



SOUTH TEXAS
Independent School District

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

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

South Texas Independent School District is accepting teacher applications for the 2007-2008 school year.

SALARY PLAN/187 days

<u>Degree</u>	<u>Minimum</u>	<u>Maximum</u>
BACHELOR'S	\$37,600.00 -	\$57,530.00*
MASTER'S	\$38,900.00 -	\$58,830.00*

BENEFITS

- Master's in Field Incentive Program
- National Board Teacher Certification Incentive Program
- Teacher Retirement System of Texas (TRS)
- Group Health Insurance for each employee
- Group Dental Plan for each employee
- Term Life Insurance (\$50,000.00) for each employee
- Worker's Compensation Insurance
- Disability Insurance
- 5 days personal business leave (cumulative)
- 5 days local sick leave (cumulative)
- Extended sick leave program for prolonged illness

MORE INFORMATION

Our district is located in the splendid, semi-tropical region of South Texas known as RIO GRANDE VALLEY.

Attractions include the beautiful seashores of SOUTH PADRE ISLAND with sunny, sandy beaches, the sights and flavors of colorful MEXICO, and the newest attraction THE DODGE ARENA. The sunny, warm climate is excellent for hunting, fishing, boating, swimming, and water skiing most of the year.

The average annual temperature during fall and winter is approximately 79°. The ethnic composition of the area is approximately 95% Hispanic. Qualified persons may contact or write to:

South Texas Independent School District
Personnel Department
100 Med High, Mercedes, Texas 78570
Telephone: (956) 565-2454 or Teletype Device for Deaf (TDD): 800-735-2989

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.

No person shall, on the basis of race, religion, national origin, color, age, sex, handicap, or veteran status be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any educational program or activity of the South Texas Independent School District, as required by Title IX of the U.S. Department of Health, Education, and Welfare, and the above requirements extended to employment by the South Texas Independent School District and to admission thereto.

All positions are subject to funding and approval by the Board of Directors.
WE ARE AN EQUAL OPPORTUNITY EMPLOYER M/F/H/V

* Salary for the 2007-2008 school year
Marla M. Guerra, Ed.D.
Superintendent

Jeff Hembree
Deputy Superintendent

Enrique Moya, Jr.
Assistant Superintendent for Finance



INSTRUCTIONS FOR FILING AN APPLICATION WITH SOUTH TEXAS ISD

COMPLETE AN APPLICATION FORM

All information requested on the application form should be filled out accurately and completely. Names, dates, addresses, and phone numbers should be given in full. Account for all time from entry into high school to the present.

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 teaching and training experience. Recommendations from referents will be requested by the Personnel Office. Three signed evaluation forms by the applicant will be requested in order that this office may inquire about. The most recent PDAS evaluation or teacher performance evaluation will be required with the application. It must be an accurate representation of the evaluation.

COLLEGE/UNIVERSITY TRANSCRIPTS

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.

TEACHER SERVICE RECORD

If you have prior teaching experience, a copy of your Teacher Service Record should be attached. You may obtain a copy from your current and/or previous employers.

TEACHING CERTIFICATE

A copy of your Texas Teacher Certificate or college letter indicating you have applied for a certificate must be attached. Include with your certificate proof of having passed the TECAT, ExCET or TExES test(s). Out-of-state applicants without proof of TECAT, ExCET or TExES results must apply and pass the appropriate examination; this may be accomplished during the first year of employment.

COVER LETTER AND RESUME

A cover letter and resume shall be submitted and should be attached to the application form. This letter should include a statement concerning the reason(s) for seeking employment in STISD.

Office hours are, 8:00 a.m. - 5:00 p.m., Monday through Thursday, and 8:00 a.m - 4:00 p.m., Friday.

Your application will be kept active for one 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.

You will be contacted by our office by either phone or letter if and when you are considered for employment. Otherwise, we do not contact you.

PROFESSIONAL APPLICATION
SOUTH TEXAS INDEPENDENT SCHOOL DISTRICT
100 MED HIGH DRIVE
MERCEDES, TEXAS 78570

956-565-2454
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 Telephone Number

Social Security Number

E-Mail Address

P O S I T I O N D E S I R E D			
	FIELD/GRADE LEVEL	NO. YEARS EXP.	SEMESTER HOURS
1ST CHOICE			
2ND CHOICE			
3RD CHOICE			

Total Years Experience _____

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

If yes, give date _____ and position applied for _____

Are you presently under contract with any school district for the next school year? () Yes () No

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.

E D U C A T I O N

School Name	Location (City & State)	Dates Attended	Diploma or Degree	GPA

A college transcript is required before consideration can be given to your employment. It should include all courses completed at the time of the application.

C E R T I F I C A T I O N

Kind of state certificate held _____

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

SECONDARY CANDIDATES	ADMINISTRATIVE CANDIDATES	SPECIAL EDUCATION CANDIDATES
Certified teaching fields:		
_____ Sem.Hrs. _____	_____ Sem.Hrs. _____	_____ SemHrs. _____
_____ Sem.Hrs. _____	_____ Sem.Hrs. _____	_____ SemHrs. _____
_____ Sem.Hrs. _____	_____ Sem.Hrs. _____	_____ SemHrs. _____

Area of Specialization: _____ (Must have at least 18 hrs.)

