NACOGDOCHES COUNTY Human Resources 101 W Main St., Ste. 161 Nacogdoches, Texas 75961 (936) 560-7819 - OFFICE (936) 560-7810 - FAX www.co.nacogdoches.tx.us

APPLICATION FOR EMPLOYMENT

PLEASE READ THESE INSTRUCTIONS PRIOR TO COMPLETING THIS APPLICATION

- Thank you for your interest in employment opportunities with Nacogdoches County. Applications are accepted for posted positions only. If you are applying for more than one position YOU MUST COMPLETE A SEPARATE APPLICATION FOR EACH POSITION. Applications are only valid for the duration of each announcement and will be retained as County records for a period of two years from date of submission.
- 2. A resume and/or other documents will not be accepted in lieu of a completed application; however, you may submit a resume and/or additional documents with the application.
- 3. The information you provide on this application should clearly reflect your suitability to the position you are applying for. Your employment record, position-related education, skills, knowledge, abilities, qualifications, and experience will be evaluated based upon the information you provide in this application. Your application will be referred to the hiring department only if the minimum requirements as described in the Job Vacancy Notice are met. If you are selected for an interview, you will be contacted by the Human Resources Department or the office that posted the job.
- 4. In order for your application to be considered complete, you must answer all questions in this application. AN INCOMPLETE APPLICATION WILL NOT BE CONSIDERED. Any information that you provide in this application, accompanying documents, and/or give verbally to Nacogdoches County is subject to verification. Falsification, misrepresentation, or omissions of fact may be grounds for rejection of your application, or subsequent termination of employment if hired. A comprehensive pre-employment reference and background screening will be conducted on all applicants as permitted by law. Comments such as "See Resume" are not acceptable and may result in the application being considered incomplete.
- 5. If we are unable to consider your application, you will receive no further notice. Due to the large volume of employment inquiries received, we regret that we are unable to provide a more personal response to your application.
- 6. Nacogdoches County promotes a drug-free work environment and may require all applicants who receive a conditional offer of employment to successfully complete a drug screening test. Applicants whose employment requires a CDL will be required to successfully complete a drug and alcohol screening test. A physical examination, driving record, and/or criminal history check may also be required after a conditional offer has been extended.
- 7. This application and any accompanying document(s) submitted for consideration of employment become property of Nacogdoches County and will <u>not</u> be returned to the applicant.
- 8. This application becomes public record and is subject to disclosure in accordance with the Texas Government Code Ann. § 552-Public Information Act.
- 9. As mandated by the Immigration Reform and Control Act of 1986, all candidates offered employment must provide written proof, on or before the first day of employment, that establishes identity and eligibility to work in the United States. This is accomplished by completing the Employment Eligibility Verification Form (I-9) and producing acceptable documents including but not limited to United States Passport; State issued Driver's License; Social Security Card; Birth Certificate; other acceptable documents that establish identity and eligibility to work in the U.S.

Nacogdoches County uses E-Verify



Nacogdoches County Employment Application

Human Resources - 101 W Main, Ste 161 - Nacogdoches, TX 75961 (936) 560-7819 fax (936) 560-7810

Nacogdoches County is an EQUAL OPPORTUNITY Employer

It is the policy of Nacogdoches County not to discriminate in employment on the basis of race, religion, color, age, national origin, sex, pregnancy, marital status, veteran status, disability or genetic information. To request a reasonable accommodation or other assistance contact the Human Resources Department at (936) 560-7819, or, mail your request to the address above.

Name				Date	
(Last)		(First)		(MI)	
Address					
(Street)		(City)		(State)	(Zip)
Telephone			_ email		
(Primary)		(Alternate)			
Position Applied For			Dep	artment	
Are you willing to work:	 Full-time	'₽art-	-time †	Temporary	Shift work
May we contact your preser	nt employer:†	Yes	ħNo		

WORK EXPERIENCE:

List all employment (including military service) for at least the past 10 years. Begin with your present position and work back. Attach additional sheets or resume to provide sufficient qualifying experience data. Be thorough since your answers may determine whether or not you will be considered for a position. The "Reason for Leaving" and "Salary" must be completed. Any applicant providing unrequested information might be rejected.

