

## APPLICATION FOR PARAPROFESSIONAL POSITION

### GRANDVIEW-HOPKINS I.S.D.

11676 FM 293 Groom, TX 79039 (806) 669-3831

*Applicants for paraprofessional positions in the Grandview-Hopkins I.S.D. shall complete this form. Additional information that will give a more accurate estimate of applicant's training, experience, character, and ability may also be included with the application. Completed application should be returned to the above address.*

**Please Print**

### SECTION I: PERSONAL INFORMATION

Position Desired:

Secretarial/Clerical       Special Education Aide       Library Aide  
 Classroom Aide       Technology Assistant       Health Aide  
 Other: \_\_\_\_\_

\_\_\_\_\_

Last Name	First Name	Middle
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Name used on records if different from present name: \_\_\_\_\_  
 (to be used for certification, criminal history record and reference checks)

Present Street Address	City	State	Zip Code	Telephone
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Social Security # \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Phone where a message could be left. \_\_\_\_\_

Does Grandview-Hopkins ISD have permission to contact your employer?  Yes  No

### SECTION II: GENERAL INFORMATION

A. Have you been employed by Grandview-Hopkins ISD in the past?  
 No  Yes (Please provide dates of employment.) \_\_\_\_\_

B. Do you have a relative serving on the Grandview-Hopkins School Board or employed in any capacity?  
 Yes  No (If yes, please complete information below.)

Name of Relative	Position	Relationship

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 --

C. Have you ever been convicted of or plead guilty or no contest (nolo contendere) to a felony or 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; indicate whether the charges were dismissed as a condition of probation, suspension, or deferred adjudication:

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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.)

D. 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.

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**SECTION III: TRAINING AND EDUCATION - (A high school diploma or its equivalent is required.)**

Name of School and Location (Please start with High School)	Dates of Attendance	Number of hours earned (college)	Course of Study Major/Minor Fields	GED, Diploma, Degree or Certification	Year Graduated

Are you presently certified as an Educational Aide by the State of Texas?

Yes, I am certified as an \_\_\_\_\_  No

Please check the following office equipment on which you have work experience.

- Typewriter   
  AS 400   
  Calculator   
  Word Processor  
 Computer   
  Copy Machine   
  Other: \_\_\_\_\_

**SECTION IV: WORK EXPERIENCE** - Furnish information required by the following section, **beginning with the most recent** and working back.

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_ Salary \_\_\_\_\_  
 Name of Employer \_\_\_\_\_ Employer's Address \_\_\_\_\_  
 Name of Immediate Supervisor \_\_\_\_\_ Business Phone \_\_\_\_\_  
 Title of Position Held \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
 Duties in the position: \_\_\_\_\_

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_ Salary \_\_\_\_\_  
 Name of Employer \_\_\_\_\_ Employer's Address \_\_\_\_\_  
 Name of Immediate Supervisor \_\_\_\_\_ Business Phone \_\_\_\_\_  
 Title of Position Held \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
 Duties in the position: \_\_\_\_\_

Date of employment: From \_\_\_\_\_ to \_\_\_\_\_ Salary \_\_\_\_\_  
 Name of Employer \_\_\_\_\_ Employer's Address \_\_\_\_\_  
 Name of Immediate Supervisor \_\_\_\_\_ Business Phone \_\_\_\_\_  
 Title of Position Held \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
 Duties in the position: \_\_\_\_\_

**SECTION V: REFERENCES** - List at least five references, especially supervisors and/or managers under whom you have worked, who have firsthand knowledge of your character, training, and working ability.

NAME	MAILING ADDRESS	PHONE	POSITION

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**SECTION VI: AGREEMENT - - READ CAREFULLY BEFORE SIGNING.**

I certify that all statements made in this application and any attachments are true, accurate, and complete. Any misrepresentation, willful 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 Grandview-Hopkins ISD. 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 Grandview-Hopkins ISD to make any investigations of my background deemed necessary. I further 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 such agencies, firms or individuals and the Grandview-Hopkins ISD, its agents and employees from any and all liability or responsibility arising from furnishing such information. This application becomes the property of the District. The District reserves the right to accept it or reject it. This application shall be considered for twelve months. You need to reactivate your application after twelve months for continued consideration.

I represent to the Grandview-Hopkins ISD that I have read and fully understand the above application and release.

\_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

# GRANDVIEW-HOPKINS ISD

## Criminal History Record Information

### ***Read and Sign This Disclosure FIRST***

In connection with my employment or application for employment with Grandview-Hopkins ISD, I understand that Grandview-Hopkins ISD 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 Grandview-Hopkins 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. Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_  
(If you have an out-of-state license, you will need to complete the criminal history check for out-of-state applicants in addition to this form.)
4. Sex (circle one):    M    F                      Race (circle one): White / Other / Black / Hispanic
5. Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Month) (Day) (Year)
6. Current Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)
7. Previous address(es) and date(s) for last five years:                      Dates (Mo./Yr.)

City:	State:	From:	To:

I hereby authorize Grandview-Hopkins ISD and/or agent(s) to obtain a complete criminal history record on me. Grandview-Hopkins ISD 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, 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 or public record report will not be used in violation of any applicable federal or state equal employment opportunity laws.

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