



SOUTH TEXAS
Independent School District

South Texas Academy of Medical Technology
South Texas Business, Education & Technology Academy
South Texas High School for Health Professions
South Texas Preparatory Academy
The Science Academy of South Texas

100 Med High Dr. • Mercedes, TX 78570
Phone: (956) 565-2454 • Fax: (956) 565-4639

INSTRUCTIONS ON FILING AN APPLICATION WITH SOUTH TEXAS I.S.D.

(PLEASE NOTE: IN ORDER FOR YOUR APPLICATION TO BE COMPLETE, PLEASE SUBMIT ALL DOCUMENTS REQUIRED.)

Complete An Application Form:

All information requested on the application form should be filled out accurately and completely. Names, dates, and addresses should be given in full.

Submit→ Write a Cover Letter and a Resume:

A cover letter and a resume should be attached to the application form. This letter should include a statement concerning the reason(s) for seeking employment with South Texas ISD. **If you are applying for a Secretarial/Clerical position, please include a copy of your High School Diploma.**

Submit→ College/University Transcripts:

If applicable

Include with the application an up-to-date copy of your transcript(s). If **hired**, you will be responsible to forward to the Personnel Office one official transcript; out-of-state and vocational require two official transcripts.

Submit→ Indicate References:

References are to be listed on the application form. Professional references are most important and should include only those persons who have supervised the applicant's working experience. Please include phone numbers next to your references listed on the application form. **In addition, please include two (2) letters of recommendations only from persons of previous or current employment.**

Submit→ Bring a Copy of your Teacher Service Record and Paraprofessional Certificate:

If applicable

If you have prior experience from another school district, please attach a copy of your teacher service record and a copy of your paraprofessional certificate. You may obtain a copy from your current and/or previous employer.

Educational Classroom Aide:

Applicants for a Classroom Aide position are required to have completed 48 (forty-eight) college hours.

Your application becomes **ACTIVE** when **all credentials have been received**. Your application will be kept active for one (1) year unless you advise us otherwise. You may have it deactivated or you may have it continued for an additional length of time by writing a brief letter to our office.

You should keep us advised of any change of address, telephone number, or name. **Our office (either by phone or letter) will contact you if and when you are considered for employment. Otherwise, we do not contact you.**

Marla M. Guerra, Ed.D.
Superintendent

Jeff Hembree
Deputy Superintendent

Enrique Moya, Jr.
Assistant Superintendent for Finance

NON-PROFESSIONAL APPLICATION
SOUTH TEXAS INDEPENDENT SCHOOL DISTRICT
100 MED HIGH
MERCEDES, TEXAS 78570
TELEPHONE: 956-565-2454 - FAX: 956-565-4639
TELETYPE DEVICE FOR THE DEAF (TDD): 1-800-735-2989

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

If you are disabled and need assistance completing an application, a staff member is available to assist you. If you have any questions, please call (800) 217-8839.

An Equal Opportunity Employer

PLEASE PRINT OR TYPE

Date

--	--	--

Last Name

First Name

Middle Name

--	--	--	--

Address

City

State

Zip Code

--	--	--

Home Telephone Number

Cellular Number

Social Security Number

E-mail Address

CHECK (√) POSITION(S) APPLYING FOR:

Secretarial/Clerical*

Educational Classroom Aide+

Substitute Teacher*

Ancillary [Bus Driver/Custodian, Cafeteria, Night Custodian, Technology Support Specialist]

Check (√) appropriate box(es): Mercedes Campuses San Benito Edinburg

Have you filed an application with our Schools before? Yes No

If yes, give date _____ and position applied for _____.

This application will remain on file for one year from the date of application only; it must be renewed if further consideration for a position is desired.

* High School Diploma required

+ Forty-eight (48) College Hours are required

EDUCATION

School	Name	Location (City & State)	Dates Attended	Diploma or Degree
Last High School Attended				
*Colleges or Universities				
Business or Trade				
Other				

*If you did not receive a degree, indicate the number of college hours attained: _____

EXPERIENCE

From	To	No. of Years	Name & Address of Employment	Type of Job	Immediate Supervisor	Phone No.

REFERENCES

Full Name of Reference	Position	No.	Street	Address: City	State	Zip	Phone No.

