

Date: \_\_\_/\_\_\_/\_\_\_

**FRISCO I.S.D**

**Fine Arts Enrichment Teacher Application**

**Name:** \_\_\_\_\_ **Telephone:** (    ) \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Instrument(s) you plan to teach: \_\_\_\_\_ **Voice:** \_\_\_\_\_

Department (circle one):    **Band**                    **Orchestra**                    **Choir**

Available to teach: Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday \_\_\_

Level:            High School: \_\_\_\_\_ Middle School: \_\_\_\_\_

Have you taught previously? \_\_\_\_\_ Dates: \_\_\_\_\_

List the campus(s) and director's name(s) where you would like to teach:



**Professional and/or personal references (List at least three)**

	<b>Full Name</b>	<b>Position</b>	<b>Address/Phone</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Who recommended you for this position? \_\_\_\_\_

***Applicant's Signature***

NOTE: In addition to this application, the following documentation is required before teaching private lessons in Frisco ISD. **Enrichment teachers will not be allowed to begin teaching classes until all of the required documents have been received in the Fine Arts office and applicants have been cleared through a criminal background check.**

**Other Required Documents:**

\_\_\_\_\_ Addendum to Application (Criminal History)    \_\_\_\_\_ Proof of Music Association Insurance (TMEA, NFHS, etc.)  
\_\_\_\_\_ Copy of Driver's License

**Return all required documents to:** FAX (469) 633-6595 or [craiga@friscoisd.org](mailto:craiga@friscoisd.org)

Questions or concerns phone: 469-633-6590

**Fine Arts**

**Private Lesson Instructor**

**Addendum to Application**



FRISCO INDEPENDENT SCHOOL DISTRICT

**FAX (469) 633-6595**

**Email: [craiga@friscolisd.org](mailto:craiga@friscolisd.org)**

**(Please print or type)**

The Frisco Independent School is required by state law to obtain criminal history record information on all applicants for employment with the district (Texas Education Code Section #21.917).

Full name \_\_\_\_\_  
Last First Middle Initial

Maiden or other names used \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Sex: Male Female Ethnicity: Black White Other \_\_\_\_\_

Drivers License Number \_\_\_\_\_ Issuing State \_\_\_\_\_

The following are my responses to questions about my criminal record history (if any) with descriptions to any question with a **yes** answer:

1. Have you ever been convicted or plead guilty before a court of any federal, state, or municipal criminal offense? (Excluding minor traffic violations) \_\_\_\_\_ Yes No  
If yes, please provide an explanation below:

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

2. Have you ever received deferred adjudication or similar disposition for any federal, state or municipal criminal offense? \_\_\_\_\_ Yes No  
If yes, please provide an explanation below:

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

3. Have you ever received probation or community supervision for any federal, state or municipal criminal offense? \_\_\_\_\_ Yes No  
If yes, please provide an explanation below:

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

(Continued on reverse side)

4. Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? \_\_\_\_\_ Yes No

If yes, please provide an explanation below:

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

5. As of the date of this authorization, do you have any pending criminal charges against you? \_\_\_\_\_ Yes No

If yes, please provide an explanation below:

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

**This section is to be used to list all counties and states of residence since age 18 or high school graduation. You must be specific about dates and residence.**

\_\_\_\_\_  
Previous City County State Dates: From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_  
Previous City County State Dates: From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_  
Previous City County State Dates: From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_  
Previous City County State Dates: From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_  
Previous City County State Dates: From \_\_\_\_\_ To \_\_\_\_\_

**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 Frisco Independent School District. I have been advised that as part of the application process, the district conducts a criminal history background check. I do hereby consent to the district 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 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 \_\_\_\_\_ year \_\_\_\_\_

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