

MATHIS INDEPENDENT SCHOOL DISTRICT



HIRING PROCESS

The following are documents that must be completed in the hiring process:

1. Agenda Form
 2. Application (located on Talent Search)
 3. Record Release Authorization
 4. DPS Computerized Criminal History (CCH) Verification
 5. Interview Rating Sheet
 6. Telephone Reference Check Form (3 pages)
 7. Personnel Recommendation Form
- If interviewing an applicant enrolled in the Alternative Certification Program (ACP), the applicant **must** bring an Eligibility Letter to the interview. The Eligibility Letter states the applicant is highly qualified.

If you have any questions please call the Personnel Department.

Mathis ISD

Position Title

AGENDA FORM

DAY OF THE WEEK & DATE

A. Welcome

B. Interview Process

Applicant Name:

• _____ **Time:** _____

C. Questions and Answers

D. Committee Members:

Name:

Title:

MATHIS INDEPENDENT SCHOOL DISTRICT
P.O. BOX 1179
MATHIS, TEXAS 78368
361-547-3378

CRIMINAL RECORD RELEASE AUTHORIZATION

House Bill 1498, 71st Legislature requires school districts to obtain criminal history record information that relates to an applicant for employment.

I hereby authorize any and all law enforcement agencies in the State of Texas to release any and all criminal history that I may have to the Mathis Independent School District.

I understand that the only purpose of obtaining such information is for the evaluation of my credentials for employment.

(Print full name in ink.)

Name _____
First Middle Maiden Last

Date of Birth Social Security Number

Race/Ethnicity

White, not Hispanic Origin

Hispanic

Black, not Hispanic Origin

Asian or Pacific Islander

American Indian or Alaskan Native

Sex

Male

Female

Driver's License Number State

Date Completed Signature

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I, _____, acknowledge that a Computerized Criminal
APPLICANT or EMPLOYEE NAME (Please print)

History (CCH) check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB identifiers I supply. (This is not a consent form.) Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411; Subchapter F.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, therefore the organization conducting the criminal history check is not allowed to discuss with me any criminal history record information obtained using this method. The agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search. Once this process is completed the information on my fingerprint criminal history record may be discussed with me.

In order to complete the process I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online at [www.txdps.state.tx.us /Crime Records/Review of Personal Criminal History](http://www.txdps.state.tx.us/CrimeRecords/ReviewofPersonalCriminalHistory) or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$24.95 to the fingerprinting services company.

(This copy must remain on file by your agency. Required for future DPS Audits)

Signature of Applicant or Employee

Date

Mathis ISD

Agency Name (Please print)

Sylvia Padilla

Agency Representative Name (Please print)

Signature of Agency Representative

Date

Please: Check and Initial each Applicable Space	
CCH Report Printed:	
YES _____ NO _____	_____ initial
Purpose of CCH: _____	
Empl ___ Vol/Contractor ___	_____ initial
Date Printed: _____	_____ initial
Destroyed Date: _____	_____ initial
Retain in your files	

MATHIS INDEPENDENT SCHOOL DISTRICT

INTERVIEW RATING SHEET

Position Applied For: _____

Rating Scale:

- (1) Poor
- (2) Below Average
- (3) Meets Expectations
- (4) Exceeds Expectations
- (5) Clearly Outstanding

Applicant: _____

Interviewer: _____

POISE/CONFIDENCE ----- 1 2 3 4 5

KNOWLEDGE OF JOB APPLIED FOR -- 1 2 3 4 5

EXPERIENCE -----1 2 3 4 5

QUALIFICATIONS ----- 1 2 3 4 5

LEADERSHIP SKILLS ----- 1 2 3 4 5

ABILITY TO ACHIEVE RESULTS ----- 1 2 3 4 5

INTERVIEW RESPONSES -----1 2 3 4 5

APPEARANCE/DRESS -----1 2 3 4 5

COMMUNICATION SKILLS -----1 2 3 4 5

TOTALS TOTAL _____

MAXIMUM 45

NOTES: _____

MATHIS INDEPENDENT SCHOOL DISTRICT



TELEPHONE REFERENCE CHECK FORM

NOTE: DO NOT CONDUCT REFERENCE CHECKS WITHOUT A SIGNED APPLICATION. ONLY CHECK THOSE REFERENCES AUTHORIZED ON APPLICATION.

APPLICANT NAME: _____ POSITION: _____

REFERENCE NAME: _____ TITLE: _____

COMPANY NAME: _____ PH. No.: _____

RELATIONSHIP TO APPLICANT: _____

COMPLETED BY: _____ DATE: _____

1. HOW LONG HAVE YOU KNOW/SUPERVISED THE CANDIDATE?

2. WHAT WAS HIS/HER POSITION AND MAIN JOB RESPONSIBILITIES?

3. CONFIRMATION OF EMPLOYEE DATES. (IF APPLICABLE)

4. WHAT WERE HIS/HER STRENGTHS?

5. WERE THERE ANY AREAS THAT NEEDED IMPROVEMENT?

6. HOW WELL DID HE/SHE GET ALONG WITH:

MANAGEMENT/SUPERVISORS

GOOD FAIR POOR

COWORKERS

GOOD FAIR POOR

CLIENTS/CUSTOMERS

GOOD FAIR POOR

7. WOULD YOU DESCRIBE THIS PERSON AS BEING PEOPLE OR TECHNICALLY ORIENTED?

8. DID HE/SHE REQUIRE CLOSE SUPERVISION?

9. DESCRIBE HIS/HER WRITTEN AND ORAL COMMUNICATION SKILLS?

10. HOW SATISFIED WERE YOU WITH HIS/HER TIME MANAGEMENT SKILLS?

11. HOW SATISFIED WERE YOU WITH HIS/HER PUNCTUALITY AND ATTENDANCE?

12. WHAT WOULD YOU SAY MOTIVATES THIS PERSON TO DO A JOB WELL?

13. HOW WAS HIS/HER ATTITUDE TOWARDS THEIR WORK?

14. WHAT KIND OF WORK ENVIRONMENT AND POSITION WOULD THIS PERSON THRIVE IN?

15. WHAT WERE THE CIRCUMSTANCES SURROUNDING THE APPLICANT LEAVING YOUR ORGANIZATION?

16. WAS PROPER NOTICE GIVEN?

17. WOULD THIS PERSON BE ELIGIBLE FOR RE-HIRE WITH YOU COMPANY?

18. IS THERE ANYTHING YOU WOULD LIKE TO ADD THAT WILL ASSIST US IN OUR DECISION?



MATHIS INDEPENDENT SCHOOL DISTRICT Personnel Recommendation Form

I _____, _____, on _____,
(Print Name) (Position) (Date)

Recommend _____ for the position of
Candidate Name

_____ at _____
Position Campus/Department

With Mathis ISD, effective _____
Date Signature of Administrator

I certify that the following required documents have been compiled and are on file with Mathis ISD Personnel Office:

- Application
- Criminal Record Check
- Resume
- College Transcripts
- Letter of Reference (4)
- Teaching Certificates/Endorsements
- Other/Specify

NOTE: If the applicant is selected for employment, additional documents may be required as follows:

- Tuberculosis Results
- Copies of Deficiency Plans (List)
- Original Service Records
- Other Additional Certificates

Please indicate by each reference the manner by which contact was made (verbally, written, phone). The following references were contacted:

	Name	District	City	Positions	Phone #	Date	Recommend	Manner Contacted
1.								
2.								
3.								

*Were any areas of concern regarding this applicant disclosed during the reference check process?

- Yes** **No** If Yes, please explain (use back of form if necessary)

Interview Committee: _____