

APPLICATION For EMPLOYMENT

PLEASE PRINT)

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position(s) Applied For		Date of Application	
How Did You Learn About Us?			
Advertisement	Friend	Inquiry	Employment Agency
Relative		Other	
Last Name		First Name	
Middle Name			
Address	Number	Street	City
State		Zip Code	
Telephone Number(s)		Social Security Number (voluntary)	

Best time to contact you at home is: PM
AM

If you are under 18 years of age, can you provide required proof of you eligibility to work? Yes No

Have you ever filed an application with us before? If Yes, give date Yes No

Have you ever been employed with us before? If Yes, give date Yes No

Do any of your friends or relatives, other than spouse, work here? Yes No
If Yes, state name, relationship and location

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
Proof of citizenship or immigration status will be required upon employment Yes No

Date available to work: What is your desired salary range?

Are you available to work: Full Time (Please indicate 1 2 3 shift)
Part Time (Please indicate Mornings Afternoon Evenings)
Temporary (Please indicate dates available -)

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

EDUCATION

School	Name & Address of School	Course of Study	No. of Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate (Professional)				
Other (Specify)				

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application, including any job related training in the U.S. Military. _____

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. Are you capable of performing in a reasonable manner with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or application has been given. ☐ Yes ☐ No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. Exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Starting/Present Job Title			
Supervisor			
Reason for Leaving	May We Contact		Yes No
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Starting/Present Job Title			
Supervisor			
Reason for Leaving	May We Contact		Yes No
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Starting/Present Job Title			
Supervisor			
Reason for Leaving	May We Contact		Yes No

REFERENCES

Do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statement contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant

Date

NAME: _____

DATE: _____

Please write a brief narrative to the two situations listed in the space provided.

1. If John stole Sam's cookie and they were arguing, how would you handle the situation?

2. If a co-worker lost his/her temper with a child, how would you handle the situation?

Out of State Residency Verification Form

Texas Administrative Code (TAC Section 341.22(2) Requires that an out-of-state history records check and sex offender registration records be made if the individual resided in one of eleven (11) states and the District of Columbia which do not contribute to the National Crime Information Center (NCIC) database. In order to comply with the requirements of the TAC, it is necessary that individuals being employed by the juvenile probation department or being submitted for recertification and furnish a list of states of residence for the past ten (10) years. The applicant, or candidate for certification must furnish the information contained on this form so that an out-of-state records check can be performed.

Please list all states other than Texas where you have resided for the past ten (10) years.

Full Name	Previous Name at Time of Residence (if applicable)	Date of Birth	Place X in box if Texas was sole place of residency for past 10 years	Out-of-State City of Residence	State of Residence	Dates of Residency

Have you been arrested or convicted for an offense committed in a state outside of Texas during the past ten (10) years? If so, what state and offense?

I, _____, verify that the information provided is true and correct.

Signature

Date



ANGELINA COUNTY JUVENILE DETENTION CENTER

RELEASE OF INFORMATION

In being considered for employment, volunteer or internship, I, _____, do hereby authorize a review and disclosure of all records concerning myself to any duly authorized agent of Angelina County Juvenile Services.

The intent of this authorization is to give my consent for full and complete disclosure of records of educational instruction, employment records, arrest and conviction records, including public record from the U.S. Veterans Administration or any other government agency, federal, state and local. I understand that information obtained by this background investigation will be considered in determining suitability for employment with the Angelina County Juvenile Services. I also agree that any person(s) or other entity of institution who may furnish such information concerning me shall not be held accountable for giving this information. I do hereby release said person(s) or entities or institutions from any and all liability which may be incurred as a result of furnishing such information. I also release Angelina County, Angelina County Juvenile Services, its employees and board members from any and all liability which result of releasing such information.

Name (Print): _____
Last First Middle

Alias: _____

Signature (Include Maiden Name)

Social Security Number

Current Address

Driver's License Number

State

City

State

Zip Code

Date of Birth

Phone Number

Race

Gender

Previous Residences: I have/have not (circle one) lived in one of the following states within the past ten (10) years: Hawaii, Kansas, Kentucky, Louisiana, Maine, Massachusetts, New Hampshire, Rhode Island, , Tennessee, Vermont, and the District of Columbia. If you have, please indicate the state and provide the address(es) below.

_____	_____	_____	_____
State	Address	City	Zip Code

_____	_____	_____	_____
State	Address	City	Zip Code

Subscribed and Sworn to before me, by the said _____, this _____ day
of _____, 20____ to certify which witness my hand and seal of this office.

