

THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL
Texas State Organization

APPLICATION FOR EMPLOYMENT

For Position of TSO Business Administrator

Prospective employees will receive consideration without regard to race, creed, color, age, sex, national origin, handicap or veteran status. The member shall be a member of the Texas State Organization of The Delta Kappa Gamma Society International.

Please submit forms electronically following the application format.
Letters of recommendation should be one page in length and sent with the application.
The number of pages may not exceed 7, including letters of recommendation.

E-Mail application to: TSO Personnel Committee Chair, Marilyn Nease

Email Address: personneltso@gmail.com

Complete application must be sent on or before: June 1, 2026

PERSONAL

Last Name _____ First _____ Middle _____

Street Address _____

City, State, Zip _____ Cell # _____

E-mail _____

IMPACT STATEMENTS

List your three greatest strengths.

Describe any special skills or talents you possess. (languages, technology, machine operation, photography, supervisor, etc.) Limit to 200 words.

Why are you interested in this position? Limit to 200 words.

EDUCATIONAL BACKGROUND – (Begin with most recent.)

College/University

Degree

Date

WORK EXPERIENCE

Current Position: (If retired, give date of retirement and last professional position.)

Other Work Experience:

DELTA KAPPA GAMMA

Please list any positions held or duties performed in TSO and DKG International, which you believe would help you carry out the responsibilities of this position. (Not required for consideration.)

OTHER ORGANIZATIONS

Professional - Offices held or service rendered

Community - Office held or service rendered

SPECIAL TRAINING/WORKSHOPS PERTAINING TO THE POSITION (within the last three years)

REFERENCES

Two letters of reference must be included with the application. One letter must be written by a Delta Kappa Gamma member. Letters should include phone numbers so that the individual may be contacted if additional information is needed.

OTHER

Have you ever applied for employment with TSO? _____ If so, what position and when?

Have you ever been bonded? _____ If yes, who was the employer?

Have you ever been convicted of any crime (excluding Class C traffic offenses and municipal ordinance violations), which has not been subject to deferred adjudication, expunged, or where such criminal records have been sealed by a court?

Yes _____ No _____

If yes, describe it in full. NOTE: A conviction does not automatically exclude the applicant from consideration, but the job-relatedness of the offense will be considered, as well as the date of the offense, length of time since the offense, debt paid to society, and rehabilitation.

The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

I understand that a background check may be performed before I am hired.

I understand that if I am employed, my employment will be at-will and for no specified term and may be terminated by either the employer or by me at any time without advance notice and without requirement of cause.

I give my permission for the employer to contact my references or my former employers. I hereby release the Texas State Organization of the Delta Kappa Gamma Society International from any and all liability or claims related to such contacts(s).

Signature _____ Date _____