If you have a relative who works for this District, please give the name and address:

MORAL TURPITUDE IS AN ACT OF BASENESS, VILENESS OR DEPRAVITY IN THE PRIVATE AND SOCIAL DUTIES WHICH A PERSON OWES ANOTHER MEMBER OF SOCIETY OR SOCIETY IN GENERAL AND WHICH IS CONTRARY TO THE ACCEPTED RULE OF RIGHT AND DUTY BETWEEN PERSONS, INCLUDING, BUT NOT LIMITED TO, THEFT, ATTEMPTED THEFT, MURDER, RAPE, SWINDLING AND INDECENCY WITH A MINOR.

Have you ever been convicted of a felony or any offense involving moral turpitude? () Yes () No

If yes, please explain _____

Have you ever been convicted of a felony or any offense involving moral turpitude and received probation or deferred adjudication?

() Yes () No If yes, please explain _____

CONVICTION OF A CRIME IS NOT AN AUTOMATIC BAR TO EMPLOYMENT. THE DISTRICT WILL CONSIDER THE NATURE OF THE OFFENSE, THE DATE OF THE OFFENSE, AND THE RELATIONSHIP BETWEEN THE OFFENSE AND THE POSITION FOR WHICH YOU ARE APPLYING.)

Why do you desire to leave your present position, or why did you leave your last position? _____

Have you ever been involuntarily terminated from another school district? () Yes () No
If yes, please give the name of the district, the date and the reasons for the termination. _____

Are you aware of any reasons you would not be able to perform the duties of the position for which you are making application?
() Yes () No If yes, please explain _____

FOR SUBSTITUTE TEACHER OR EDUCATIONAL CLASSROOM AIDE APPLICANTS:

Type of State Certificate held: () Provisional () Professional () None

If certified in another state, indicate which state and type of certificate held:

If you do not have a valid state certificate, what do you lack?

WHERE DID YOU DO YOUR STUDENT TEACHING:

City/State	School	Grade	Subject

ELEMENTARY CANDIDATES
List endorsements to your state certificate below:

SECONDARY CANDIDATES
Certified teaching fields:

_____ Sem. Hrs. _____
_____ Sem. Hrs. _____

Area of Specialization (must have at least 18 semester hours): _____

FOR ANCILLARY APPLICANTS:

Position(s) for Which Applying:

_____ Custodian _____ Carpenter _____ Air Conditioning Technician
_____ Bus Driver _____ Painter _____ Yard Crew
_____ Mechanic _____ Lunchroom _____ Other: _____

FOR SECRETARIAL/CLERICAL APPLICANTS:

<i>Do you operate the following:</i>	Yes/No	No. of Years Experience	Words Per Minute
TYPE WRITER			
PRINTING CALCULATOR			N/A
<i>Do you take:</i>	Yes/No	No. of Years Experience	Words Per Minute
SHORTHAND			

Please list below any additional office machines with which you have had previous experience:

TYPE MACHINE

NO. OF YEARS EXPERIENCE

FOR ALL APPLICANTS

List any additional information you think would be helpful concerning your knowledge, skills and experience related to the job for which you are applying.

Briefly state what you feel you can contribute as an employee for the South Texas Independent School District in the position for which you are applying.

AGREEMENT

I hereby certify that the above information to the best of my knowledge is true, accurate, and complete. Any misrepresentation or willful omissions of facts shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the District which reserves the right to accept or reject it. I further agree to observe all rules, regulations, and policies of the District.

Signature of Applicant

I hereby authorize the District to conduct work history, personal reference or police record inquiries to determine my acceptability for employment.

Signature of Applicant

It is the policy of South Texas I.S.D. to comply with nondiscrimination provisions of all federal and state laws and regulations by assuring that no person shall be excluded from consideration from recruitment, selection, appointment, training...or be denied any benefits or participation in any programs or activities which it operates on the grounds of race, religion, color, national origin, sex, handicap, age (except where appropriate), or veteran status.



