

Employment Screening Form

Organization: **Burkburnett Independent School District**

Assigned To: **User - Robert Underwood**

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Name of Supervisor

Campus or Department

CANDIDATE INFORMATION

Candidate Name

Position

List ALL Subjects & Grades to be Taught

Budget Code (if unknown, contact the Salary Administrator)

Name of Employee that Candidate is Replacing

Anticipated Date of Hire

Professional

Highly Qualified (Upload appropriate HQ Form)

Add a File

Certification/Assignment Verification

Verify that the candidate's certification is appropriate for the assignment at:

[http://info.sos.state.tx.us/pls/pub/readtac\\$ext.ViewTAC?tac_view=4&ti=19&pt=7&ch=231](http://info.sos.state.tx.us/pls/pub/readtac$ext.ViewTAC?tac_view=4&ti=19&pt=7&ch=231)

Para

- Certified Teacher
- Certified Aide
- TOPS Training
- Minimum 48 Accredited College Hrs.

Clerical

- Meets Qualifications Specified on Job Description

SUBMISSION AND CERTIFICATION

My electronic signature certifies that I am recommending a candidate who meets all qualifications for the position.

Click to Digitally Sign

I am recommending a candidate who does NOT meet all qualifications for the position as indicated below:

HUMAN RESOURCES VERIFICATION (HR Office)

Verification Complete and Accurate

Form is Incomplete
(See Note Below)

APPROVAL BY SUPERINTENDENT

Approved to Inform Candidate of Recommendation

NOT APPROVED
(See note below)

Submit Form