

**Agua Dulce Independent School District**  
Wayne Kelly, Superintendent of Schools  
P. O. Box 250 1 Longhorn Drive  
Agua Dulce, Texas 78330  
wkelly@adisd.net  
Main Number 361-998-2542 Facsimile 361-998-2816



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Dear Applicant:

The Agua Dulce Independent School District is currently seeking qualified teachers who are interested in becoming a part of an exemplary school system. The school district has continued to experience success in both academic and extra-curricular programs. The recent completion of the new high school complements the other modern district buildings. The class size for all grades and subjects is well below the area and state average.

Parental support and community involvement add to the positive climate that exists in the school district. Students who attend school in Agua Dulce continue to be very respectful of adults and teachers and demonstrate pride in their academic studies.

For you to be considered for employment, a file will be created and become active when the following credentials are received.

1. A completed Agua Dulce ISD Application for Professional Position
2. A photocopy of a valid teaching certificate and/or recent graduate letter of authorization
3. A photocopy of your transcripts (unofficial copies are acceptable)
4. A signed authorization to check criminal history
5. Two letters of recommendation, one of which must be from the immediate supervisor
6. A copy of your resume or vita
7. Three completed Reference Forms

When a position becomes available, all active files are considered. If an interview is desired, you will be contacted by mail or phone by the campus principal. Your file will remain active for one school year.

I have included a teacher application with this letter and urge you to call or visit the campuses at Agua Dulce ISD.

If you have questions about the application process, please call the Office of the Superintendent at 361-998-2542 and ask for Tracy Quinney.

Sincerely,

Wayne Kelly  
Superintendent of Schools  
Agua Dulce Independent School District

**An Equal Opportunity Employer**

# PROFESSIONAL APPLICATION AGUA DULCE INDEPENDENT SCHOOL DISTRICT

P.O. Box 250  
Agua Dulce, TX 78330  
361. 998. 2542  
361. 998. 2816 (Fax)

Date Received: \_\_\_\_\_  
 Certification: \_\_\_\_\_  
 References: \_\_\_\_\_  
 Interview Date: \_\_\_\_\_  
 Date Renewed: \_\_\_\_\_



\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Application will be kept active for one year.

(For Office Use Only)

NAME \_\_\_\_\_  
 Last First Middle

Soc. Sec. No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_  
 Number Street  
 \_\_\_\_\_  
 City State Zip Code

Phone Number (\_\_\_\_) \_\_\_\_\_  
 Area

Phone Number (\_\_\_\_) \_\_\_\_\_  
 Area

PERMANENT ADDRESS \_\_\_\_\_  
 Number Street  
 \_\_\_\_\_  
 City State Zip Code

Former ADISD Employee?  Y  N  
 If yes, when? \_\_\_\_\_

## POSITIONS FOR WHICH APPLYING

A. Type(s) of Certificate(s) held:  
 Valid Texas (Date issued: \_\_/\_\_/\_\_)  
 Will receive Texas Certification upon graduation  
 None

Valid other state(s): \_\_\_\_\_  
 Texas One Year (Issued: \_\_/\_\_/\_\_)  
 Have you ever had a temporary or emergency permit in Texas?  
 No  Yes, for the school year(s) 19\_\_-\_\_

B. Check all appropriate boxes: (Check only ones for which you are certified and applying)

Secondary Teacher  Elementary Teacher

Teaching Field(s): Preference(s): (Please Number) Other Positions:

1. \_\_\_\_\_  Early Childhood  Librarian  Elem.  Middle  Sr. Hi.

2. \_\_\_\_\_  Kdg.  Counselor  Special Ed.  Speech Therapy

Middle  Sr. Hi.  Grade 1-6  Nurse  Diagnostician  Assoc. Psych.

Vocational  Grade 1-8  ESL  Administrative/Mid Management  
 Position: \_\_\_\_\_

Coach - Sports: \_\_\_\_\_ Other - Extra: \_\_\_\_\_



### EDUCATION

Highest Educational Level Attained:    Bachelor's degree       Master's degree       Doctor's degree

High School Completed: \_\_\_\_\_ Date: \_\_\_\_\_ Location: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

**College Work**

Institution Name	Location		Attendance Dates				Degree	Date Earned	Major(s)	# Hrs	Minor(s)	# Hrs
	City	State	From Mo	From Yr	To Mo	To Yr						

### OTHER PERSONAL INFORMATION

Are you related to a member of the ADISD School Board?       Yes       No

If "Yes" whom? \_\_\_\_\_ Relationship \_\_\_\_\_

Do you lose time from work because of (1) poor health, (2) family demands, (3) other       Yes       No

If "Yes" explain and give number of days absent. \_\_\_\_\_

Have you ever been discharged or caused to resign from a previous position?       Yes       No

If "Yes" explain: \_\_\_\_\_

Have you ever had a teaching contract nonrenewed or terminated?       Yes       No

If "Yes" 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 the applicant is applying.**

Have you ever been convicted of a misdemeanor (or other than traffic violation) or felony?       Yes       No

If "Yes" explain: \_\_\_\_\_

What type of extra school activities would you be willing to direct? \_\_\_\_\_

### EMPLOYMENT OUTSIDE OF EDUCATION

List dates in chronological order

Dates		Type of Work	Name of Company	Address
From	To			

**PERSONAL STATEMENTS**

Please answer the following questions. Also, if you wish, you may give us any additional information which you feel might help us become better acquainted with your personal and professional qualifications.

