

**EMPLOYMENT APPLICATION**  
**HAWLEY INDEPENDENT SCHOOL DISTRICT**  
P.O. Box 440 Hawley, Texas 79525 325-537-2214, Ext. 101

**2015-2016 SY**

Name of Applicant: \_\_\_\_\_

Current Address: \_\_\_\_\_ City & Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Date Available: \_\_\_\_\_

**Certification Information**

Highest Degree Held: \_\_\_\_\_

Areas of Certification: \_\_\_\_\_

(Appearing on your Certificate)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Position Applied For:** \_\_\_\_\_

Maintenance

Custodian

Bus Driver

Cafeteria Worker

Total Years Experience: \_\_\_\_\_

**The Hawley Independent School District is an EQUAL OPPORTUNITY EMPLOYER**

**Educational Preparation:**

High School	Location	Year Graduated	Approximate G.P.A.

College/University Attended and Location	Dates Attended	Major	Minor or Specialty	Type of Degree	Year Earned	Approximate G.P.A.

**Activities, Awards, Honors, Etc.**

High School: \_\_\_\_\_

College: \_\_\_\_\_

**WORK EXPERIENCE** (Please list in chronological order):

From Mo.	From Yr.	To Mo.	To Yr.	Name, Address, Phone# of Employer	Supervisor	Type of Work

Total Years of Work Experience: \_\_\_\_\_

**References:**

Name	Address	Phone	Position

**Before your application may be considered for review, you will need the following on file:**

1. Completed application form
2. Driver License (copy)

**Name and address of a person we could call if we had difficulty contacting you:**

Name: _____	Home Phone: _____
Address: _____	Work Phone: _____

**Please return the completed Application Form to:**

**Superintendent's Office  
Hawley Independent School District  
P.O. Box 440  
210 Avenue E  
Hawley, TX 79525**

In signing this application, I declare the above information to be correct to the best of my knowledge. I also understand that all information obtained from all references contacted is confidential and will not be made available to me.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

<b>Date Application Received:</b>	<b>Date Interviewed:</b>
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