Mumford ISD Application

					Date:
Name				Social Sec	urity #
	Last	First	Middle		Birth:
ddress				Telepho	one #
	Street	City	State Zip		
earest Relative	Not Living With You:				
Name		Street Address		City/Zip	Telephone #
erson to Notify	in Case of Emergency:				
Name		Street Address		City/Zip	Telephone #
ave you attende	d school or worked und	er a different nar	ne?	Name	
ondition of heal	th for past two years				
•		-		due to illness/injury?	
ny physical def	ects? Any	defects in sight o	or hearing?		
osition Desired					
ours available f	or work				
	employment for 10, 11, st, 2 nd , 3 rd choice)	or 12 months?	10	. 11 12	2
o you have tran	sportation to school?				
ate of Conviction	record of arrest?ononduct work history, pe		er been convicted,	d of a felony?	eptability for
DUCATION	Number of grades atte	nded: Hi	gh School	_ College	
		our last 5 years	of employment.	Give details of any period	of over six months not
ORK EXPERING TOOLS IN THE TOOLS	a complete address of y				

DPS Computerized Criminal History (CCH) Verification

Mumford Independent School District

I,	, acknowledge that a Computerized Criminal
APPLICANT or EMPLOYEE NAME (Please print)	
History (CCH) check will be performed by accessing the	e Texas Department of Public Safety Secure
Website and will be based on name and DOB identifier	s I supply. (This is not a consent form.) 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, therefore the organization conducting the criminal history check is not allowed to discuss with me any criminal history record information obtained using this method. The agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the <u>name and DOB</u> search. Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

In order to complete the 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 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 \$24.95 to the fingerprinting services company.

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

Signature of Applicant or Employee
Date
Mumford Independent School District
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:					
Empl Vol/Contractor initial					
Date Printed: initial					
Destroyed Date:initial					
Retain in your files					