(1) Present or Last Employer	Phone No.		
Address		Date Started	Date Left
Your Title	Salary	Supervisor's Name	3
Description of Work			
Reason for Leaving/Wanting to Leave			
(2) Previous Employer		Phone No.	
Address		Date Started	Date Left
Your Title	Salary	Supervisor's Name	;
Description of Work			
Reason for Leaving/Wanting to Leave			

(3) Previous Employer		Phone No.	
Address		Date Started	Date Left
Your Title	Salary	Supervisor's Name	
Description of Work			
Reason for Leaving/Wanting to Leave			
(4) Previous Employer		Phone N	0.
Address		Date Started	Date Left
Your Title	Salary	Supervisor's Name	
Description of Work			
Reason for Leaving/Wanting to Leave			

Please explain all periods of unemployment exceeding 90 days:

EDUCATION:

Did you gradu	uate from high sch	nool? Yes	No if no, last grade o	completed	_ GED Obtained? Yes	No
College, Unive	ersity					
Trade or Busin		No. Of	Major Area of Study	Semester	Degrees Earned	
Name	Location	Years		Hours		

(Applicants may be required to provide copies of transcripts and/or diplomas/certificates)

MILITARY SERVICE OF THE UNITED STATES:

Branch of Service ______ (you may be required to provide DD Form 214 for verification)

List any relevant job-related skills during military service _____

PERSONAL DATA:

Please list any other names y	ou have used in connection w	ith employm	ent or	education		
Have you previously worked f	or Nacogdoches County?	Yes	No	If yes, when?		
Department	Position			Supervisor		
Are you authorized to work in (Proof of citizenship or immigration			No			
Can you perform the essentia Yes No	I functions of the job for which	you are app	lying v	vith or without	reasonable a	ccommodation?
Have you ever been convicted act?* Yes	d, pled guilty, pled no contest, No	or, received	deferr	ed adjudicatio	n or probatior	for a criminal
If yes, list ALL such offenses a (You may omit minor traffic vio						
*A criminal conviction is not nece unintentional, will be grounds for County if hired.)						
List all counties and states yo	u have resided in within the pa	ast 10 years.				
Do you have a current drive Do you have a commercial of Has your driver's license ev If yes, explain:	driver's license? Ye	ked:	No Yes	No)	
List all licenses/certifications/r	egistrations you hold (such as	drivers, ele	ctriciar	i, etc.)		
Туре		Expira	tion Da	ate		
Туре		Expira	tion Da	ate		
Are you related by blood or m	arriage to any Nacogdoches (County emplo	oyee/o	fficial?	Yes	No
If yes Name	Where Em	ployed			Relationship)
REFERENCES: List the nam have knowledge of your cha			of thre	ee persons, c	other than rela	atives, who
Name	Address		hone	Number		ou know this erson?

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)

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

Applicant's name (please print)

I certify that the answers given herein on this application of employment with **Nacogdoches County** 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 understand that the information provided in my application, resume and interviews may be investigated, and 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 and driver's license check. I hereby release the County and all third parties supplying information to the County from all liability, including liability caused by negligence, arising from reference and background checks conducted by or on behalf of the employer about me. 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 Nacogdoches 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 legal reason or no reason.

I understand that Nacogdoches County may elect to pay compensation or cash overtime as allowed under Fair Labor Standards Act.

I understand that my employment is contingent upon successful completion of a conditional post-employment offer fitness for duty examination, which will (depending on position) include a drug screen or drug and alcohol screen. Health care providers of the County's selection will conduct this examination. 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 or alcohol screen will eliminate me from consideration from any County job for one year. While employed, if my department head requests, I will submit to additional job related 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 for a work related injury or illness is necessary or requested I will submit to treatment or examination by health care providers available through my employer's workers compensation alliance.

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.

This application must be signed.

Signature

Date _____

ADDITIONAL SKILLS:

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	
1 40-49 wpm	Excel	 Data Entry	
† 50-59 wpm	Word	Bookkeeping	
1 60-69 wpm	Power Point	Filing	
Above 70 wpm	Adobe Acrobat	Purchasing	
•	Other Software	Secretarial	
	Other Software	Records Management	Ť
	Shorthand – speed	Cashier	<u> </u>
	Court Reporting	Other	
	Other	 	

LABOR/MAINTENANCE/SKILLED CRAFT/EQUIPMENT OPERATION

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

Skill AreasNo. Of Years Exp.Concrete finishing	Equipment Operated Water Truck Chip Spreader Backhoe Front End Loader Bulldozer Track hoe Tractor Trailer Tractor With mower Hydraulic excavator Motor grader Dump truck Winch truck Roller-packer Pneumatic roller Other	No. Of Years Exp.
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Revised March 2016

Nacogdoches 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 Nacogdoches County.

Check the most appropriate blank:

† †	Male Female	White Black Hispanic	American Indian or Alaskan Native Asian or Pacific Islander Other:
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What led you to apply with the County:

Stopped in to check on available jobs Referral by a County Employee Other:_____ Texas Work Force Commission Nacogdoches County Website Newspaper Internet Search

Your Date of Birth: _____

Revised March 2016