# VICTORIA COUNTY GROUNDWATER CONSERVATION DISTRICT

# EMPLOYMENT APPLICATION

Victoria County Groundwater Conservation District (hereinafter referred to as "District") is an equal opportunity employer. Employment with the District is considered at-will and either party may terminate the relationship at any time with or without legal cause. Any misstatement, falsification, or omission of information will be cause for rejection or dismissal. All applications become inactive after six months. An application will NOT be considered unless completed in full. The District reserves the right to withhold employment offers until all required documentation is received. Employment offers are not valid unless approved by the Board of Directors or appropriate authority. The District does not discriminate on the basis of race, religion, color, gender, sexual orientation, age, national origin, disability or military status. The District does not discriminate on the basis of disability in the admission to, or access to, or treatment or employment in, its programs or activities. The District invites applicants to disclose any need for Please print or type all information provided in the accommodation. application.

Submit letter of interest, completed applications, and resume to the District at:

Mail: 2805 N. Navarro St. Ste 210, Victoria, Texas 77901

Email: admin@vcgcd.org

# Applicant Information

Full Name:
Social Security Number:
Mailing Address:
Telephone Number:
Email Address:
What is the title of position being applied for with this application?
Wage Expected: \$
Do you desire full-time work? (Yes or No)
Have you previously worked for the District? (Yes or No)
Are you related by kinship or marriage (example: mother, father, sister, brother, in-laws, etc.) to any District employee or board member? (Yes or No)  If yes, provide the name(s) and relationship of the individuals.
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Are you at least 18 years of age? (Yes or No)

# Education

Did you graduate high school? (Yes or No)
Name(s) and address of high schools attended:
Did you attend trade school or college? (Yes or No)
Provide details of school attendance including school name, study area, attendance dates, hours completed, degrees received:
Identify any licenses or certificates held:

# Current Employment

Current Employer Name:	
Describe your current position and duties:	
Current Supervisor Name:	
Current Employer Address:	
Current Employer Phone Number:	
Employment Dates:	
Starting Wage: \$ Present Wage: \$	
May the District contact this employer?	(Yes or No)

#### Past Employment

List all past employment, including military service, beginning with the most recent past employer.

Past Employer Name:
Describe your past position and duties:
Past Supervisor Name:
Past Employer Address:
Past Employer Phone Number:
Employment Dates:
Starting Wage: \$ Ending Wage: \$
Did your employer terminate your employment? (Yes or No)
Explain the reason for leaving this employment:

Past Employer Name:
Describe your past position and duties:
Past Supervisor Name:
Past Employer Address:
Past Employer Phone Number:
Employment Dates:
Starting Wage: \$ Ending Wage: \$
Did your employer terminate your employment? (Yes or No)
Explain the reason for leaving this employment:

Past Employer Name:
Describe your past position and duties:
Past Supervisor Name:
Past Employer Address:
Past Employer Phone Number:
Employment Dates:
Starting Wage: \$ Ending Wage: \$
Did your employer terminate your employment? (Yes or No)
Explain the reason for leaving this employment:

Past Employer Name:
Describe your past position and duties:
Past Supervisor Name:
Past Employer Address:
Past Employer Phone Number:
Employment Dates:
Starting Wage: \$ Ending Wage: \$
Did your employer terminate your employment? (Yes or No)
Explain the reason for leaving this employment:

If you need additional space to list past employment, please include additional copies of this page in your application.

Explain, in detail, any time laps your education.	es between jobs after completion of
Driver's Lic	cense Information
Do you possess a valid driver's l	icense? (Yes or No)
License Number:	Expiration Date:
State: Class:	
List restrictions:	

# Skills, Abilities, and Knowledge

Lis	t your	ski	lls,	abil	ities	, and	knowl	edge	relev	<i>r</i> ant	to	the	posit	ion
for	which	you	are	seek	ing e	mploy	ment.							
-														

