

Delta County Appraisal District 1280 W Dallas Ave PO Box 47 Cooper, TX 75432 (903)395-4118

Employment Application

Applicant Information							
Full Name:	Last	First			M.I.	Date:	
Address:	Street Address					Apartment/Unit :	#
	City				State	ZIP Code	
Phone:			Email_				
Date Available:Texas Driver License:			Desired Salary:				
Position App	olied for:						
Are you currently available for work? YES NO				Are you willing to travel if required to obtain YES NO credentialing if your position requires it?			
Have you ev	ver been involuntarily terr	minated from a posito	n of emplo	oyment′	? If so, please exp	plain:	
or subjected felony charge explain in copage, giving offense, nar	ver been convicted of a feat to deferred adjudication ge? If your answer is "Yestoncise detail on a separary dates and nature of the me and location of the cotion of the case(s).	on a s", te					
Do you hold a current RPA, RTA or RTC designation from the Texas Department of Licensing and Regulations (TDLR)? If so give your TDLR number:							
		Edu	ucation				
High School	l:	Addres	SS:				
From:	To:	Did you graduat	YES e?	NO	Diploma:		
College:		Addres					
From:	To:	Did you graduat	YES e?	NO	Degree:		
Other:		Addres					
From:	To:	Did you graduat	YES =	NO 🗆	Degree:		

References							
Please list three professional references.							
Full Name:	Relationship:						
Company:	Dhana						
Address:							
Full Name:	Relationship:						
Company:	Di						
Address:							
Full Name:	Relationship:						
Company:	DI.						
Address:							
Previou	s Employment						
Company:	D.						
Address:							
Job Title: Startin	g Salary: <u>\$</u> Ending Salary: <u>\$</u>						
Responsibilities:							
From: To:	Reason for Leaving:						
May we contact your previous supervisor for a reference	YES NO ?						
Company:	Phone:						
Address:	Supervisor						
Job Title: Startin	ng Salary: <u>\$</u> Ending Salary: <u>\$</u>						
Responsibilities:							
From: To:	Reason for Leaving:						
May we contact your previous supervisor for a reference	YES NO						

	Current/Previo	us Emplo	oyment	
Compony				Dhono
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting S	Ending Salary:		
Responsibil	ities:			
From:	To:	Reason f	for Leaving:	
May we con	ntact your previous supervisor for a reference?	YES	NO 🗆	
Company:				
Address:				
Job Title:	Starting Salary:\$			
Responsibil	ities:			
From:	To:	Reason f	for Leaving:	
•	stact your previous supervisor for a reference?	YES	NO 🗆	
Company:				Phone:
Address:				
Job Title:	Starting Salary:			Ending Salary:
Responsibil	ities:			
From:	To:	Reason f	for Leaving:	
May we con	ntact your previous supervisor for a reference?	YES	NO 🗆	

Military Service					
Branch:	From: To:				
Rank at	Discharge: Type of Discharge:				
If other	than honorable, explain:				
••					
	Disclaimer and Signature				
1.	I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination.				
2.	I am at least 18 years of age.				
3.	I understand that I must have graduated high school or possess a high school equivalency (G.E.D.).				
4.	I understand that I must be a Texas resident.				
5.	I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S.				
6.	I understand that the Delta County Appraisal District may check with the Texas Department of Public Safety, conduct a credit check and a background check for any criminal history in accordance with applicable statues.				
7.	I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you.				
8.	I agree to undergo any type of drug and/or alcohol testing that the Delta County Appraisal District may require at any time for any reason.				
9.	I understand that submission of this application does not necessarily mean that I will be hired and if I am hired my employment is "at will", and either I or the Delta County Appraisal District may terminate my employment at any time, with or without notice or reason.				
This application must be signed					

Date:_____

Signature: