$An\ Equal\ Opportunity\ Employer*$

ling addressail address ne phoneer name that m	Cell pho	City One	Othe	er phone	
List the position(s) for which you are applying Type of employment: □ Full-time □ Part-time □ Summer only Date you can begin work Have you been employed by May ISD in the past? □ Yes □ No If you answered yes, provide dates of employment					
List specific skills, software proficiency, and any machines or equipment you can operate Include number of years of experience. 1					
t recent first. A). Attach résur loyer name and ion ion/title held s employed rvisor's name ohone	Attach additional shee	Employer location Position/t Dates employer location	name and itle held ployed or's name		
	ing address ail address ail address are phone er name that m sed for certification, the position(s) e of employme you can begin e you been em ou answered ye specific skills address se provide a contract recent first. A). Attach résur over name and on ion/title held rvisor's name	ail address	ail address	ail address	ing address

MAY ISD APPLICATION FOR SERVICE AND SUPPORT PERSONNEL

	Employer name and location				Employer location	name and		
Work Experience	Position/title held				Position/tit	le held		
Exper	Dates employed				Dates emp	loyed		
Work	Supervisor's name and phone				Supervisor and phone	's name		
	Reason for leaving				Reason for	leaving		
	Please list reference	es the	district can c	ontact r	egarding y	our work	history.	
	Full name of reference		ool district/ rm name		ailing dress	Positio	on/title	Area code/ phone number
nces								
References								
LE.								
	List the highest leve							
	Licenses and certificates granted							
0								
raining	Name and location schools attended							Year graduated (College only)
tion/T								
Education/T								
ш								

MAY ISD APPLICATION FOR SERVICE AND SUPPORT PERSONNEL

	Do you have a relative who serves on the Board of Education or is an employee of May					
	ISD?					
	ISD!					
	☐ Yes ☐ No If yes, please provide the relative's name and relationship:					
	7 /1 1					
_						
General Information	Have you ever been convicted of, pled guilty or no contest (nolo contendre) to, or received					
ati	probation, suspension, or deferred adjudication for a felony or any offense involving moral					
υį						
ıı	turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with					
ıfc	a minor)? ☐ Yes ☐ No					
=						
al	If was places state where when and the neture of the offense					
er	If yes, please state where, when, and the nature of the offense					
υé						
Ğ						
_						
	(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.)					
	I hereby affirm that all information provided in this application is true and accurate to the					
	Thereby william that the information provides in this application is true and according to					
	hest of my knowledge and understand that any deliberate falsifications, misrapresentations					
	best of my knowledge and understand that any deliberate falsifications, misrepresentations,					
	or omissions of fact may be grounds for rejection of my application or dismissal from sub-					
	or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment.					
	or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment. I authorize the references listed above to give you any and all information concerning my					
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	or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment. I authorize the references listed above to give you any and all information concerning my					
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The district Title IX Coordinator is Nick Heupel, May ISD Superintendent.

^{*}Applicants for all positions are considered without regard to race, color, sex (including pregnancy), national origin, religion, age, disability, genetic information, veteran or military status, or any other legally protected status. Additionally, the district does not discriminate against an applicant who acts to oppose such discrimination or participates in the investigation of a complaint related to a discriminating employment practice.

MAY INDEPENDENT SCHOOL DISTRICT 3400 CR 411 E, MAY, TEXAS 76857 254-259-2091

CRIMINAL HISTORY RECORD INFORMATION ADDENDUM

CONFIDENTIAL*

THE MAY INDEPENDENT SCHOOL DISTRICT IS REQUIRED BY STATE LAW TO OBTAIN CRIMINAL HISTORY RECORD INFORMATION ON APPLICANTS THE DISTRICT INTENDS TO EMPLOY EITHER ON A FULL-TIME, PART-TIME, OR SUBSTITUTE BASIS, (ACCORDING TO Texas Education Code §22.083 and Senate Bill 9). THE INFORMATION REQUESTED BELOW IS NECESSARY TO OBTAIN CRIMINAL HISTORY AND FINGER PRINTING RECORD INFORMATION.

PLEASE F	PRINT.				
NAME _					
	LAST		FIRST		MIDDLE
SOCIAL S	SECURITY NUME	BER		DATE OF BIR	тн
SEX	MALE	FEMALE	ETHNICITY: _	BLACK	WHITE/OTHER
NOT BE I	USED TO DETER POSE OF OBTAI	MINE ELIGIBILT INING THE ABOV MY RESPONSIB	Y FOR EMPLOYM /E NECESSARY IN	ENT BUT WILL BE	
SIGNATU					
DATE					

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I h	ave been notified that a computarized criminal
I,	ave been notified that a computerized criminal
history (CCH) verification check will be performed by acc	cessing the Texas Department of Public Safety
Secure Website and will be based on name and DOB infor	mation I supply.
Because the name based information is not an exa	act search and only fingerprint record searches
represent true identification to criminal history, the or	ganization (as listed below) conducting the
criminal history check is not allowed to discuss any info	rmation 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 require	d 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 o	rder to complete this process I must have the
correct fingerprinting (FAST) form from this agency, m	ake an online appointment, submit a full and
complete set of my fingerprints, and pay a fee	
company, L1Enrollment Services.	
Once this process is completed and the agency re	ceives the data from DPS, the information on
my fingerprint criminal history record may be discussed w	
gorp	
(This copy must remain on file by your agence	cy. Required for future DPS Audits)
Signature of Applicant or Employee	Please:
	Check and Initial each Applicable Space
Date	CCH Report Printed:
	YES NO initial
Agency Name (Please print)	Purpose of CCH:
Agency Representative Name (Please print)	Hire Not Hired initial
	Date Printed: initial
Signature of Agency Representative	Destroyed Date: initial
	Retain in your files

Date