

ROBERTSON COUNTY SHERIFF'S OFFICE JOB APPLICATION INSTRUCTIONS

Please read the following instructions before completing the application for employment.

- We appreciate your interest in the employment opportunities at the Robertson County Sheriff's Office.
- Please complete application in neat, legible print using blue or black ink. In order for your application to be considered complete, you must answer <u>all</u> questions in this application. A resume and/or other documents will <u>not</u> be accepted in lieu of a complete application; however, you may submit additional documents with the application. Comments such as "See Resume" are not acceptable and may result in the application being considered incomplete.
- Any information you provide in this application, accompanying documents, and/or verbal submissions to Robertson County Sheriff's Office is subject to verification.
 Falsification, misrepresentation, or omissions of fact may be grounds for rejection of your application, or subsequent termination of employment if hired.
 Employment references and criminal history check will be required.
- This application and any accompanying document(s) submitted for consideration of employment become property of Robertson County Sheriff's Office and will *not* be returned to the applicant.
- Completed applications may be hand-delivered, mailed, or faxed to the prospective agency as indicated in the job posting. Note: Positions posted with a closing date of "until filled" are subject to close at any time.



ROBERTSON COUNTY SHERIFF'S OFFICE JOB APPLICATION FORM

AN EQUAL OPPORTUNITY EMPLOYER

It is Robertson County's policy to comply fully with all federal, state and local equal opportunity laws. We provide equal employment and advancement opportunities for all persons regardless of race, creed, sex, national origin, age, religion, disability, marital status, sexual orientation or any other classification protected by law. Robertson County considers employment applicants solely on the basis of qualifications for the job.

Position Applied for:			
Name:			
Last	First	M	iddle
Address:Street		Chata	7:- 0-1-
Street	City	State	Zip Code
Home Phone:	Cell Phone:		
Social Security Number:		Date of Birth:	
E-mail Address:			
Check each type of work you wi	ll accept: _Full Time	_Part Time	
Minimum acceptable salary: \$	per	_	
Are you eligible to work in the U	Inited States:Yes	No	
Has Bond ever been refused:	YesNo		
Have you ever been employed h	ere before?Yes	No Date:	
Are you a relative of any Robert If yes, identify and describe the rela			
Do you speak a language other t	· · ·		
If yes, what language(s) do you spe			
If offered employment, date you	·		
Are you wiling to travel:Ye	s No		
Have you ever been convicted o	.		
	t or niead gillity or no conte	est to a criminal	ottense otner than

*You may omit convictions for minor traffic violations, unless the position requires the operation of a motor vehicle. Conviction will not result in your automatic disqualification for employment. The seriousness of the crime, the date of the conviction and the relevance of the crime to the position you are applying will be

EDUCATION HISTORY

Type of School	Name of School	Location	Number of Years Completed	Major & Degree (If applicable)
High School				
College				
Business or Trade School				
Professional School				
Graduate School				

DRIVERS LICENSE INFORMATION

If the position for which you are applying requires the operation of a motor vehicle, do you have a current Texas Driver's License? □Yes □No **Please list any restriction and endorsements:
Type of License: Class C CDL License Number:
SKILLS AND QUALIFICATIONS
Summarize any training skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

PROFESSIONAL LICENSES/CERTIFICATIONS

If the position for which you are applying requires possession of a license or certification, please provide the information:

Type of License or Certification	Date Issued	Registration Number	State	Expires MO/YR

EMPLOYMENT HISTORY

Start with your present or most recent employer and work backward. If you need additional space, please continue on separate sheet(s).

May we contact your present employer? F Yes F No

Employer:	Dates: From: To:
Address:	Summary of Job Duties:
Phone Number:	
Job Title:	
Supervisor:	
Reason for Leaving:	Starting Salary: Ending Salary:
Employer	Dates: From: To:
Employer:	
Address:	Summary of Job Duties:
Phone Number:	
Job Title:	
Supervisor:	
Reason for Leaving:	Starting Salary: Ending Salary:
F	Dates: From: To:
Employer:	Dates. From.
Address:	Summary of Job Duties:
Phone Number:	
Job Title:	
Supervisor:	
Reason for Leaving:	Starting Salary: Ending Salary:
Function	Dates: From: To:
Employer:	Dates: From: 10:
Address:	Summary of Job Duties:
Phone Number:	
Job Title:	
Supervisor:	
Reason for Leaving:	Starting Salary: Ending Salary:

REFERENCES

position you are applying.	, who are qualified to describe your capabilities for the
(1.) Name:	Phone:
Address:	Occupation:
(2.) Name:	Phone:
Address:	Occupation:
(3.) Name:	Phone:
Address:	Occupation:
have about my employment. I understa evaluating my application for employm verifying my identity and eligibility for e interview, true copies of all degrees, ce	e any and all employment records and other information it may and that the information will be used for the purpose of tent and that I am responsible for providing legal documents employment. In addition, I understand that, if selected for an artificates, or licenses listed on this application will be required made. A photocopy of this authorization shall be as valid as
understand that by providing my e-macommunications.	ail address, I am electing to receive electronic
of the date of payment of my wages an	y employment is for no definite period and may, regardless ad salary, be terminated at any time, and that intentional r during the interview process will subject me to immediate
I also understand that only written repr	resentations and promises of this employer will be enforceable.
By signing this application, I give permine for criminal conviction records.	ssion/authorization to Robertson County to check
Signature of Applicant:	Date:
Subscribed and sworn to before me	e this day of,
(seal)	Notary Public My Commission Expires