APPLICATION FOR EMPLOYMENT

Jasper County, Texas

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Position Applied For:	Date o	f Application:
How Did You Learn About Us? AdvertisementEmployment Agency	Friend Relative	_Walk-In _Other
Last Name	First Name	Middle Name
Address	City, State	Zip Code
Telephone Number(s)		Social Security Number
Have you ever applied for employment witYesNo If Yes: Month a		n
Are you currently employed?		YesNo
May we contact your present employer?		YesNo
If you are under 18 years of age, can you preligibility to work?	rovide required proof of your	YesNo
Are you prevented from lawfully becoming of Visa or Immigration Status? Proof of eligibility to work in the United States will be	YesNo	
On what date would you be available for w	ork?	
Are you available to work:Full TimePart TimeShift Work		kTemporary
Are you currently on "lay off" status and su	abject to recall?	YesNo
Do you have a dependable means of transp	ortation to and from work?	YesNo
Have you been convicted of a felony within Conviction will not necessarily disqualify an applican If yes, please explain		YesNo
Are you a Veteran of the U.S. Military Serv	vice?YesNo	If Yes, Branch
Are you able to perform the essential functive reasonable accommodation?	ions of the job for which you are ap	oplying, with or without a
Are you related to any Jasper County elected	ed or appointed officials?	Yes No

Any applicant who is applying for a position whose major responsibilities include operating a motor vehicle must list all unexpired licenses and permits below.

State	License Number	Type and Restrictions	Expiration Date		
Any applicant who is	applying for a position	n on a Road & Bridge, P	recinct Crew please		
list all heavy equipmen		O .	1		
					
		ersonally completed, an			
this form in its entirety best of my knowledge		given herein are true an	d complete to the		
oest of my knowledge	•				
_		ntained in this application	on for employment as		
may be necessary in a	rriving at an employm	ent decision.			
I understand that shou	ld any statement I hav	e made prove false, mis	leading or erroneous,		
		on or discharge from Jas			
	submitting this application, I further understand that it becomes the property of Jasper County and will not be returned.				
County and will not be	e returned.				
-		on by the employer neit	-		
implies I will be offered employment. Jasper County operates under the legal doctrine of					
employment-at-will and, within requirements of state and federal law regarding employment, can dismiss an employee at any time, with or without notice, for any reason					
or no reason.	nss an employee at an	y time, with or without	notice, for any reason		
I understand that I am required to abide by all rules and regulations of the employer.					
Signature of Applican	t	-]	Date		

EDUCATION

EDUCATION	Name & Address of School	Course of Study	Diploma/Degree	
Elementary				
High School				
College				
Other (specify)				
EMPLOYMENT	complete full-time and part-time en	nployment records. Start with pro	esent or most recent employer.	
Company Name		Telephor	ne	
Address			d (State Month and Year) To	
Name of Supervisor		Weekly I	Weekly Pay Start Last	
State Job Title and Describe Your Work			Reason for Leaving	
Company Name		Telephor	ne	
Address			Employed (State Month and Year) From To_	
Name of Supervisor		Weekly I	Weekly Pay Start Last	
State Job Title and Descri	be Your Work	Reason fo	or Leaving	
Company Name		Telephor	ne	
Address		Employe From	d (State Month and Year) To	
Name of Supervisor		Weekly I Start	Pay	
State Job Title and Describe Your Work			or Leaving	
Company Name		Telephor	ne	
Address			d (State Month and Year)	
Name of Supervisor		Weekly I		
State Job Title and Describe Your Work			or Leaving	

Give the name, address and telephone number of three references who are not related to you and are not previous employers.				
NAME	ADDRESS	TELEPHONE NUMBER		
List professional, trade, business, or (You may exclude memberships wh disability or other protected status.)	hich would reveal sex, race, religion	on, national origin, age, ancestry, or		
Special Qualifications (Include acti awards.)	ve technical/professional licenses	and number, academic or professional		
If applying for an office/clerical position please fill in the following:				
TypingWPM	ShorthandWF	PM		
List all office machines that you kn	low how to operate.			
List all computer programs that you	ı know how to use.			