

# Employment Application

<p style="text-align: center; margin: 0;"><b>PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE</b></p>	<p><b>San Jacinto County Appraisal District</b>  <b>PO Box 1170 or 99 Slade St.</b>  <b>Coldspring, Texas 77331</b></p>	
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**APPLICATION FOR EMPLOYMENT**

**APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

**PLEASE COMPLETE PAGES 1-5.**

Date:

Name:

Last

First

Middle

Maiden

Present address:

Number

Street

City

State

Zip

How long?

Social Security No.      -      -

Telephone: (    )      -

If under 18, please list age:    years old.

Position applied for (1):  
 and salary desired (2):  
 (Be specific):

Days available to work

- |                              |                               |
|------------------------------|-------------------------------|
| <input type="checkbox"/> Any | <input type="checkbox"/> Thur |
| <input type="checkbox"/> Mon | <input type="checkbox"/> Fri  |
| <input type="checkbox"/> Tue | <input type="checkbox"/> Sat  |
| <input type="checkbox"/> Wed | <input type="checkbox"/> Sun  |

How many hours can you work weekly?

Can you work nights?     Yes     No

Employment desired:     Full-time Only     Part-time Only     Full- or Part-time

When available for work?

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

Have you ever been convicted of a crime?     Yes     No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

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Do you have a driver's license?  Yes  No      Do you have current driver's insurance?  Yes  No

What is your means of transportation to work?

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_  Operator  Commercial (CDL)  Chauffeur  
 Expiration date \_\_\_\_\_

Have you had any accidents during the past three years?  Yes  No      How many? \_\_\_\_\_

Have you had any moving violations during the past three years?  Yes  No      How Many? \_\_\_\_\_

**OFFICE ONLY**

Typing  Yes  No \_\_\_\_\_ WPM      10-key  Yes  No      Word Processing  Yes  No \_\_\_\_\_ WPM

Personal Computer  Yes  No      PC  Mac       Other \_\_\_\_\_  
 Skills \_\_\_\_\_

Please list two references other than relatives or previous employers.

Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Telephone: (      ) -	Telephone: (      ) -

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
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**MILITARY**

Have you ever been in the Armed Forces?  Yes  No If yes, which branch?

Are you now a member of the National Guard or Reserves?  Yes  No

Specialty: Date entered: Discharge date: Nature of discharge:

**Work Experience**

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer: Address:	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code: Phone number: ( ) -		From: To:	Start: Final:
Your last job title:			

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.


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May we contact your present employer?  Yes  No

Did you complete this application yourself  Yes  No

If not, who did?

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**PLEASE READ CAREFULLY**

**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by San Jacinto County Appraisal District (hereinafter called the "District"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other District practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Chief Appraiser of the District. Both the undersigned and the San Jacinto County Appraisal District may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the District may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the District permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the District from any liability as a result of such contract.

I also understand that (1) the District has a drug and alcohol policy that provides for the option of pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the District may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the District, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the District shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the District is terminable at will for any reason by either party.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_

This District is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this District depends solely on your qualifications.

*Thank you for completing this application form and for your interest in our District.*

