

DRAINAGE DISTRICT NO. 3

Jefferson County, Texas



EMPLOYMENT APPLICATION

P.O. Box 388 ♦ 24460 Hwy 124 ♦ Hamshire, TX 77622 ♦ (409) 243-3495 ♦ drainage3@jcdd3.org

APPLICANT INFORMATION			
Last Name		First	M.I. Date
Street Address			Apartment/Unit #
City		State	ZIP
Phone		E-mail Address	
Date Available	Social Security No.		Desired Salary
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

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

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

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Employment Application

PREVIOUS EMPLOYMENT:

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. ***Please do not write "SEE RESUME".*** 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. (Attach additional sheets if needed.) Any applicant providing unrequested information may be rejected.

Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are you willing to work:		<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Shift work		
Please explain all periods of unemployment exceeding 90 days:							
MILITARY SERVICE							
Branch				From			To
Rank at Discharge					Type of Discharge		
If other than honorable, explain							

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Employment Application

PERSONAL DATA					
List any other names you have used in connection with employment or education:					
Have you previously worked for Drainage District No. 3?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have you previously worked for Jefferson County?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Department:		Position:		Supervisor:	
Are you authorized to work in this country?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	(Proof of citizenship or immigration status will be required upon employment)		
Can you perform the essential/marginal functions of the job for which you are applying with or without a reasonable accommodation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Have you ever been convicted of or pled guilty or "no contest" to any offense during the past ten years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
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 the past 10 years.					
List all licenses/certifications/registrations you hold (such as Drivers, electricians, applicators, etc.)					
Type:		Number:		Expiration Date:	
Type:		Number:		Expiration Date:	
Type:		Number:		Expiration Date:	
Specify equipment or office machines you operate:					
Are you related to any elected official or person in the employ of Drainage District No3 or Jefferson County?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES, complete the following:					
Name:		Where Employed:		Relationship:	
Where applicable, would you be willing to accept compensatory time in lieu of overtime pay?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		

EXPERIENCE / SKILLS

Please indicate your experience/skills in the following areas:

TYPING SPEED:

- Below 40 wpm
- 40-49 wpm
- 50-59 wpm
- 60-69 wpm
- Above 70 wpm

SKILLS:

- 10 Key by touch
- Excel
- Word
- Word Perfect
- Quattro Pro
- Power Point
- Other word processing _____
- Other Software _____
- AS/400 Mainframe
- Shorthand – speed _____
- Court Reporting
- Other: _____

CLERICAL EXPERIENCE:

- Receptionist _____
- Data Entry _____
- Bookkeeping _____
- Filing _____
- Purchasing _____
- Secretarial _____
- Records Management _____
- Cashier (electronic) _____
- Other (explain) _____

NO. OF YEARS:

LABOR/MAINTENANCE/SKILLED CRAFT/EQUIPMENT OPERATION

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

SKILL AREAS:

- | | |
|--------------------------------------------------------|-------|
| <input type="checkbox"/> Concrete Finishing | _____ |
| <input type="checkbox"/> Welding | _____ |
| <input type="checkbox"/> Asphalt work | _____ |
| <input type="checkbox"/> Surveying | _____ |
| <input type="checkbox"/> Setting Grades | _____ |
| <input type="checkbox"/> Flagging | _____ |
| <input type="checkbox"/> Plumbing | _____ |
| <input type="checkbox"/> Painting | _____ |
| <input type="checkbox"/> Carpentry | _____ |
| <input type="checkbox"/> Electrical | _____ |
| <input type="checkbox"/> HVAC | _____ |
| <input type="checkbox"/> Auto Mechanic | _____ |
| <input type="checkbox"/> Heavy Equip Mechanic | _____ |
| <input type="checkbox"/> Sign Maintenance | _____ |
| <input type="checkbox"/> Groundskeeping/Landscaping | _____ |
| <input type="checkbox"/> Road Maintenance/Construction | _____ |
| <input type="checkbox"/> Other: _____ | _____ |

No. of Years Exp.

Equipment Operated:

No. of Years Experience

- | | |
|----------------------------------------------|-------|
| <input type="checkbox"/> Water Truck | _____ |
| <input type="checkbox"/> Chip Spreader | _____ |
| <input type="checkbox"/> Backhoe | _____ |
| <input type="checkbox"/> Front End Loader | _____ |
| <input type="checkbox"/> Bulldozer | _____ |
| <input type="checkbox"/> Trackhoe | _____ |
| <input type="checkbox"/> Tractor Trailer | _____ |
| <input type="checkbox"/> Tractor w/Mower | _____ |
| <input type="checkbox"/> Hydraulic Excavator | _____ |
| <input type="checkbox"/> Motor Grader | _____ |
| <input type="checkbox"/> Dump Truck | _____ |
| <input type="checkbox"/> Winch Truck | _____ |
| <input type="checkbox"/> Roller-packer | _____ |
| <input type="checkbox"/> Pneumatic Roller | _____ |
| <input type="checkbox"/> Spray Rig | _____ |
| <input type="checkbox"/> Other: _____ | _____ |

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.) _____

DISCLAIMER AND SIGNATURE

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 District concerning any qualifications for employment. Depending on the department and position applied for, I understand that such investigation may include a full criminal history, FBI records check and motor vehicle report. I authorize investigation of all statements contained in this application for employment, and I release Jefferson County Drainage District No. 3, its management and appointed and elected officials, and all third parties supplying information to the District 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 Drainage District No. 3 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 Board of Commissioners or elected Department head concerned, and that Jefferson County Drainage District No. 3 is an employment -at- will employer, which means that I may resign at any time and the District 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 District'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 District 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 request, I will submit to additional physical examinations by health care providers of the District'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 District's selection.

I understand that the District has an Employee Handbook and 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 District are subject to exceptions or change at any time, as decided by the District.

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. **THIS APPLICATION MUST BE SIGNED.**

RETURN APPLICATION TO:

Jefferson County Drainage District No. 3

P.O. Box 120
24420 Hwy 124
Hamshire, TX 77622
Phone: (409) 243-3495
Fax: (409) 243-3158
Email: jcdd3@windstream.net

Signature	Date
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Equal Employment Opportunity Form

Jefferson County Drainage District No. 3 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 Drainage District No. 3

Applicant Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Social Security Number: _____

Position Applied for: _____

Voluntary Information

This information is being requested in accordance with federal regulations. The information is voluntary and will not be used when considering you for employment with our company.

Racial or Ethnic Group

- American Indian/Alaskan Asian/Pacific Islander Black/African American
- Hispanic/Latino White/Caucasian Other

Gender

- Female Male

Military Service

- Pre-Vietnam Era Vietnam Era
- Post-Vietnam Era Disabled Veteran

How did you hear about this position?

- Newspaper Company Employee Professional Publication
- Job Fair Placement Office Web Site
- Other _____