

It is the policy of Jefferson County not to discriminate in employment on the basis of race, religion, color, age, national origin, sex, marital status, veteran status or disability. To request a reasonable accommodation or other assistance, contact the Human Resources Department at (409) 839-2391 or, for the hearing impaired, through RELAY Texas at 1-800-735-2989 or mail your request to the address above.

Name		3 1 3 1			,		Date
Address	(Last)			(First)		(Middle)	
Telephone	(Stree	t)		(City)	Socia	(State) I Security Number	(Zip)
	(Persona	al)		(Alternate)			
Position Appli	ed For				Depar	tment	
Are you willing	g to work:	Full-time	🗌 Part-ti	me	Temporary	Shift work	
May we conta	ict your pres	ent employer:	🗌 Yes	🗌 No			
position and v	work back. Be thorougl	Attach additionant since your an	al sheets or r swers may c	esume to provi letermine whe	ide sufficient qualifyin ther or not you will b	<u>g experience data</u> . Pl be considered for a po	Begin with your present ease do not write "SEE sition. The "Reason for ested information may be
From	То	Job	Title		Salary	Emplo	yer
Supervisor Reason for Le	eaving/Want	ing to Leave	Phone No.		Employer Addres	s	
Description of	Work	-					
From	То	Job	Title		Salary	Emplo	yer
Supervisor			Phone No.		Employer Addres	S	
Reason for Le	eaving/Want	ing to Leave	-				
Description of	Work						
From	То	Job	Title		Salary	Emplo	yer
Supervisor			Phone No.		Employer Addres	s	
Reason for Le	eaving/Want	ing to Leave					
Description of	Work						
From	То	Job	Title		Salary	Emplo	yer
Supervisor			Phone No.		Employer Addres	S	
Reason for Le	eaving/Want	ing to Leave	-				
Description of	Work	-					

Please explain all periods of unemployment exceeding 9	0 days:
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EDUCATION: Did you graduate from high school?						
College-University-Trade						
Business-Correspondence School Name Location	No. Of Years	Major Area Of Study	Semester Hours	Degrees Granted		
(Applicants may be required to provide copie	s of transci	ipts and/or diplomas/certificates.)	I	<u>_</u>		
MILITARY SERVICE: Branch of Service may be required to provide a copy of form DI		List any relevant job-re				
)214)					
PERSONAL DATA: Please list any other names you have used ir	n connectio	n with employment or education				
Department	Have you previously worked for Jefferson County? Yes No If so, when? Department Position Supervisor					
Are you authorized to work in this country?						
Can you perform the essential/marginal functions of the job for which you are applying with or without a reasonable accommodation?						
Have you ever been convicted of or pled guilty or "no contest" to any offense during the past ten years? Yes No (Conviction may not necessarily disqualify the applicant)						
If Yes, List ALL such offenses and state date, name of Court and disposition. (You may omit minor traffic violations for which you paid a fine of \$100 or less)						
List all counties and states you have resided	in within th	e past 10 years.				
List all licenses/certifications/registrations you Type	ı hold (suc Number	h as Drivers, electrician, etc.)	Expiration Date			
Fype Number Expiration Date						
Specify equipment or office machines you op	erate:					
Are you related to any elected official or person in the employ of the County of Jefferson? Yes No Name Relationship						
Give the names and addresses of three person Name		n relatives, who have knowledge of y Address	your character, experie Occupation	nce or ability: Telephone		

List any additional experience and training you have had which in your opinion would qualify you for the position you seek:

(Example:	apprenticeships,	technical skills,	foreign	languages	spoken/written, etc	.)

Where applicable, would you be willing to accept compensatory time in lieu of overtime pay?	🗌 Yes	🗌 No

IMPORTANT

It is the responsibility of the applicant to read the following before signing:

APPLICANTS STATEMENT AND AGREEMENT

I certify that the answers given herein are true and complete. I understand that any falsification or willful omission made in my application, resume or interview(s) shall be sufficient cause for dismissal or refusal of employment, whenever discovered. I hereby authorize each former employer, whether given as a reference or not, to answer any questions and furnish any information sought by the County concerning any qualifications for employment. Depending on the department and position applied for, I understand that such investigation may include a full criminal history and FBI records check. I authorize investigation of all statements contained in this application for employment, and I release Jefferson County, its management and appointed and elected officials, and all third parties supplying information to the County from any and all liability, including liability caused by negligence, arising from reference and background checks conducted by or on behalf of the employer about me. Upon my termination, I authorize release of reference information regarding my employment and work record and release Jefferson County from any and all liability resulting from the release of such information. I also understand that this application is subject to the Open Records Act and may be released as a public document.

