



**GREGG COUNTY
EMPLOYMENT APPLICATION**

Please type or print all answers in ink

PERSONAL DATA

**GREGG COUNTY
PERSONNEL OFFICE**

101 East Methvin, Suite 109
Longview, Texas 75601
903/237-2569

Position Applying For: _____ Date: _____

1. Name: _____ Social Security #: ____/____/____
Last First Middle

2. Address: _____
Number and Street

_____ City _____ County _____ State _____ Zip

3. Phone: Home: _____ Other: _____
Area Code Number Area Code Number

4. Are you legally authorized to work in the U.S.? YES _____ NO _____ If no please complete the following:
 Country of which you are a citizen: _____ Type Visa: _____ Expiration Date: _____
 Alien Registration Number: _____ Date Issued: _____

Education and Training

5.

Circle Highest Grade Completed: seven or less 8 9 10 11 12		Did you Graduate? Yes ___ No ___ Year ____		High School Equivalency Test: Date Passed: _____ State Awarded: _____				
Type of School	School Name City & State	Type of Diploma or Degree Awarded	Major Field	Grade Average	Dates Attended			
					From Mo Yr	To Mo Yr		
Last High School Attended								
Colleges Attended								
Other (Military, Trade, Business, Secretarial, etc.)								
Special Qualifications (Include active technical/professional licenses and numbers, academic or professional awards.)								
Foreign Languages Spoken or Read:			Clerical/Machine Skills: Typing _____ W.P.M. Shorthand _____ W.P.M. Other: _____					

Employment History

6.

In the space provided below, give your employment history, beginning with your present or most recent employer and list all positions held, including military, part-time, summer, and any periods of unemployment. An explanation of any period of unemployment must be included under item No. 14. If more space is required, please attach an additional sheet utilizing the same format. This page must be completed. The inclusion of a resume is welcomed but does not replace filling out this page completely.

a. Name of Employer: _____	From: _____ / _____ / _____	To: _____ / _____ / _____
Address: _____	mo yr	mo yr
Phone: _____	Salary Beginning: _____ Per Month	Present: _____ Per Month
Area Code Number		
Job Title: _____	Name of Supervisor: _____	Title of Supervisor: _____
Reason(s) For Leaving: _____	May We Contact? Yes _____ No _____	
- Briefly describe the nature and duties of your position -		

b. Name of Employer: _____	From: _____ / _____ / _____	To: _____ / _____ / _____
Address: _____	mo yr	mo yr
Phone: _____	Salary Beginning: _____ Per Month	Ending: _____ Per Month
Area Code Number		
Job Title: _____	Name of Supervisor: _____	Title of Supervisor: _____
Reason(s) For Leaving: _____	May We Contact? Yes _____ No _____	
- Briefly describe the nature and duties of your position -		

c. Name of Employer: _____	From: _____ / _____ / _____	To: _____ / _____ / _____
Address: _____	mo yr	mo yr
Phone: _____	Salary Beginning: _____ Per Month	Ending: _____ Per Month
Area Code Number		
Job Title: _____	Name of Supervisor: _____	Title of Supervisor: _____
Reason(s) For Leaving: _____	May We Contact? Yes _____ No _____	
- Briefly describe the nature and duties of your position -		

d. Name of Employer: _____	From: _____ / _____ / _____	To: _____ / _____ / _____
Address: _____	mo yr	mo yr
Phone: _____	Salary Beginning: _____ Per Month	Ending: _____ Per Month
Area Code Number		
Job Title: _____	Name of Supervisor: _____	Title of Supervisor: _____
Reason(s) For Leaving: _____	May We Contact? Yes _____ No _____	
- Briefly describe the nature and duties of your position -		

Have you ever served in the U.S. Armed Forces? Yes _____ No _____		Present Selective Service Classification:	
Branch of Service:	Active Duty: From: _____ To: _____		Rank upon separation/discharge:
Are you presently a member of the active reserves? Yes _____ No _____			

8.

List three Persons who are not related to you by blood or marriage who have not already been listed in item no. 6 who can comment on your education and/or work experience:			
Full Name	Complete Home Address	Occupation	Phone
			Office: _____ Home: _____
			Office: _____ Home: _____
			Office: _____ Home: _____

9. Do you have any relatives that are employee(s) of Gregg County? Yes _____ No _____

If yes, please list names and indicate relationship under Item No. 14.

10. If the answer to any of the questions A, B, C, or D below are yes, please explain in section 14 on the back of this application.

A. Have you ever been convicted of a Criminal Offense other than a traffic violation? Yes _____ No _____

B. Have you ever received a deferred adjudication or a deferred sentence? Yes _____ No _____

C. Are you currently under indictment or any other legal accusation, other than a traffic violation?

Yes _____ No _____

D. Have you ever pleaded guilty or no contest to an indictment or any other legal accusation, other than for a traffic violation? Yes _____ No _____

As a policy, a yes answer to these questions is not an automatic elimination from employment consideration. Each instance will be reviewed individually by the Personnel Director or a designate as to the type and nature of the offense and its relatability to the position for which applied.

11. Please indicate source from which you learned of this position: _____

12. Has your privilege to operate a motor vehicle ever been denied, suspended or revoked? Yes _____ No _____

If answer is Yes, give complete details under Item No. 14.

13. Any applicant who is applying for a position whose major responsibilities include operating a motor vehicle must list a unexpired licenses and permits.

State	License Number	Type (Class, Chauffeur, Restrictions)	Expiration Date

An Equal Opportunity Employer

14. Space for Detailed Answers to other Questions

Item #	Write in Left Column Number to Which Answers Apply (If more space is required, please attach an additional sheet utilizing the same format.)

EEO INFORMATION

It is the Policy of Gregg County to make all employment and personnel decisions without regard to Race, Creed, Color, Sex, Religion, National Origin, Age or Disability. The Policy of Gregg County is to be in compliance with all Federal, State and Local laws pertaining to Equal Employment Opportunity and the ADA.

We thank you for making application for employment with Gregg County.

I, the undersigned, certify that I have read, personally completed, and fully comprehend this form in its entirety and that the information herein provided is true and complete to the best of my knowledge. I understand that should any statement I have made prove false, misleading or erroneous, it may result in the rejection of my application or discharge from Gregg County. In submitting this application, I further understand that it becomes the property of Gregg County and will not be returned.

(Signature of Applicant)

(Date Signed)

**An Equal Opportunity Employer
(M/F/H/V)**

G R E G G C O U N T Y

AUTHORIZATION TO RELEASE INFORMATION

This is to inform you that as part of our procedure for processing your employment application a report may be made in which information is obtained through prior employers, supervisors, and references you have given on your employment application. You have the right to make written request, at anytime, for complete disclosure of all contents of your personnel file.

I, _____, Social Security No. _____,
Hereby authorize Gregg County, Texas and its agents to contact any person or entity who may furnish Gregg County any information concerning my previous employment, and criminal and driving records, for the purpose of confirming the information which may be material to my qualifications for employment.

I authorize all such persons and entities to release all information they may have which may be material to my qualifications for employment.

I hereby release Gregg County, its agents, and any person or entity which provides information pursuant to this Authorization to Release Information from any and all liability associated with the release and use of such information.

Applicant Signature: _____

Date: _____