Application for Employment

Pecos County

103 W. Callaghan Fort Stockton, TX 79735

Equal access to programs, services and employment is available to all persons. Those applicants requiring accommodation to the application and/or interview process should contact a representative of the Personnel Department.

PLEASE PRINT				
Position(s) applied	for		Date of applica	tion//
Referral Source	Advertisement Walk-in	☐ Employee ☐ Relative ☐ Private Employment Agency		ployment Agency
	Name of Source (if ap	pplicable)		
Name	THE REPORT OF THE PARTY OF THE			
Name	Last	First		Middle
Address Telephone Number	Street	City Social Securit	y Number	Zip Code
If necessary, best ti	ime to call you at home is	3		am ; pm
May we contact yo	u at work?			Yes No
If yes, work number	er and best time to call		()	am ; pm
If you are under 18	, can you furnish a work	permit?		Yes No
Have you filed an a	application here before?			Yes No
If yes, give date				1 1
Have you ever been	n employed here before?.			Yes No
If yes, give dates		From/	To	1
Are you legally elig	gible for employment in t	his country?		Yes No
Date available for v	work			1 1
Type of employment	nt desired	Time Part-Time Tem	porary Seasonal	☐ Educational Co-Op
Are you on lay-off	and subject to recall?			Yes No
Will you relocate if	f job requires it?	. Yes No Will you tr	avel if job requires it?	
Are you able to mee	et the attendance requirer	nents of the position?		Yes No
Will you work over	time if required?			Yes No
Have you ever been	bonded?			Yes No
Have you been con (Such conviction m	victed of a felony in the lay be relevant if job relat	ast seven (7) years?ed, but does not bar you from employ	ment.)	Yes No
If yes, please expla	iin			
Driver's license nur	mber (if job-related)			State

AN EQUAL OPPORTUNITY EMPLOYER

Employment History

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section below. Employer Telephone Dates Employed Summarize the nature of the work performed and job responsibilities: To Address Job Title Hourly Rate/Salary Starting Immediate Supervisor and Title Per Reason for Leaving Hourly Rate/Salary Final Yes □ No Later May we contact for reference? Telephone Employer Dates Employed Summarize the nature of the work performed and job responsibilities: From Address Hourly Rate/Salary Job Title Starting Per Immediate Supervisor and Title Hourly Rate/Salary Reason for Leaving Final Later Yes □ No May we contact for reference? Telephone Dates Employed Employer Summarize the nature of the work performed and job responsibilities: From Address Hourly Rate/Salary Job Title Starting Immediate Supervisor and Title Reason for Leaving Hourly Rate/Salary Final Yes ☐ No Later May we contact for reference? Telephone Employer Dates Employed Summarize the nature of the work performed and job responsibilities: From Address Hourly Rate/Salary Job Title Starting Per Immediate Supervisor and Title Hourly Rate/Salary Reason for Leaving Final Per □ No Yes Later May we contact for reference? Comments (including explanation of any gaps in employment) Skills and Qualifications - Summarize any special training, skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions for the position which you are applying

A. List last three (3) schools attended, starting v if any. D. Grade Point Average or Class Rank	vith most recent. B. List nu and E. Major and minor fi	imber of years co eld of study (if a	mpleted. C. Indica pplicable).	ate degree or dip	oloma earned,	
A. School	B. Years Completed	C. Degree Diploma	D. GPA Class Rank	E. Major	E. Minor	
List any foreign language(s) you know and che	ck the boxes that describe	your skill level.	mental and an experience and the second and the sec	Profession of the second second second		
Language	Speak Some Speak F		Fluently Read		Write	
References List name and telephone number of three busin			you and are not p	revious supervi	sors. If not	
applicable, list three school or personal reference Name	ces who are not related to	you.	Telephone		Years Known	
a a constitutiva (1970 a 1970 a porter en contrato ao de Abertanto), consecuenciam en desaste a consecuencia	an contract to the service and a contract of the service and the service and a contract of the	Area Code	NAMES OF TAXABLE PARTY OF THE OWNER, THE			
		Area Code				
		Area Code				
List professional, trade, business, or civic assoc national origin, age, color, disability or other pr		ld. (Exclude men	nberships which v	vould reveal sex	x, race, religion	
Organization		Offices Held				
			Commence of the commence of th		and the glottle land were transported	
List special accomplishments, publications, awa color, disability or other protected status.)	ards (exclude information			gion, national o	rigin, age,	
List any additional information you would like						

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of this person's need for an accommodation that would be required by the ADA.

Signature of Applicant	Date	/	/