IF APPLICANT FOR ELEMENTARY OR HIGH SCHOOL POSITION, FURNISH THE FOLLOWING INFORMATION:

Number of Semester Hours You Have Earned in:

_____ Elem. Ed.	_____ Art	_____ Journalism	_____ English
_____ Business	_____ Health/PE	_____ Social Studies	_____ Music
_____ Science	_____ Foreign Lang.	_____ Industrial Arts	_____ Drama
_____ Speech	_____ Vocational	_____ Math	_____ Reading

IF APPLICANT FOR SPECIAL EDUCATION, FURNISH THE FOLLOWING INFORMATION:

Number of Semester Hours You Have Earned in:

_____ MR	_____ VH	_____ HI	_____ AU
_____ LD	_____ OH	_____ SH	_____ MH
_____ ED	_____ OHI		

TEACHING/SCHOOL RELATED WORK EXPERIENCE

List most recent experience first. Include student teaching if less than 3 years experience. Use separate sheet if necessary. Indicate any skills, experience or training (military, on-the-job, or other) you have received which will assist the District in placing you.

From	To	No. of Years	Name & Address of Employment	Principal/or Immediate Supervisor	Grade or subject Taught or Type of Job

PROFESSIONAL REFERENCES

(Those who have not taught or those who have taught for only one principal must list student teaching information). Please list those whom we may contact even if they are the same as those on file with your college placement office.

TEACHERS WITHOUT EXPERIENCE COMPLETE THIS SECTION							
	NAME	Address:					Phone No.
		No.	Street	City	State	Zip	
College Supervisor of Student Teaching							
Coordinating Teacher - Public School							
Coordinating Teacher - Public School							

TEACHERS WITH EXPERIENCE COMPLETE THIS SECTION - Include references from last five positions. If more than one position in the same school system, list each.							
Full Name of Reference	Position	Address:					Phone No.
		No.	Street	City	State	Zip	

If you have a relative who works for this District or serves as a member of the Board of Directors, please give the name and address:

College or University where you Placement File may be obtained: _____

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? (Question does not apply to those graduating this year.)_____

(Question does not apply to those graduating this year)

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_____

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.



South Texas Independent School District

100 Med High Drive, Mercedes, Texas 78570

(956) 565-2454 • Fax (956) 565-4639

EVALUATION REPORT ON APPLICANT

_____ you have been mentioned as one who is acquainted with the qualifications, character, and abilities of _____ who is applying for the position of _____ in our schools. The applicant has on file in his/her application a statement reflecting how the school district may treat references received. The appropriate statement below is checked for your information.

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

Applicant's Signature

Your cooperation will be appreciated in providing the information requested below. Thank you for your courtesy.

Encircle the number in each line which best represents your evaluation of the person named above. If you have had no opportunity to observe, place a check mark (✓) in the last column.

Personal appearance:	1 Poor taste in dress and grooming	2	3 Usually makes a good impression	4	5 Excellent appearance, always appropriately dressed	
Personality:	1 Antagonizes and irritates others	2	3 Gets along reasonably well	4	5 Especially harmonious relations with others	
Communication Skills:	1 Incorrect speech, slang, limited vocabulary	2	3 Acceptable oral and written communication, adequate vocabulary	4	5 Effective communication and expressions, skillful choice of words	
Dependability:	1 Unpredictable, does not follow through	2	3 Can usually be relied upon	4	5 Always reliable and punctual	
Knowledge of subject matter:	1 Inadequate knowledge of content, limited understanding of concepts	2	3 Acceptable knowledge of subject field	4	5 Thorough and extensive knowledge of field, up-to-date	
Recognizes and provides for individual differences:	1 Makes little effort to know pupils; little provision for individual dual difference	2	3 Aware of special needs, occasionally makes special provisions for differences and needs	4	5 Strives to know pupils, sensitive to differences and needs; varies content, material, and activities to meet needs	
Attitude toward suggestions:	1 Resents suggestions, waits to be told; reluctant to change	2	3 Accepts suggestions; makes effort to adapt them to teaching, follows directions	4	5 Seeks suggestions and evaluations, profits from help, shows initiative	
Motivation of learning:	1 Fails to stimulate pupil interest	2	3 Generally achieves good pupil participation; pupils see some purpose in learning activities	4	5 Makes learning activities purposeful and stimulating	
Classroom management:	1 Gives little or no attention to the learning environment; poor management	2	3 Satisfactory attention to routine factors; average effort to provide stimulating learning environment	4	5 Provides stimulating, attractive learning environment; manages routine well; makes adjustments for health and comfort	

Between what dates do you know the applicant? From _____ to _____

What position did the applicant then occupy? _____

Has the applicant ever failed to be re-elected? []Yes []No []Doubtful

If you were an employer, would you hire this person? []Yes []No

Indicate your relationship with this person: []Employer []Cooperating Teacher []College Supv []Friend []Principal/Supv

Signature of Reference _____ Position _____ Date _____

Telephone Numbers: Work _____ Home _____ Cellular _____

Address/City/State/ZipCode: _____



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Address/City/State/ZipCode: _____