I understand that my employment is at the discretion of the Commissioners' Court or elected Department Head concerned, and that Jefferson County is an employment-at-will employer, which means that I may resign at any time and the County may terminate my employment at any time for any or no reason.

I understand that my employment is contingent upon successful completion of a conditional post-employment offer fitness for duty examination which will include a drug screen. This examination will be conducted by health care providers of the County's selection. I certify that I will fully and truthfully answer any questions asked by the health care providers or staff. I understand that a positive result from the drug screen will eliminate me from consideration from any County job for one year. I also, understand that, once employed, refusal to submit to such exams or a positive result on a drug/alcohol screen will be grounds for disciplinary action, which may include termination. While employed, if my department head requests, I will submit to additional physical examinations by health care providers of the County's selection for the purpose of determining my fitness for continued employment. If injured during the course of employment, I will promptly report such injury to my supervisor or department head. If medical treatment is necessary or requested, I will submit to treatment or examination by health care providers of the County's selection.

I understand and agree that if I am applying for a law enforcement or jail position, I will be required to comply with all the requirements of the Texas Commission on Law Enforcement Officer Standards and Education or other equivalent agency as required by the State. I further understand that any offer of employment is conditional upon satisfactorily completing all tests, including physical agility, to determine my fitness for this position.

I understand that some departments of the County have an Employee Handbook or policies which describe additional obligations, terms and conditions of employment. I agree to promptly familiarize myself with the terms of such documents and abide thereby, if applicable. I understand and agree that all benefits, programs, rules and policies of the County are subject to exceptions or change at any time, as decided by the County.

I certify that I have carefully read each provision of this application for employment and that I have been given an opportunity to ask questions concerning any provision which I do not fully understand. I understand the acceptance of this application by the employer neither expresses nor implies I will be offered employment. <u>This application must be signed</u>.

Signature

Please indicate your experience/skills/abilities in the following areas:

Typing Speed:	Skills:	Clerical Experience:	No. of Years
Below 40 wpm	☐ 10-key by touch	Receptionist	
🗌 40-49 wpm	Excel	🗌 Data Entry	
🗌 50-59 wpm	□ Word	Bookkeeping	
🗌 60-69 wpm	Word Perfect	Filing	
Above 70 wpm	Quattro Pro	Purchasing	
	PowerPoint	Secretarial	
	Other word processing	Records Management	
	Other software	Cashier (electronic)	
	AS/400 Mainframe	Other	
	Shorthand – speed		
	Court Reporting		
	Other:		

LABOR/MAINTENANCE/SKILLED CRAFT/EQUIPMENT OPERATION

Please indicate your experience/skills/abilities in the following areas:

No. of Years Exp.	Equipment Operated:	No. of years Exp.
	Water truck	
	Chip Spreader	
	Backhoe	
	Front End Loader	
	Bulldozer	
	Trackhoe	
	Tractor Trailer	
	Tractor with mower	
	Hydraulic excavator	
	Motor grader	
	Dump truck	
	Winch truck	
	Roller-packer	
	Pneumatic roller	
	☐ Other	
	No. of Years Exp.	Water truck Chip Spreader Backhoe Front End Loader Bulldozer Trackhoe Tractor Trailer Tractor with mower Hydraulic excavator Motor grader Dump truck Roller-packer Pneumatic roller

Jefferson County is an Equal Opportunity Employer. We request that you provide the following information which is used to study recruitment and employment patterns and to provide statistical data to federal compliance agencies. This information will be kept separate from your application and kept confidential and will in no way be used in consideration of your application for employment. **Completion of this portion of the form is voluntary.** Failure to provide this information will not jeopardize your opportunity for employment with Jefferson County.

Check the most appropriate blank:

Male	White (not Hispanic or Latino)
Female	American Indian or Alaska Native (not Hispanic or Latino)
	Black or African American (not Hispanic or Latino)
	Asian (not Hispanic or Latino)
	Hispanic or Latino
	Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)
	Two or More Races (not Hispanic or Latino)
	"Other"
If "Other", please specify:	

What led you to apply with the County:

Stopped in to check on available jobs	Texas Work Force Commission
Referred by a County employee	Newspaper or magazine advertisement
Other (please list)	