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TO: All School Employees and Applicants
FROM: Jeff Hembree, Deputy Superintendent
DATE: 2010–2011 School-Year
SUBJECT: School Board Relation

Below is a list of the current **Board of Education Members** of South Texas Independent School District. Please answer the following:

1. Are you related to a Board Member of South Texas Independent School District either by blood or marriage?
[] Yes [] No

2. If "yes", what is the relationship and to whom?

Signature of Employee or Applicant Date Signed

Ernesto Alvarado	2613 Biltmore Ave.	Edinburg	78539
Douglas E. Buchanan	Route 2, Box 781-E	Raymondville	78580
Cain Caceres	P.O. Box 158	Elsa	78543
Eduardo L. "Larry" Cantu	P.O. Box 306	Los Fresnos	78560
Yolanda Cuellar	231 Lion Lake Drive South	Progreso Lakes	78596
Robert De La Garza	P.O. Box 501	Raymondville	78580
Adrian Garcia	920 Robindale Road	Brownsville	78521
Homero Garcia	1601 S. Airport Dr., Lot #310	Weslaco	78596
Sylvia Garza	617 N. Gate Lane	McAllen	78504
Hector Gonzales	14407 Mesquite County Rd.	Lyford	78569
Eduard Gonzalez	902 Ebony Drive	Edinburg	78539
Octaviano (Tony) Gonzalez	704 Alameda	San Juan	78589
Maria Leal	3703 N. Stewart	Mission	78572
Filomena Leo	P.O. Box 1290	La Joya	78560
Robert J. Lerma	1000 E. Van Buren	Brownsville	78520
Henry LeVrier	1203 Live Oak Circle	Brownsville	78520
Joe L. "Joey" Lopez	1800 E. Van Buren	Brownsville	78520
Irma Perez-Treviño	1320 Paloma Lane	Harlingen	78552
Joe A. Rodriguez	174 Calle Jacaranda	Brownsville	78520
Julio S. Saldaña, Jr.	Route 2, Box 920	Raymondville	78580
Romeo Villarreal	2814 S. Cesar Chavez	Edinburg	78541

Marla M. Guerra, Ed.D.
Superintendent

Jeff Hembree
Deputy Superintendent

Enrique Moya, Jr. Revised: 07/28/09
Assistant Superintendent for Finance



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Criminal History Record Information Form Background Check

As Required by Senate Bill 9:

Senate Bill 9 (SB 9) also known as the "Fingerprinting Bill" was passed by the 80th Legislature and signed into law by Governor Perry on June 15, 2007. SB 9 authorizes and requires greatly expanded criminal history information reviews for most classes of educators and school employees, including national criminal history background checks based on the submission of fingerprints for all certified and currently employed educators, as well as all substitute teachers, whether or not certified, by September 1, 2011, certain charter school employees, and all non-certified school employees hired after January 1, 2008.

The South Texas Independent School District is required by state law to obtain criminal history record information on all applicants for employment with the district (Texas Education Code Section §21.917). The information requested below is necessary to obtain criminal history record information.

(PLEASE PRINT)

Full Name: _____
Last First Middle

Social Security No: _____

Date of Birth: _____

Sex: Male Female

Ethnicity: Hispanic/Latino Not Hispanic/Latino
(Choose only one)

Race: White Black or African American Asian
 American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
(Choose one or more)

I understand the information I am providing about age, sex, ethnicity, and race will not be used to determine eligibility for employment, but will be used solely for the purpose of obtaining criminal history record information.

Signature

Date

Marla M. Guerra, Ed.D.
Superintendent

Jeff Hembree
Deputy Superintendent

Enrique Moya, Jr.
Assistant Superintendent for Finance

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I, _____, have been notified that a computerized criminal history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB information I supply.

APPLICANT or EMPLOYEE NAME (Please print)

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process I must have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, L1Enrollment Services.

Once this process is completed 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

SOUTH TEXAS INDEPENDENT SCHOOL DISTRICT

Agency Name (Please print)

Cindy Guajardo

Agency Representative Name (Please print)

Cindy Guajardo

Signature of Agency Representative

Date

Please: Check and Initial each Applicable Space	
CCH Report Printed:	
YES <input type="checkbox"/> NO <input type="checkbox"/>	_____ initial
Purpose of CCH:	_____
Hire <input type="checkbox"/> Not Hired <input type="checkbox"/>	_____ initial
Date Printed:	_____ initial
Destroyed Date:	_____ initial
Retain in your files	