



## Caldwell, Comal and Hays Counties Community Supervision and Corrections Department

### EMPLOYMENT APPLICATION

The Caldwell, Comal and Hays Counties Community Supervision and Corrections Department is an equal opportunity employer and complies with the Americans with Disabilities Act. If you require an accommodation in order to complete this application, please request assistance.

(PLEASE PRINT)

Date of Application \_\_\_\_\_ Position(s) Applied For \_\_\_\_\_  
For \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Last First Middle Area Code

Address \_\_\_\_\_  
Number Street City State Zip Code

TX DL # \_\_\_\_\_

If employed and under 18 years of age, can you furnish a work permit?  Yes  No

Have you filed an application with this department before  Yes  No

If yes, give date: \_\_\_\_\_

Have you ever been employed with this department before?  Yes  No

If yes, give date: \_\_\_\_\_

Are you currently employed?  Yes  No

If yes, may we contact your present employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of visa or immigration status?  Yes  No

(Proof of citizenship or immigration status will be required upon employment.)

On what date would you be available for work? \_\_\_\_\_

When are you available to work?  Full Time  Part Time  Shift Work  Temporary

Have you ever pled to; received deferred adjudication or been convicted of a crime?  Yes  No

(Answering yes will not constitute an automatic bar to employment however, factors such as date of offense, seriousness and nature of offense, and position applied for will be considered.)

If yes, please explain:

If applicable, what type of education, training and work experience relevant to the job did you receive while in the military?

Branch: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

**EDUCATION:**

	High School				Vocational Training				College/ University				Graduate/ Professional			
<b>School Name</b>																
<b>Years Completed/ Degree</b>	9 <input type="checkbox"/>	10 <input type="checkbox"/>	11 <input type="checkbox"/>	12 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>Diploma/Degree</b>																
<b>Describe Course of Study</b>																
<b>Describe Specialized Training, Apprenticeship, Skills and Extra-Curricular Activities</b>																

Honors Received: \_\_\_\_\_

*State any additional information you feel may be helpful to us in considering your application.*

## APPLICATION FOR EMPLOYMENT

List professional, trade, business or civic activities and offices held. (You may exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status.)

Give name, address and telephone numbers of three references who are not related to you and are not previous employers.

1. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_
  
2. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_
  
3. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_

### EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. (You may exclude organization names that would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status.)

<b>1.</b>	<b>Employer:</b>		<b>Dates Employed</b>	
	<b>Address:</b>		<b>From:</b>	<b>To:</b>
	<b>Phone Number:</b>		<b>Hourly Rate/Salary</b>	
	<b>Job Title:</b>	<b>Supervisor:</b>	<b>Starting:</b>	<b>Final:</b>
	<b>Work Performed:</b>			
	<b>Reason for Leaving:</b>			

<b>2.</b>	<b>Employer:</b>		<b>Dates Employed</b>	
	<b>Address:</b>		<b>From:</b>	<b>To:</b>
	<b>Phone Number:</b>		<b>Hourly Rate/Salary</b>	
	<b>Job Title:</b>	<b>Supervisor:</b>	<b>Starting:</b>	<b>Final:</b>
	<b>Work Performed:</b>			
	<b>Reason for Leaving:</b>			

<b>3.</b>	<b>Employer:</b>		<b>Dates Employed</b>	
	<b>Address:</b>		<b>From:</b>	<b>To:</b>
	<b>Phone Number:</b>		<b>Hourly Rate/Salary</b>	
	<b>Job Title:</b>	<b>Supervisor:</b>	<b>Starting:</b>	<b>Final:</b>
	<b>Work Performed:</b>			
	<b>Reason for Leaving:</b>			

