## EASTLAND COUNTY DISPATCH/911 APPLICATION FOR EMPLOYMENT

# AN EQUAL OPPORTUNITY EMPLOYER

Teleph		
City		
City		
	State	Zip Code
ates on an unrestricted bas	is?	
County before? If	<b>yes</b> , give date:	
employer?		
of the job or been shown a d	copy of the job desc	ription listing the
ons with or without reason	able accommodatio	n?
ll Time Part Time	Shift Work	Temporary
not or will not work?		
d?		
f a Felony or Misdemeanor	?	
	ates on an unrestricted basis	ates on an unrestricted basis? County before? If yes, give date: employer? of the job or been shown a copy of the job descu- ons with or without reasonable accommodation I Time Part Time Shift Work not or will not work?

## EDUCATION

	NAME AND LOCATION OF SCHOOL	MAJOR	DIPLOMA/DEGREE	
High School				
College/University				
College/University				
Other Training/Education:				

### WORK HISTORY

Most Recent Employer	Dates Employed		
	From:	То:	
Address	Telephone		
Job Title	Hourly Rate/Salary		
	Starting:	Final:	
Name and Title of Supervisor			
Description of Duties			
Reason for Leaving			

Previous Employer	Dates Employed		
	From:	То:	
Address	Telephone		
Job Title	Hourly Rate/Salary		
	Starting:	Final:	
Name and Title of Supervisor			
Description of Duties			
Reason for Leaving			

Previous Employer	Dates Employed			
	From: To:			
Address	Telephone			
Job Title	Hourly Rate/Salary			
	Starting: Final:			
Name and Title of Supervisor				
Description of Duties				
Reason for Leaving				

Previous Employer	Dates Employed		
	From:	То:	
Address	Telephone		
Job Title	Hourly Rate/Salary		
	Starting:	Final:	
Name and Title of Supervisor			
Description of Duties			
Reason for Leaving			

SKILLS: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge. Please note if you have a Current Valid Driver's License.

#### REFERENCES

Give name, address, and telephone number of three references who are not related to you and are not previous employers.

1.	Name:	Telephone:
	Address:	
		Telephone:
	Address:	
3.	Name:	Telephone:
	Address:	

### APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions, or misrepresentations may result in my dismissal. I also understand that <u>this application is an official government record and that is a criminal offense to falsify such</u>. I authorize Eastland County to make an investigation of any of the facts set forth in this application. I also authorize Eastland County Dispatch to use the information I have provided to conduct a criminal background check.

I understand that employment with Eastland County is "at will" which means that either I or Eastland County can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or official of Eastland County, other than the Commissioners' Court, has any authority to alter the foregoing.

Signature of Applicant		Date	Printed or typed name		-
DL#,	, SS#	, TCOLE PID	#	(if any)	