Mason County, Texas – An Equal Opportunity Employer

First Name	Middle Initial		FFICE USE ONLY	
		Received		<u>IIII(Id15</u>
		Reviewed Hired		
State	Zip Code			
ed by Mason County? _	Yes (Date	2:)	No
ted to any employee or				
	State Yed by Mason County? _	State Zip Code Zip Code red by Mason County? Yes (Date ted to any employee or Elected Official	First Name Middle Initial Position:	First Name Middle Initial Position:

Education and Training

Names of Schools Attended	Date	es Attended	Major or	Degree
and Location	From:	То:	Field	Received
High				
School				
College/				
University				
Trade				
School				
Other				
Training				

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Employment Experience

Please list each position held. Start with your present or most recent assignment and work backward. If you need additional space, please continue on separate sheet(s) of paper. In the column at the right, describe your assignments.

May inquiry be made of your present or most recent employer? _____ Yes _____ No

Employer:	From: To: Dates			
Address:	Summary of Job Duties:			
Job Title:				
Supervisor and Phone Number:				
Reason for Leaving:				
Employer:	From: To: Dates			
Address:	Summary of Job Duties:			
Job Title:				
Supervisor and Phone Number:				
Reason for Leaving:				
Employer:	From: To: Dates			
Address:	Summary of Job Duties:			
Job Title:				
Supervisor and Phone Number:				
Reason for Leaving:				
Employer:	From: To: Dates			
Address:	Summary of Job Duties:			
Job Title:				
Supervisor and Phone Number:				
Reason for Leaving:				

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Summarize any other skills, abilities, trainings, interests, career goals, etc that you would like to share:

Additional Information

By law, you must be authorized to work in the United States in order to be employed by Mason County, Texas. Are you legally able to work in the United States? _____ Yes _____ No

Have you ever been convicted of a felony or other crime? _____ Yes _____ No * If yes, please explain on reverse side of page. (You may omit convictions for minor traffic violations unless the position for which you are applying 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 conviction, and the relevance of the crime to this position will be considered.)

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 (License No: _____) ____ No

Type of License: _____ Operator _____ Commercial

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References

List three people not related to you who are qualified to describe your capabilities for the positon you seek.

Name	Email	Phone	Occupation

Authenticity

I certify that the statements and information contained herein are true, complete, and correct to the best of my knowledge, and I authorize any former employer to release to Mason County or its authorized representative any and all employment records and other information it may have about my employment. I understand that the information will be used for the purpose of evaluating my application for employment. A photocopy of this authorization shall be as valid as the original.

I, also, understand that only written representations and promises of Mason County will be enforceable.

Date: _____

Signature of Applicant: _____

Submission Instructions

Please submit this completed application to the Mason District/County Clerk's Office via:

- Email (co.dist.clerk@co.mason.tx.us)
- Postal Mail (PO Box 702, Mason, Texas, 76856)
- In Person at 210 Westmoreland Street, Mason, Texas, 76856