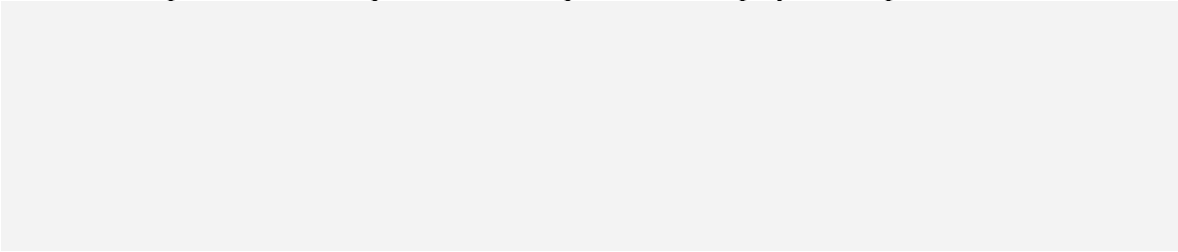
<b>4.</b>	<b>Employer:</b>		<b>Dates Employed</b>	
	<b>Address:</b>		<b>From:</b>	<b>To:</b>
	<b>Phone Number:</b>		<b>Hourly Rate/Salary</b>	
	<b>Job Title:</b>	<b>Supervisor:</b>	<b>Starting:</b>	<b>Final:</b>
	<b>Work Performed:</b>			
	<b>Reason for Leaving:</b>			

*If you need additional space, please continue on a separate sheet of paper.*

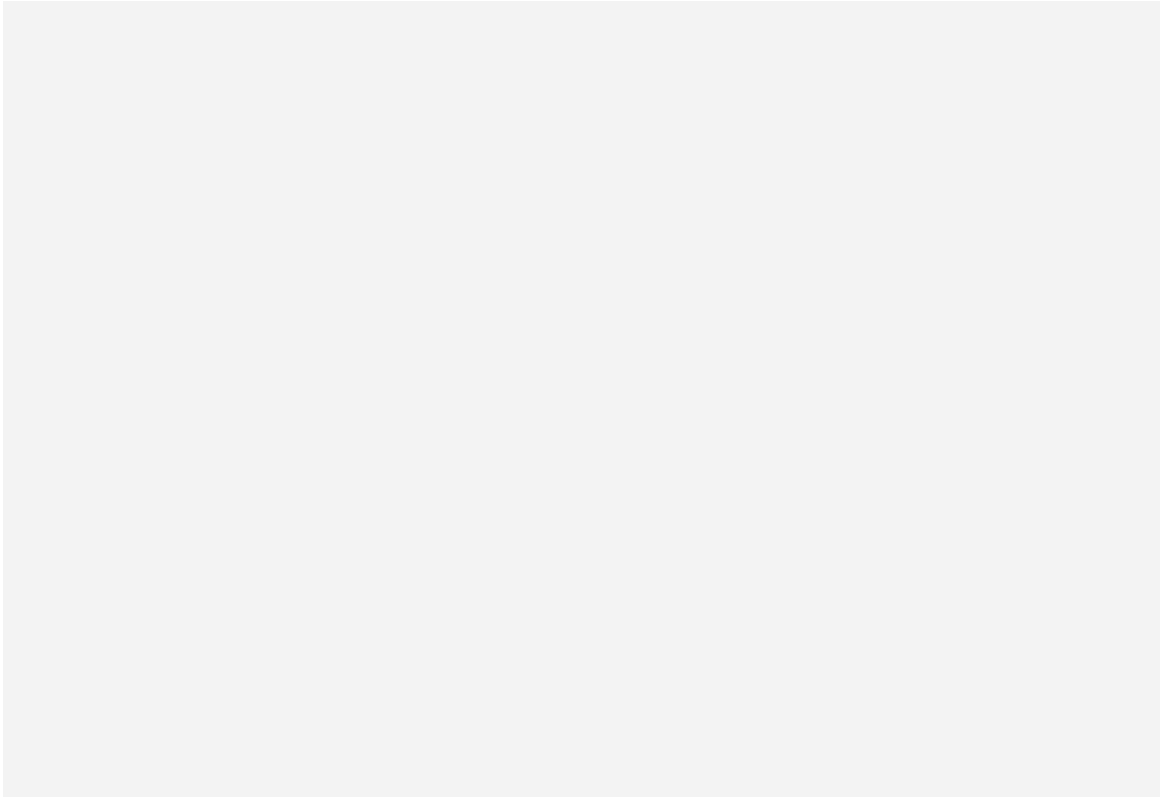
## APPLICATION FOR EMPLOYMENT

### **Special Skills and Qualifications**

Summarize special skills and qualifications acquired from employment experience or education.



### **NOTES:**



# APPLICATION FOR EMPLOYMENT

## Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect may be sufficient cause to cancel consideration of this application.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 90 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract.

I understand employment consideration with this department requires a background investigation including any criminal history, driver license history and urinalysis for the testing of illicit substances.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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Signature of Applicant

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Date