



EMPLOYMENT APPLICATION

DATE:

Fill out application form completely. If questions are not applicable, enter "NA." **Do not leave questions blank.** Be sure to sign when completed. The Rio Grande Council of Governments is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.

Resumes will not be accepted in lieu of application, unless specifically stated in the job vacancy notice. This application becomes public record and is subject to disclosure.

PERSONAL INFORMATION

| | | |
|---|---------------------------|---|
| Name (Last, First, Middle) | | |
| Address: | Telephone Number: | |
| | Alternate Phone Number: | |
| City/State/Zip Code | Email Address: | |
| Position Applying for: | | |
| Date Available: | | |
| Minimum Acceptable Salary: | | |
| Are you legally authorized to work in the United States: <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Are you applying for: <input type="checkbox"/> F/T <input type="checkbox"/> P/T <input type="checkbox"/> Temp | | What days are you unable to work: |
| Are you willing to travel: <input type="checkbox"/> Yes <input type="checkbox"/> No | Current driver's license: | May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No |

EDUCATION/TRAINING

| Have you obtained a high school diploma or GED certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
|--|-----------------------------|------------------------|-------------------------------------|
| College/University and Location | Major/Minor Fields of Study | Type of Diploma/Degree | Expected Date and/or Date Graduated |
| | | | |
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EMPLOYMENT HISTORY – Describe all work experience in detail, beginning with your current or most recent job. Include military service (indicate rank), internships, and job-related volunteer work, if applicable.

| | | |
|---------------------|---------------------------|-------------------|
| Dates: From/To | Present or Last Employer: | Address: |
| | | |
| Title and Duties: | | |
| | | |
| Reason for Leaving: | Supervisor's Name | Telephone Number: |
| | | |
| Dates: From/To | Present or Last Employer: | Address: |
| | | |
| Title and Duties: | | |
| | | |
| Reason for Leaving: | Supervisor's Name | Telephone Number: |
| | | |
| Dates: From/To | Present or Last Employer: | Address: |
| | | |
| Title and Duties: | | |
| | | |
| Reason for Leaving: | Supervisor's Name | Telephone Number: |
| | | |



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| | | |
|---------------------|---------------------------|-------------------|
| Dates: From/To | Present or Last Employer: | Address: |
| | | |
| Title and Duties: | | |
| | | |
| Reason for Leaving: | Supervisor's Name | Telephone Number: |
| | | |

If needed, attach additional sheets, using the same format as on the application. Resumes may be attached to provide additional information.

SPECIAL TRAINING/SKILLS/QUALIFICATIONS

| |
|--|
| List all job related training or skill you possess and believe relevant to the position you seek, such as computer skills, fluency in a language, etc. |
|--|

BACKGROUND INFORMATION

| |
|---|
| Have you even been convicted of a felony or subjected to deferred adjudication on a felony charge? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "yes", what charges? |
| Where convicted? |
| Date of Conviction: |
| A conviction may not disqualify you, but a false statement will. |



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REFERENCES – Give the Names of Three Persons Not Related to You

| Name: | Address: | Telephone: | Occupation: |
|-------|----------|------------|-------------|
| | | | |
| | | | |
| | | | |
| | | | |

RELATIVES

To your knowledge, do you have any relatives working at this agency?

Yes No

I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for employment consideration and, if I am hired, may be grounds for termination at a later date. I understand that any information I give may be investigated as allowed by law. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S. I understand that the State of Texas requires all males who are 18 through 25 are required to register with the Selective Service, to present either proof of registration or exemption from registration upon hire.

I consent to the release of information about my ability and employment history by employers, schools, law enforcement agencies, and other individuals and I release all such parties from liability from any damages which may result from furnishing such information to you. This consent shall continue to be effective during my employment if I am hired. I certify that to the best of my knowledge and belief all of the statements contained herein and on my attachments are true, correct, complete, and made in good faith.

Signature:

Date: