

CASS COUNTY, TEXAS
APPLICATION FOR EMPLOYMENT

Date of application _____ Announcement Number _____

Position Desired _____

Name _____

Address _____ City/State _____ Zip Code _____

Telephone (Day) _____ Telephone (Evening) _____

Date of Birth _____

Drivers License # _____ Social Security # _____

Are you legally able to work in the United States? Yes No

Have you ever been employed by Cass County? Yes No
If yes, where? _____

Do you have relatives currently employed by Cass County? Yes No
If yes, whom _____

Are you employed now? Yes No

If yes, may we contact your present employer? Yes No

Are you on lay-off and subject to recall? Yes No

Are you available to work? Full-time Part-time Temporary

Can you travel if a job requires it? Yes No

Do you have a valid Texas Driver's license? Yes No Other

Have you been convicted of a felony within the last seven years? Yes No

(Conviction will not necessarily disqualify applicant from employment)

If yes, please explain _____

“EQUAL OPPORTUNITY EMPLOYER PROGRAM”
“Auxiliary aids and services are available upon request to individuals with disabilities”

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organizations which indicate race, color, religion, sex or national origin. Identify specific dates (month/year) of employment. Specific qualifying job experience and/or skills (as advertised) **MUST BE IDENTIFIED.**

Employer	Telephone	Work Performed
Address		
Job Title		
Supervisor		
Reason for Leaving		
Dates Employed		Salary
From	To	Starting Final
Employer	Telephone	Work Performed
Address		
Job Title		
Supervisor		
Reason for Leaving		
Dates Employed		Salary
From	To	Starting Final
Employer	Telephone	Work Performed
Address		
Job Title		
Supervisor		
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Dates Employed		Salary	
From	To	Starting	Final
Employer	Telephone	Work Performed	
Address			
Job Title			
Supervisor			
Reason for Leaving			
Dates Employed		Salary	
From	To	Starting	Final

If you need additional space, please continue on a separate sheet of paper

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience. Include technical/professional licenses indicating state, and expiration date, awards, memberships, typing skills, personal computer skills, and software experience.

EDUCATION AND TRAINING

Do you have a High School Diploma or High School Equivalency?				High School Equivalency Test:			
Yes <input type="checkbox"/>	No <input type="checkbox"/>			Date Passed _____/_____/_____	State Awarded _____		

TYPE OF SCHOOL	School Name	City and State	Major Field of Study	Type of Degree	Degree Date	Dates Attended			
						From Mo	Yr	To Mo	Yr

LAST HIGH SCHOOL

COLLEGES ATTENDED

OTHER

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application.

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize (consent to) the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision, including contacting the references and previous employers, I have named in this application. I also understand that this application is not a contract of employment.

I hereby give my consent to a criminal background and/or a motor vehicle records check if the position I have applied for requires this as a condition of my employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge if I am hired. I also understand that I may be required to have a physical exam related to the essential functions of the position I am applying for and/or pass a drug and alcohol pre-employment test. A failed physical and/or drug screen may result in the conditional offer of employment being withdrawn.

I understand that if employed, I am required to abide by all rules and regulations of Cass County.

Signature of Applicant

Date