Notary Public In and For the State of Texas



Disclosure of Prior Employment and Discipline

TEXAS
JUVENILE
JUSTICE
DEPARTMENT

Note: TJJD standards require all applicants for employment with a juvenile probation department or juvenile justice facility or program to complete this form. Answering yes to any question does not mean you will not be considered for employment, but it does require a review of the information in order to make a decision. A failure to provide correct and truthful information is considered a violation of the TJJD Code of Ethics and may result in termination of employment, ineligibility for certification, or revocation of certification. It may also subject you to criminal prosecution for falsification of a government record.

Name of applicant:

Date:

Have you ever had an occupational license from a child-serving entity or entity that serves other vulnerable populations (e.g., elderly persons, persons with disabilities, persons in mental health facilities, or persons who were incarcerated)? ☐ Yes ☐ No

If yes, enter all entities with which you have or had an occupational license. Include information on how they may be contacted.

Have you ever been employed by a child-serving entity or entity that serves other vulnerable populations? ☐ Yes ☐ No

If yes, enter all entities by which you are or have been employed. Include information on how they may be contacted.

Have you ever had a contract with a child-serving entity or entity that serves other vulnerable populations? ☐ Yes ☐ No

If yes, enter all entities with which you have had a contract. Include information on how they may be contacted.

Have you ever volunteered with a child-serving entity or entity that serves other vulnerable populations? ☐ Yes ☐ No

If yes, enter all entities with which you have volunteered. Include information on how they may be contacted.

If you answered yes to any of the above, have you ever:

- Had your occupational license suspended or revoked, even temporarily? ☐ Yes ☐ No
- Had your employment, contract, or volunteer status suspended or terminated? ☐ Yes ☐ No
- Had a finding of abuse, neglect, or exploitation made against you? ☐ Yes ☐ No
- Had your name placed on a "do not hire" or similar registry with an entity that provides services to or regulation of services for children or other vulnerable populations? ☐ Yes ☐ No

If you answered yes to any of the above, explain the circumstances. Add pages as needed.

Subchapter B. Qualifications for Employment

344.200 General Qualifications for Employment

(b) Juvenile Supervision Officer To be eligible for employment as a juvenile supervision officer, an applicant shall:

1. be at least 21 years of age;
2. be of good moral character and have no disqualifying criminal history as described in this chapter;
3. have acquired a high school diploma or equivalent;
4. never have had any type of certification revoked by lawful authority of the Commission and not currently be under an order of suspension as described in 344.840 (d) of this chapter.

344.230 Persons Who May Not Act as Chief Administrative Officers, Juvenile Probation Officers, or Juvenile Supervision Officers

A peace officer, prosecuting attorney, or other person who is employed by or who reports directly to a law enforcement or prosecution official may not act as a chief administrative officer, juvenile probation officer, or juvenile supervision officer or be made responsible for supervising a juvenile in a juvenile justice facility or program.

Subchapter C. Criminal History Searches

344.300 Criminal History Searches for Positions Requiring Certification

(a) Fingerprint Search

1. Fingerprints shall be submitted through the Texas Department of Public Safety (DPS) Fingerprint Applicant Service of Texas (FAST) system.
2. The juvenile board, chief administrative officer, facility administrator or designee shall initiate a fingerprint-based criminal history search through the FAST system prior to the first day of employment to confirm that the applicant has no disqualifying criminal history.

(b) Criminal History Clearinghouse, the Commission and the juvenile board or designee shall participate in the electronic clearinghouse and subscription service operated by the DPS. This service, known as the Fingerprint-based Applicant Clearinghouse of Texas (FACT), provides criminal history record information required for employment and certification and notifies the Commission and the chief administrative

officer or designee of any disqualifying criminal conduct that may occur subsequent to the date of employment or certification.

(c) Military History, Applicants with prior military experience shall provide a copy of the DD-214 Discharge Form for each tour of duty. In the event a DD-214 reflects character of service as anything other than honorable discharge, the juvenile probation department shall obtain release of information authorization from the applicant and shall request additional information from the appropriate governmental entity to determine whether the reason for discharge was the result of disqualifying criminal conduct.

