

McCulloch County

Application for Employment

PRINT IN BLACK INK OR TYPE: These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "NA." **DO NOT LEAVE ANY QUESTIONS BLANK.** Be sure to sign when completed. McCulloch County is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services. You may make copies of this application and enter different position titles, but each copy must be signed. **Resumes will also be accepted with the completed applications.** This application becomes public record and becomes subject to disclosure.

With few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state to correct any information that is determined to be incorrect. (Reference Code, Sections 555.021, 552.023, and 559.004.)

NAME \_\_\_\_\_  
(Last) (First) (Middle) (Daytime Phone)

MAILING ADDRESS \_\_\_\_\_  
(Street) (City) (State) (Zip code)

E-MAIL ADDRESS \_\_\_\_\_  
(Optional) (Cell Phone)

List any other names used if different from name on this application:

**HAVE YOU EVER BEEN CONVICTED OF A FELONY OR SUBJECTED TO DEFERRED ADJUDICATION ON A FELONY CHARGE? YES NO**

If the answer is "Yes," explain in concise detail on a separate page, giving dates and nature of the offense, names and locations of the court, and disposition of the case(s). A conviction may not disqualify you, but a false statement will. Some state and county agencies may require some additional information related to convictions of misdemeanors.

List the exact position or type of work and location for which you wish to apply:

Full-time                      Part-time                      Date available to start work \_\_\_\_\_

Are you at least 17 years of age? **Yes**                      **No**                      What days are you unavailable to work? \_\_\_\_\_

Are you willing to work hours other than 8-5? **Yes**                      **No**

Are you willing to travel? **Yes**                      **No**                      If yes, what percent of the time? \_\_\_\_\_

License/Certification DL or CDL	Date Issued	Date Expires	Issuing Authority State/Other Agency	License Number

Do you have any relatives currently employed by McCulloch County? **Yes**                      **No**                      If the answer is "yes," list names and relationships: \_\_\_\_\_

Have you ever been employed by McCulloch County? **Yes**                      **No**                      If the answer is "yes," in what position/department? \_\_\_\_\_

**Special Training/Skills/Qualifications**

List all job related training or skills you possess and machines or office equipment you can use, such as computer equipment, types of software and hardware, heavy road machinery, etc. Attach additional pages if necessary.

Do you speak or write a language other than English? **Yes**                      **No**                      If the answer is "yes," list them: \_\_\_\_\_

High School Graduate or GED? **Yes**                      **No**

Name of School	Dated Attended	Date Graduated

## EMPLOYMENT HISTORY

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experiences should clearly describe your qualifications.

1. Include ALL employment. Begin with your current or last position and work your way back to your first. Employment history should include **each position** held, even those with the same company or organization.
2. **Employer addresses must be complete mailing addresses, including zip codes.**
3. Answer all questions and completely summarize your experience including all technical and managerial responsibilities and any special training, skills, and qualifications for each position you have held.

If you need additional space to describe your employment history, you may attach another sheet by providing the same information in the same format as this application form.

**EMPLOYEE NAME:** \_\_\_\_\_  
Last
First
Middle

POSITION HELD: EMPLOYER: MAILING ADDRESS: CITY & STATE: TELEPHONE NUMBER: SUPERVISORS NAME:	Date of Hire:  Date of Separation:  Salary:	Full-Time Part-Time  Average Hours Worked
SUMMARY OF JOB EXPERIENCE:        SPECIFIC REASON FOR LEAVING:		

POSITION HELD: EMPLOYER: MAILING ADDRESS: CITY & STATE: TELEPHONE NUMBER: SUPERVISORS NAME:	Date of Hire:  Date of Separation:  Salary:	Full-Time Part-Time  Average Hours Worked
SUMMARY OF JOB EXPERIENCE:        SPECIFIC REASON FOR LEAVING:		

POSITION HELD: EMPLOYER: MAILING ADDRESS: CITY & STATE: TELEPHONE NUMBER: SUPERVISORS NAME:	Date of Hire:  Date of Separation:  Salary:	Full-Time Part-Time
		Average Hours Worked
SUMMARY OF JOB EXPERIENCE:		
SPECIFIC REASON FOR LEAVING:		

POSITION HELD: EMPLOYER: MAILING ADDRESS: CITY & STATE: TELEPHONE NUMBER: SUPERVISORS NAME:	Date of Hire:  Date of Separation:  Salary:	Full-Time Part-Time
		Average Hours Worked
SUMMARY OF JOB EXPERIENCE:		
SPECIFIC REASON FOR LEAVING:		

POSITION HELD: EMPLOYER: MAILING ADDRESS: CITY & STATE: TELEPHONE NUMBER: SUPERVISORS NAME:	Date of Hire:  Date of Separation:  Salary:	Full-Time Part-Time
		Average Hours Worked
SUMMARY OF JOB EXPERIENCE:		
SPECIFIC REASON FOR LEAVING:		

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING THE SPACE PROVIDED**

1. I certify that all the information provided by me in connection with this application, whether on this document or not, is true and complete, and I understand that any misstatement, fabrication, or omission of information may be grounds for refusal to hire or, if hired, termination.
2. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S.
3. I understand that some state and county agencies will check with the Texas Department of Public Safety, the Federal Bureau of Investigation, and McCulloch County Sheriff's Office for any criminal history /back ground checks in accordance with applicable statutes.
4. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you.

**THIS APPLICATION MUST BE SIGNED**

SIGN HERE \_\_\_\_\_  
Applicant Name Date