1. What do you feel are your strongest assets relative to the position for which you are applying?

2. Briefly state your philosophy on student assessment.

3. How do you see the role of the school administrator in relation to the teacher?

I hereby certify that the information presented in this application to the best of my knowledge is true, accurate, and complete. Any falsification of this record will be sufficient cause for disqualification. Furthermore, it is understood that this application becomes property of the Agua Dulce Independent School District which reserves the right to accept or reject it. I hereby extend the right of the Agua Dulce Public Schools to contact the references listed on this application and to inquire, at their discretion, into my professional background and professional experiences, and I hereby release any member or agent of the district from any liability regarding me, regardless whether said information is in my application or not. I further understand that all information gathered regarding my application will be the property of the school district and will not be released to me.

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

No person shall, on the basis of national origin, race, gender, creed, religion, age or handicap, be excluded from participation in, be denied the benefit of, or be subjected to discrimination in employment, or recruitment, consideration or selection for full or part-time professional or non-professional positions in the Agua Dulce Independent School District.

**Agua Dulce Independent School District**  
**PO Box 250**  
**Agua Dulce, Texas 78330**

**361-998-2542**  
**Fax 361-998-2816**

\_\_\_\_\_ has applied for the position of \_\_\_\_\_  
 \_\_\_\_\_ with the Agua Dulce Independent School District.

Please give us your opinion of the candidate's personal and professional qualifications as indicated by the items below. Thank you.

\_\_\_\_\_  
 Wayne Kelly, Superintendent

To: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant should complete the top section of this form before forwarding to reference.

	Clearly Outstanding	Exceeds Expectations	Satisfactory	Below Expectations	Unsatisfactory
General Appearance					
Loyalty and Reliability					
Work Motivation					
Attendance and Punctuality					
Communication Skills					
Decision-Making and Problem-Solving Skills					
Effectiveness as Instructor/Administrator					
Leadership/Management Skills					
Ability to work with others					
Emotional Stability					

Length of Acquaintanceship From \_\_\_\_\_ to \_\_\_\_\_

Your Official Relationship to the Applicant \_\_\_\_\_

Would you employ the applicant for the position desired? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Official Title \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_ Telephone # \_\_\_\_\_

**This form should be given (by you) to a person of reference. Please have reference mail this form to Tracy Quinney, Office Manager, Agua Dulce I.S.D., P. O. Box 250, Agua Dulce, TX 78330.**

**AGUA DULCE INDEPENDENT SCHOOL DISTRICT  
CONSENT TO PERFORM CRIMINAL HISTORY  
BACKGROUND CHECK AND ADVISING OF RIGHTS  
UNDER THE FAIR CREDIT REPORTING ACT**

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

I hereby authorize the Agua Dulce Independent School District to obtain any criminal history record information relevant to my application for employment from any pertinent source in accordance with the provisions of the Texas Education code Section 22.083. I also understand that the Agua Dulce Independent School District has the authority to notify the Commissioner of Education of any findings in accordance with Texas Education Code Section 22.083. In signing this form, I release the Agua Dulce Independent School District from any liability.

I do hereby consent to the district's 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.

The district has informed me that under the Fair Credit Reporting Act, I have certain rights concerning my review of the information reported. I understand that if the information prevents the district from offering me employment, I will be provided the name, address, and telephone number of the reporting agency as well as the nature and substance of all information and the source.

Signed this \_\_\_\_\_ day of \_\_\_\_\_

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

Last Name		
Maiden and/or Other Last Names Used	1.	2.
	3.	4.
First Name		
Middle Name		
Date of Birth	Month _____ Day _____ Year _____	
Social Security No.	-	-
Drivers License No.		
Gender	Male _____	Female _____
Ethnicity	Black _____	White _____ Hispanic _____ Other _____

List all previous addresses below:

City/Town	County	State	Dates From	Dates To

1. Have you ever been arrested and/or convicted of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ No
2. Have you ever been arrested and/or convicted of any offense involving moral turpitude?

Moral turpitude is an act of baseness, villainess, or depravity in the private and social duties which a person owes another member of 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. \_\_\_\_\_ Yes \_\_\_\_\_ No

I understand that any falsification of this information will be sufficient cause for disqualification or termination.

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

\_\_\_\_\_  
Date

<b>OFFICE USE ONLY</b>	
Date of first inquiry: _____	_____ Signature of Reviewer
Date national search received: _____	
Eligible for employment: _____ Yes _____ No	If no, date Circumvention Letter mailed _____