

Mumford ISD Application

Date: _____

Name _____
Last First Middle

Social Security # _____

Address _____
Street City State Zip

Telephone # _____

Nearest Relative Not Living With You:

Name Street Address City/Zip Telephone #

Person to Notify in Case of Emergency:

Name Street Address City/Zip Telephone #

Have you attended school or worked under a different name? _____ Name _____

Condition of health for past two years _____

Have you ever been absent from work for a period of more than one week due to illness/injury? _____

If so, what was the nature of the illness or injury? _____

Any physical defects? _____ Any defects in sight or hearing? _____

Position Desired _____

Hours available for work _____

Are you seeking employment for 10, 11, or 12 months? 10 _____ 11 _____ 12 _____
(Please indicate 1st, 2nd, 3rd choice)

Do you have transportation to school? _____

Do you have any record of arrest? _____ Have you ever been convicted of a felony? _____

Date of Conviction _____

The district will conduct work history, personal reference, or police record inquiries to determine acceptability for employment.

EDUCATION Number of grades attended: High School _____ College _____

WORK EXPERIENCE

Give the name and complete address of your **last 5 years** of employment. Give details of any period of over six months not covered.

Name of Employer	Address	Type of Work	Dates of Employment	Reason for Leaving

DPS Computerized Criminal History (CCH) Verification

Mumford Independent School District

I, _____, acknowledge that a Computerized Criminal History (CCH) 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. (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.

APPLICANT or EMPLOYEE NAME (Please print)

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 name and DOB 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

<p style="text-align: center;">Please: Check and Initial each Applicable Space</p> <p>CCH Report Printed: YES ____ NO ____ ____ initial</p> <p>Purpose of CCH: _____</p> <p>Empl ____ Vol/Contractor ____ ____ initial</p> <p>Date Printed: _____ ____ initial</p> <p>Destroyed Date: _____ ____ initial</p> <p style="text-align: center;">Retain in your files</p>
