

ANGELINA COUNTY TAX OFFICE EMPLOYMENT APPLICATION

Angelina County is an At Will, Equal Opportunity Employer.

Please complete this application by replying at the end of each question.

Date: _____

Name: _____

Address: _____

Phone: _____

Best Time to Call: _____

ARE YOU EITHER A U.S. CITIZEN OR AUTHORIZED TO WORK IN THE UNITED STATES?

ARE YOU A UNITED STATES MILITARY VETERAN?

HAVE YOU BEEN CONVICTED OF A FELONY OR MISDEMEANOR?

If so, please explain:

Do you speak Spanish?

Are you employed now?

May we ask your employer for a reference?

Date you can start?

Including the current employer, list your last 3 employers (starting with most recent):

Tell us the name of the business, how long you worked there, duties, and reason(s) for leaving.

What is your highest level of Education? _____

In general, our physical requirements are standing, sitting, stooping, squatting, walking, reaching, pulling, lifting up to 25 pounds without assistance, getting around desks and equipment easily and quickly.

Do you have any physical limitations that preclude you from performing any work for which you are being considered? _____

If yes, what kind of modifications can be done to accommodate your limitations?

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE.

Signature (typing in your name is acceptable) _____

Email address (required) _____

Do not write below this line

Interview Scheduled _____ Person giving Interview _____

Hired? Yes ___ No ___ Keep application for future referral? Yes ___ No ___

If hired, Starting Date _____