Subchapter D. Disqualifying Criminal History

344.400 Disqualifying Criminal History

(a) An individual with the following criminal history shall not be eligible for continued employment or certification:

1. a felony conviction against the laws of this state, another state or the United States within the past ten (10) years;
2. a deterred adjudication for a felony against the laws of this state, another state or the United States within the past ten (10) years;
3. a current felony deferred adjudication, probation or parole;
4. a jailable misdemeanor conviction against the laws of this state, another state or the United States within the past five (5) years;
5. a deferred adjudication for a jailable misdemeanor against the laws of this state, another state or the United States within the past five (5) years;
6. a current jailable misdemeanor deferred adjudication, probation or parole;
7. the requirement to register as a sex offender under Chapter 62 of the Texas Code of Criminal Procedure.

(b) The offense disposition date shall be used to determine applicable time frames.

(c) In addition to the criteria and time frames set forth in subsection (a) of this section, the applicant shall not be eligible for employment or certification until at least one year has elapsed since the completion of any period of incarceration, community supervision or parole.

ANGELINA COUNTY JUVENILE SERVICES

JUVENILE BOARD:

HON. KEITH WRIGHT
ANGELINA COUNTY JUDGE

HON. BOB INSELMANN
217TH JUDICIAL DISTRICT JUDGE

HON. TODD LEE KASSAW
159TH JUDICIAL DISTRICT JUDGE

HON. JOE LEE REGISTER
COUNTY COURT-AT-LAW NO. 1 JUDGE

HON. JIMMY A. CASSELS
COUNTY COURT-AT-LAW NO. 2 JUDGE



PROBATION:

MARK GORMAN
CHIEF OF PROBATION

STEPHEN PINKNEY
SUPERINTENDENT OF DETENTION

In accordance with the Texas Justice Department, prospective applicants will be disqualified from employment based upon the criteria outlined in the Texas Administrative Code Section 344.400. My signature below certifies that I have been afforded the opportunity to read T.A.C. 344.200 Qualifications for Employment, 344.300 Criminal History Searches, and 344.400 Disqualifications from Employment.

I will be responsible for incurring a one-time fee of \$10.00 for my fingerprint appointment and understand that I cannot be offered a position if my background checks reveal anything that is disqualifying as outlined in T.A.C. 344.400. My signature further certifies that the \$10.00 charge I non-refundable.

Angelina County Juvenile Services
Superintendent of Detention

Applicant

Date /



**DISCLOSURE OF
PREA EMPLOYMENT STANDARDS VIOLATION**

**ANGELINA COUNTY
JUVENILE SERVICES**

In compliance with the federal Prison Rape Elimination Act (PREA) standards relating to hiring and promotion decisions for juvenile facilities, the questions on this form must be asked of Angelina County Juvenile Detention (ACJD) applicants in written applications or during the interview process and of current ACJD employees during the performance evaluation process.

Applicant / Employee name (First, MI, Last)

SSN (last 4 digits only)

1. Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? (See below definition for institution.) ☐ Yes ☐ No

Definition of Institution: Any facility or institution owned, operated, managed by, or provides services on behalf of any State or political subdivision of a State and which is:

- For persons who are mentally ill, disabled, or retarded, or chronically ill or handicapped;
 - A jail, prison, or other correctional facility;
 - A pretrial detention facility;
 - For juveniles held awaiting trial, residing in such facility or institution for purposes of receiving care or treatment, or residing for any State purpose in such facility or institution (other than a residential facility providing only elementary or secondary education that is not an institution in which reside juveniles who are adjudicated delinquent, in need of supervision, neglected, placed in State custody, mentally ill or disabled, mentally retarded, or chronically ill or handicapped); or
 - Providing skilled nursing, intermediate or long term care, or custodial or residential care.
2. Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☐ Yes ☐ No
3. Have you ever been civilly or administratively adjudicated to have engaged in the activity described in questions #2 above? ☐ Yes ☐ No

Important Notice:

- If you answer yes to any of these questions indicating that you have violated a PREA standard, you are not eligible for hire or continued employment with Angelina County Juvenile Services.
- If you are hired or if you are a current ACJD employee, you have a continuing affirmative duty to immediately disclose to ACJD Facility Administrator any misconduct that would result in a "yes" answer to any of the above three questions.
- Providing untruthful answers to the above questions or failing to disclose any misconduct that would result in a "yes" answer to any of the above questions will be grounds for termination through the disciplinary process.

Applicant / Employee Signature

Date

Distribution Instructions:

Original form is maintained in the employee's personnel file.

If not hired for position, the original form is maintained with the selection and hiring packet.

Copy of form is provided to employee upon request.

