

# **Milford Independent School District**

## **Application for Employment**

**Milford Independent School District is an equal opportunity employer and does not discriminate against any applicant on the basis of race, color, religion, gender, national origin, age, or handicap.**

**Marilee Byrne, Principal**  
**Don Clingenpeel, Superintendent**

Milford I.S.D.  
P.O. Box 545  
Milford, TX 76670

972-493-2921

Fax 972-493-4600

## Milford Independent School District Application for Employment

Date \_\_\_\_\_

**Position for which you are applying:**

- Teacher                     
  Substitute Teacher                     
  Paraprofessional                     
  Secretarial  
 Other (please indicate)

Certifications you hold:

**Personal Information**

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Permanent Address \_\_\_\_\_

Telephone number(s) \_\_\_\_\_

Date of Birth (Optional) \_\_\_\_\_ Are you 18 or older \_\_\_\_\_

**Education**

	Name	Location	Years Attended	Date of Graduation	Degree
High School					
College					
Post College					
Other					

**Other Skills:**

**Military**

Did you serve in a branch of the U.S. Military or Naval Service?                       Yes    No

Rank \_\_\_\_\_ Present Membership in National Guard or Reserves?                       Yes    No

**Teaching Experience (List in chronological order beginning with most recent)**

School	Number of Years	Grade or Subject Area	Reason for Leaving	Principal/Supervisor

**Other Work Experience:**

**References (at least 5)**

Name	Address	Phone Number	Years Known	Personal/Work

**List any medical problems that would prohibit you from carrying out the duties of your job?**

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**Explain in your own words why you seek employment with the Milford Independent School District.**

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**Have you been re-elected to your present position?**

**Have you been discharged from or not re-employed in a teaching position during the past six (6) years?**

<b>If so,</b>	<b>Where?</b>	<b>When?</b>
	<b>Why?</b>	

I certify that all the information submitted by me on this application is true and complete to the best of my knowledge. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if employed, my employment may be terminated at any time.

I also understand that if employed, I will be bound to the school district rules and guidelines for each employee. If I violate school policy, I may be subject to termination immediately.

**Signature of Candidate** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Consent to Perform Criminal History Background Check

I, \_\_\_\_\_, am an applicant for employment with the Milford Independent School District. I have been advised that as a part of the application process, the district conducts a criminal history background check.

I, \_\_\_\_\_, do hereby consent to the district use of any information provided during the application process in performing the criminal history background check.

I have been informed by the district that I have the right to review and challenge any negative information that would adversely impact the district's decision to offer employment. I have also been advised that the district will give me a reasonable opportunity to clear up any mistaken information reported. However, I do understand that time is of the essence and reasonableness of time is within the sole discretion of the district.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

Please provide names of cities, states, and counties in which you have lived since college graduation:

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