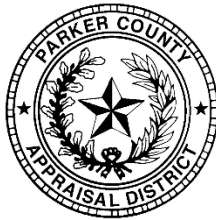


PARKER COUNTY APPRAISAL DISTRICT



EMPLOYMENT APPLICATION

ALL RESPONSES MUST BE COMPLETED ON THIS FORM

DATE OF APPLICATION: _____ **JOB TITLE/POSITION:** _____

HOW DID YOU HEAR ABOUT THE JOB OPENING? _____

1. PERSONAL INFORMATION		
LAST NAME:	FIRST NAME:	M.I.
PRIMARY PHONE:	SECONDARY PHONE:	
EMAIL ADDRESS:		
MAILING ADDRESS:		
CITY:	STATE:	ZIP CODE:
PRIMARY RESIDENCE ADDRESS:		
CITY:	STATE:	ZIP CODE:
SOCIAL SECURITY #	DRIVERS LICENSE #	
ARE YOU ABLE TO WORK OVERTIME?	ARE YOU 18 YEARS OF AGE OR OLDER?	
ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES OF AMERICA?		
ARE YOU RELATED TO ANY PCAD EMPLOYEES OR MEMBERS OF THE BOARD OF DIRECTORS?		
HAVE YOU EVER BEEN CONVICTED OF A CRIME OR A FELONY?		

The Parker County Appraisal District (PCAD) is an equal opportunity employer that maintains a policy of non-discrimination and non-retaliation with respect to all employees and applicants for employment. All employment decisions will be made without regard to race, color, sex (including pregnancy, gender identity, and sexual orientation), religion, national origin, age (40 or older), disability, genetic information, veteran status, or any other status protected by applicable federal, state, or local laws. Employment decisions are based solely on the individual's qualifications, merit, and performance, subject to the business requirements of the PCAD. Requests for accommodations will be reviewed for qualified individuals. Reasonable accommodations will be made in accordance with applicable law.

Applicant's Initials _____

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2. EDUCATION AND TRAINING

HIGH SCHOOL, COLLEGE, UNIVERSITIES, TRADE OR BUSINESS SCHOOL	CITY/STATE	MAJOR/MINOR	TYPE OF DIPLOMA/DEGREE OR DESIGNATION

LIST BELOW ANY SPECIAL SKILLS OR TRAINING, AND EXPLAIN WHY YOU SHOULD BE CONSIDERED FOR EMPLOYMENT

3. EMPLOYMENT HISTORY AND REFERENCES

EMPLOYMENT HISTORY

MOST RECENT/CURRENT EMPLOYER	JOB TITLE/POSITION	YEARS (FROM-TO)
NAME OF SUPERVISOR	PHONE NUMBER	SALARY
SUMMARY OF DUTIES		REASON FOR LEAVING
PREVIOUS EMPLOYER	JOB TITLE/POSITION	YEARS (FROM-TO)
NAME OF SUPERVISOR	PHONE NUMBER	SALARY
SUMMARY OF DUTIES		REASON FOR LEAVING
PREVIOUS EMPLOYER	JOB TITLE/POSITION	YEARS (FROM-TO)
NAME OF SUPERVISOR	PHONE NUMBER	SALARY
SUMMARY OF DUTIES		REASON FOR LEAVING
REFERENCES WHO ARE <u>NOT</u> PREVIOUS EMPLOYERS		
FULL NAME	PHONE NUMBER	RELATIONSHIP
1)		
2)		
3)		

PARKER COUNTY APPRAISAL DISTRICT

PRE-EMPLOYMENT SCREENING POLICY

The Parker County Appraisal District (PCAD) is dedicated to providing and maintaining a safe, healthy, and productive working environment free from drugs, alcohol, and other controlled substances. Upon consideration of employment, PCAD will require applicants submit to testing to screen for the presence of illegal drugs, inhalants, alcohol, or other controlled substances.

The scheduling, content, scope, and use of the test results will be solely at the discretion of the PCAD management. Any applicant who refuses to consent to testing or who tests positive to alcohol, illegal drugs, inhalants, or other controlled substances will not be eligible for employment with the PCAD.

Any required testing will be administered by qualified testing personnel. The collection of specimens for testing will be conducted with due regard for the individual's privacy but consistent with appropriate practices and procedures in order to ensure the integrity of the collection process. Prior to testing, the individual must disclose to the testing facility any medications recently taken, or any other relevant information that could potentially affect the test results. The results of the tests will be confidential and will be communicated only to representatives of the PCAD who have a need to know the information, to officials involved in the counseling and/or rehabilitation process, or to law enforcement and other governmental agencies as may be appropriate or required by law.

The PCAD reserves the right not to employ or retain in employment anyone who has been convicted of any felony or misdemeanor offense that relates to the duties and responsibilities of the position. The PCAD retains the express right to conduct background investigations on prospective and current employees. Background investigations may include review of criminal conviction records. Conviction of a crime is not an absolute bar to employment and will not automatically eliminate an individual from consideration for or continuation of employment. All relevant circumstances, such as how long ago the conviction occurred and the crime involved, will be considered in relation to specific job requirements.

