date, and the reason for the termination or request for resignation. \_\_\_\_\_

---

---

D. Please Express, (1) your philosophy of education, and (2) your reasons for selecting the Clarendon Schools for an employment application.

---

---

---

---

---

---

---

---

---

---

---

**SECTION VI: REFERENCES**

Please list references the district can contact regarding your work history. Include all managers and supervisors who evaluated or supervised your performance.

| NAME | PHONE NUMBER<br>(Include Area Code) | POSITION |
|------|-------------------------------------|----------|
|      |                                     |          |
|      |                                     |          |
|      |                                     |          |
|      |                                     |          |
|      |                                     |          |
|      |                                     |          |

---

**SECTION VII: AGREEMENT**

Read Carefully Before Signing:

I certify that all statements made in this application and any attachments are true, accurate, and complete. Any misrepresentation, omission, or falsification of information requested in this application shall forfeit my right to be considered for employment and may be used as just cause for dismissal from the Clarendon Consolidated Independent School District. I further agree to observe all rules, regulations, and policies of the District now in force and effect or as they may change during my employment if I am employed by the District.

I hereby authorize the Clarendon Consolidated Independent School District to make any investigations of my background deemed necessary. I authorize all persons, schools, companies, corporations, credit bureaus, and law enforcement agencies to supply all information concerning my background and to furnish records thereon or to deliver any relevant answers or information, and I hereby release all agencies, firms, or individuals and the CCISD, its agents and employees from any and all liability or responsibility arising from furnishing such information. I understand if I should be employed by CCISD, I must waive my career ladder status earned prior to my employment at CCISD. This application becomes the property of the district. The district reserves the right to accept or reject it. This application shall be considered for twelve months. You will need to reactivate your application after twelve months for continued consideration.

I represent to the Clarendon Consolidated Independent School District that I have read and fully understand the above application and release.

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_  
Signature of Applicant

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--



**CLARENDON CONSOLIDATED INDEPENDENT SCHOOL DISTRICT**

416 South Allen  
Clarendon, Texas 79226  
(806) 310-7220 FAX (806) 874-2579

**REFERENCE RELEASE FORM**

In order for Clarendon CISD to comply with the Open Records and Privacy Act, it is necessary for you to complete the reference release form below which allows the District to request references. Your signed release will be attached to the reference forms sent.

I undersigned, hereby authorize any individual, former employer, firm, or corporation identified as a reference or employer to answer all questions that may be asked, orally or written, and provide all information that may be sought in connection with my work habits, character, or skills. I am aware that the information provided is confidential and will not be available to me. I will not hold the individual or organization liable for the information submitted. A copy of this authorization shall be valid as the original.

---

Printed Name

---

Signature

---

Date



**CLARENDON CONSOLIDATED INDEPENDENT SCHOOL DISTRICT**

**CRIMINAL HISTORY RECORD INFORMATION**

*Read and Sign This Disclosure FIRST*

In connection with my employment or application for employment with Clarendon CISD, I understand that CCISD may procure, or cause to be procured, a consumer report, excluding credit information, but including public record information, on me as part of the process of considering my status or candidacy as an employee.

X \_\_\_\_\_  
Signature of Acknowledgment Date

Texas Education Code 22.083 authorizes a school district to obtain the criminal history record of every applicant for employment with Clarendon Consolidated Independent School District. Therefore, as a part of your application process, you need to complete the following questions:

PLEASE PRINT:

1. Full Name: \_\_\_\_\_  
(Last) (First) (Middle)
2. Any previous / maiden name(s): \_\_\_\_\_
3. Social Security Number: \_\_\_\_\_
4. Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_
5. Sex (circle one): M F Race (circle one): White/Other Black Hispanic
6. Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Month) (Day) (Year)
7. Mailing Address: \_\_\_\_\_  
(Mailing Address) (City) (State) (Zip)

I hereby authorize Clarendon C.I.S.D and/or its agent(s) to obtain a complete criminal history record on me. CCISD is authorized to use any source including, but not limited to, consumer reporting agencies, private investigators, police departments, the Texas Department of Public Safety, and the Texas Department of Corrections. I also authorize any of these agencies to release information regarding my criminal history.

I understand 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. I further understand that information from my criminal history of public record report will not be used in violation of any applicable federal or state equal employment opportunity laws.

X \_\_\_\_\_  
Signature of Applicant Date

THIS FORM WILL BE REMOVED FROM THE APPLICATION AND FILED SEPARATELY IN THE ADMINISTRATION OFFICE.

**DPS Computerized Criminal History (CCH) Verification**  
(AGENCY COPY)

I, \_\_\_\_\_, acknowledge that a Computerized Criminal  
Applicant or Employee Name

History (CCH) verification 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 of 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 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 Fingerprint Applicant Services of Texas (FAST) as instructed online at [www.txdps.state.tx.us](http://www.txdps.state.tx.us) /Crime Records/Review of Personal Criminal History or by calling the DPS Program Vendor at 1-888-647-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay an assessment fee to the fingerprinting services company.

Once this process is complete 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

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

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

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

\_\_\_\_\_  
Date

|  |                |               |
|--|----------------|---------------|
| Please check and Initial each Applicable Space |                |               |
| CCH Report Printed                             |                |               |
| Yes ____                                       | No ____        | _____ Initial |
| Purpose of CCH: _____                          |                |               |
| Hire ____                                      | Not Hires ____ | _____ Initial |
| Date Printed: _____                            |                | _____ Initial |
| Destroyed Date: _____                          |                | _____ Initial |
| <b>Retain in your files</b>                    |                |               |

Pre-Employment Affidavit for Applicant

For purpose 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: \_\_\_\_\_.

---

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.

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 \_\_\_\_\_ date 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.