# Crime and Traffic Offense Information

to, 4) received deferred adjudication, 5) received any kind of suspended
sentences for, or 6) paid any fee or fine for ANY CRIME, including ANY
felonies or misdemeanors? (Yes or No)
Convictions will not necessarily disqualify you for employment.
List all offenses and date of offense for which you were 1) convicted
2) pled guilty, 3) pled no contest, 4) received deferred adjudication
for, 5) received any kind of suspended sentences for, or 6) paid any fee
or fine for, other than Class C misdemeanor traffic offenses:
In the past five years, have you been 1) convicted of, 2) pled guilty to, 3) pled no contest to, 4) received deferred adjudication, 5) received any kind of suspended sentences for, or 6) paid any fee or fine for Class C misdemeanor traffic offenses: (Yes or No)
List Class C misdemeanor traffic offenses and date of offense for which
you were convicted OR pled guilty OR pled no contest OR received deferred
adjudication for OR received any kind of suspended sentences for OR paid
adjudication for OR received any kind of suspended sentences for OR paid
adjudication for OR received any kind of suspended sentences for OR paid
adjudication for OR received any kind of suspended sentences for OR paid
adjudication for OR received any kind of suspended sentences for OR paid
adjudication for OR received any kind of suspended sentences for OR paid

#### Understanding, Acknowledgement, Agreement and Certification

I hereby certify that the information which I have provided on this application is accurate and subject to validation by the District.

I understand and acknowledge that this application is a government document and the submission of false information on a government document is a crime.

I hereby authorize any person holding information on me to release it to the District if so requested in consideration of my application for employment.

I understand and agree that the District will not be liable and I agree to hold harmless the District from any claim for any damage which may result from furnishing the information requested above.

I certify that all the information provided by me in connection with my application, whether on the document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information shall be grounds for refusal to hire or, if hired, termination.

I understand and agree that, if I am hired in a position involving driving, my employment will be conditional pending verification of acceptable driving record.

I understand that the District does not discriminate on the basis of race, religion, color, age, gender, sexual orientation, national origin, disability or military status.

I understand that employment with the District is considered at-will, so that either party may terminate the relationship at any time with or without legal cause.

I understand that I may be required to successfully pass a physical examination performed by a physician appointed by the District after an offer of employment has been made and may require pre-employment drug testing.

Signature of Applicant	Date
Printed Name of Applicant	

# PERSONAL HISTORY STATEMENT AND AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, \_\_\_\_\_\_\_\_\_, do hereby authorize a review of, and full disclosure of, all records concerning myself to any duly authorized agent of the Victoria County Groundwater Conservation District, (hereinafter referred to as "District") whether the said records are of a Criminal, Public, Private, or Confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records held by any law enforcement agency, authorization to release any record maintained by them, but not limited to records of arrest and or conviction, or those relating to traffic violations, records of the U.S. Army, U.S. Air Force, U.S. Navy, U.S. Marine Corps, or the U.S. Coast Guard, educational institutions, financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings), and other financial statements and records wherever filed, employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me that the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the District. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that a copy of my credit report and/or my motor vehicle record may be used for consideration in determining my suitability for employment by the District.

I understand that by signing this form I am giving representatives of the District my authorization to obtain a copy of my credit history and/or my motor vehicle record or to use a copy provided by me.

I also understand that, if the District intends to take adverse employment action based on the credit report and/or motor vehicle record, I will be notified as set out in the Fair Credit Reporting Act.

Signature of Applicant	Date
Printed Name of Applicant	
Mailing Address:	
Social Security Number:	
Driver's License Number:	
Telephone Number:	

A photocopy or facsimile copy of this release form will be valid as an original thereof, even though said photocopy or facsimile does not

contain an original writing of my signature.

#### STATISTICAL INFORMATION

This information is strictly voluntary. The information given is used for statistical reporting to various regulatory agencies. This information will not be attached to your application and will in no way be used in consideration of your application for employment. Do not write your name on this form.

Position being applied for:
Date of Birth:
The date of birth will be used solely for verifying and obtaining information from other sources. The VCGCD does not discriminate against persons on the basis of age except to the extent such discrimination is required by state or federal law (such as complying with U.S. Department of Labor child-labor guidelines). In accordance with 29 CFR 1625.5, the Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.
RACE AND GENDER INFORMATION
Caucasian Male Caucasian Female
African American Male African American Female
Hispanic Male Hispanic Female
Native American/Alaskan Male
Native American/Alaskan Female
Asian or Pacific Male Asian or Pacific Female
Other "Male"Other "Female"
If other, please specify:
Declined to state
What led you to apply for a job with the District?