Conviction of a crime that is related to the job the individual is expected to perform may be cause for denial of employment. Arrest records alone will generally not be considered in determining an individual's eligibility for employment, although the underlying behavior may be considered.

The PCAD will comply with the provisions of the Fair Credit Reporting Act and all applicable amendments when conducting any type of background investigation (e.g., criminal, credit, motor vehicle record, etc.). Particularly, the Chief Appraiser or designee will ensure the correct disclosure of rights has been made, authorization has been received before a background investigation is conducted, appropriate adverse action notices have been provided in instances in which an adverse action is taken due to the results of a background investigation, and the safeguarding of personally identifiable financial information has been maintained. Also, the organization will comply with laws governing the proper disposal of any documents (paper, electronic, or other format) that contain consumer information derived from a credit report. Reasonable measures will be taken to protect against unauthorized access to or use of sensitive consumer-related information.

The PCAD may conduct other background searches (credit investigations, motor vehicle registrations, etc.) on applicants for and employees in certain positions as deemed appropriate. Criminal background searches and motor vehicle registrations will be conducted periodically on employees that receive an automobile allowance. Additionally, the PCAD may conduct periodic credit checks on employees in positions requiring financial discretion.

Employment Application continued on next page.

PARKER COUNTY APPRAISAL DISTRICT

4. AUTHORIZATION, ACKNOWLEDGMENT, AND CONSENT

Applicant's Initials

_____ I have received a copy of the PCAD Pre-Employment Screening Policy and understand that this policy applies to me. I further acknowledge that this policy is a term and condition of employment. I understand that if I do not wish to be subject to the policy, I may decline the offer of employment. I also understand that PCAD may withdraw the offer of employment if any disqualifying information is found within my background results.

_____ I understand that should an employment offer be extended to me and accepted, my employment with the PCAD shall be probationary for a period of ninety (90) days and that I will fully adhere to the policies, rules, procedures and regulations of the PCAD. I further understand that neither this application, policies, rules, procedures or regulations of employment, or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration, "at will" and that either I or the PCAD may terminate my employment at any time with or without notice or cause.

_____ I understand that the PCAD, in an effort to maintain a safe working environment, has a zero-tolerance drug and alcohol policy. I understand that I will be subject to compliance with the PCAD's policy and procedures for drug and alcohol testing, and therefore, consent to the drug and alcohol testing. I further understand that (1) the PCAD's drug and alcohol policy provides for pre-employment testing; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I also understand that the PCAD reserves the right to test employees when they suspect an employee is under the influence of drugs and alcohol in the workplace and may require a drug and alcohol test on employees involved in an on-the-job accident or injury under circumstances that suggest possible use or influence of drugs or alcohol in connection with the accident or injury.

_____ I understand that, in connection with the routine processing of the employment application, the PCAD may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character and general reputation. I understand, that if the PCAD would take an adverse action due to my report, upon written request from me, the PCAD, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

_____ I understand that a criminal history check will be required prior to employment to determine if I have any criminal convictions and therefore, I consent to a criminal history check.

_____ I understand that if employed, I agree to engage in no outside activities which would involve a material conflict of interest with, or which could reflect adversely on the PCAD. If employed, I agree to hold in strictest confidence any information concerning the PCAD, it's representatives, agents, taxpayers or customers which may come to my knowledge.

_____ I hereby declare that I have accounted for all of my work experiences and training and to the best of my knowledge all of the information I have provided on this application is true, complete and accurate. I understand that any misstatement, false information or omission of information on this and other employment information and forms will be sufficient reason not to consider me for employment or terminate me immediately if the same is discovered during employment with the PCAD.

_____ I understand that as a part of the procedure for processing this application, the PCAD may verify the information that I have provided. I authorize the PCAD or its representatives to verify the statements I have made, contact my past employers for information regarding my work skills, work habits, abilities, and personal character; and check the references listed. I therefore, hereby authorize and release the PCAD from any and all liability in connection with the above screening and inquiries.

_____ I hereby authorize and request each former employer and person, firm or corporation given as a reference to answer all questions that may be asked and give all information that may be sought concerning me or my work habits, character, attendance performance, skills or my action in any transaction. I therefore release all parties and person connected with the release of information from any and all liability for furnishing such information.

_____ I affirm, the information contained in this application and all attachments, if any, is true and accurate. I understand that omitting or misrepresenting information could result in failure to consider this application. I also understand it is a criminal violation to make a false statement on this application. I further affirm that, to the best of my knowledge and belief, I am not disqualified by law from accepting employment with the PCAD.

I, _____ have carefully read the entire application and I fully understand that by signing my name that I am agreeing to the terms of this application including all acknowledgements and all consents.

FULL NAME OF APPLICANT (PRINT)

APPLICANT'S SIGNATURE

DATE

SUBMIT COMPLETED APPLICATIONS BY EMAIL TO: THANSON@PARKERCAD.ORG