



WILBARGER COUNTY
Employment Application

APPLICANT INFORMATION													
Last Name				First				M.I.					
Street Address						Apartment/Unit #							
City				State				ZIP					
Phone				E-mail Address									
Date Available				Social Security No.									
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			
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													

PREVIOUS EMPLOYMENT

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"/>		

ADDITIONAL SKILLS (Use additional sheet if needed)

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature				Date	
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TO: IDENTIFICATION AND CRIMINAL RECORDS

FROM: JUVENILE PROBATION DEPARTMENT

SUBJECT: REQUEST FOR (CCH) COMPUTERIZED CRIMINAL HISTORY

NAME _____ SO# _____
SEX _____ RACE _____ DOB _____
SS# _____ DL# _____ STATE _____

1. The following are needed for criminal histories: NAME, RACE, SEX, DOB. If you do not have these, we will not be able to do a Criminal History. You may also provide SS# if available.
2. Please give our operators as much advance notice as possible because in most cases the return time is based on circumstances beyond our control.
3. Please sign this slip in the space provided below which will indicate in our records that you have received the service requested.

Date & Time Requested _____

Date & Time Returned _____

Requested by (Print name) _____

Requested for:

_____ Employment

_____ Juvenile Court

Case Number(s) _____

Cause Number _____

I give my consent to let the 46th Judicial District run a criminal history report on me for employment purposes.

Printed Name

Date

Signature