Colorado County Appraisal District Phys: 106 Cardinal Lane Mailing: PO Box 10 Columbus, TX 78934 (979) 732-8222

APPLICATION FOR EMPLOYMENT WITH THE COLORADO COUNTY APPRAISAL DISTRICT

Read and answer the twelve sections of	arefully an	d compl	ete.			
	1.	Applica	nt Information			
Name (Last, First, Middle Initial)			elephone Number (area code and number)			
_			aytime	Eve	ning	
Current Mailing Address (number, street of	or PO Box)	•				
Street address if different from above						
City		St	ate		Zip code	
Social Security Number:		Texas D	river's License Nur	mber:		
	2 [-d	a and Tuaining			
	Z. E	aucatio	n and Training	0	T of	
Name of School, City, State	Dates Att Mo/Yr to		Major / Minor	Semester Hours Earned	Type of Diploma or Degree Awarded	
List any other training, certifica awards			attributes you cor nal memberships			
a.	, , , , , , , , , , , , , , , , , , ,		b.	,		
C.			d.			
e.			f.			
g.			h.			
	4.	Employ	ment History			
Present/Most Recent Employer			Position			
Address			Dates Employed (From mo/yr to mo/yr)			
Supervisor's Name			Supervisor's Title			
Number of Employees Supervised			Reason for Leaving			
Directly Indirectly						
Summary of Duties						

Present/Most Recent Employer	Position
Address	Dates Employed (From mo/yr to mo/yr)
Supervisor's Name	Supervisor's Title
Number of Employees Supervised	Reason for Leaving
Directly Indirectly	
Summary of Duties	
December 10 and December 10 and 10 an	I D4:
Present/Most Recent Employer	Position
Address	Dates Employed (From mo/yr to mo/yr)
Supervisor's Name	Supervisor's Title
Number of Employees Supervised	Reason for Leaving
Number of Employees Supervised	Treason for Leaving
Directly Indirectly	
Summary of Duties	

5. Questionnaire

Please check "Yes" or "No". If you are not sure, write "not sure". Answers to these questions may or may not disqualify you from employment with the Colorado County Appraisal District.

1.	Do you reside in Colorado County?	. Yes	No
2. 3.	Are you a former employee of an Appraisal District?		No
	in Colorado County?	.Yes	No
4. 5.	Are you currently employed, part-time, by a local government in Colorado County?	Yes	No
	County Appraisal District?	. Yes	No
6.	Do you have a spouse, parent, child, son-in-law, daughter-in-law, grandparent, grandchild, brother or sister, spouse of a brother or sister, stepchild, stepparent, father-in-law, mother-in law, or a brother or sister of your spouse who is a member of		
7	the Board of Directors of the Colorado County Appraisal District?	Yes	No
٠.	convicted of a felony or a misdemeanor involving moral turpitude?	.Yes	No
	▶If yes please explain:		
8.	Have you ever been convicted of a felony of any kind?	. Yes	No
	▶If Yes, explain:		
9.	May we contact your present or former employer(s)?	. Yes	No
10.	Are you a U.S. Citizen?	. Yes	No
	▶ If you answered "No" to Question 10, are you eligible to be		
	employed under a visa or entry permit?	Yes	No

	6. Military Service	
Are you a veteran of the United	States Military?	Yes No
Branch:	Rank at discharge:	_
From (dates):	To:	
Type of discharge:		
If not honorable, please ex	plain:	
	7. Property Ownership Disclosure	
district employees in their perspec property they own or have interest	ng and Regulation (TDLR) is the State Agency tive fields. One of the requirements of the TDL in the county of which appraisal district they a less personal property you own or have interest	R is for each employee to disclose the re employed by.
Colorado County Appraisal District Account Number	Location Address	Owner or Business Name
	8. Three References	
By providing references, you are	giving the Colorado County Appraisal District a	approval to contact these individuals.
1 Full Name	Relationship:	
Company:	Title:	
Email :	Phone :	
Pull Name:	Relationship:	
Company:	Title:	
Email :	Phone :	
3 Full Name:	Relationship:	
Company:	Title:	
Fmail ·	Phone ·	

	9. Optional Stateme	nt
Briefly state why you should be consid	dered for employment with the C	olorado County Appraisal District.
	10. Acknowledgm	ent
If I,	(Print Name), am offered	d employment with the Colorado County Appraisal
-		as Department of Licensing and Regulation (TDLR) t with the Colorado County Appraisal District.
I understand that with my registration town with overnight stay. (Paid by the		be required to attend courses and training out of
I understand that if I am employed as long distances and traversing uneven		ed to do field work that often times require walking
	but not limited to: the Texas Co	re to the State laws, rules and regulations nstitution; Texas Property Tax Code; Texas egulation or its successor agency.
	11. Disclaimer	
		yer. Employment with the Colorado County ment with the Colorado County Appraisal District is
	12. Signature and	Affirmation
	I understand that omitting or mis	ation I have given in it is true and correct to representing information could result in failure ion to make a false statement on this
best of my knowledge and belief and	authorize the Colorado County st of my knowledge and belief,	chments, if any, is accurate and complete to the Appraisal District to verify the statements I have I am not disqualified by law from accepting an
Printed Name	Applicant Signature	Date

*You may attach your resumé or your curriculum vitae to this application.

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Columbus, TX 78934

Phone: (979) 732-8222					Fax: (979) 732-6485 or 733-0390		
Name				Soci	ial Security Number		
employers, criminal justi- limited to academic, ach hereby ask you to releas official use by the Colora fulfillment of official responsible. I hereby release and hold	ce agencies, on interest of the control of the cont	or individu rformance ation upor opraisal D y individua	al District be uals relating e, attendand n request of district and r al, including	earing this to my acce, persor the beare may be di	chorize any investigator or duly accress release to obtain any information from schoctivities. This information may include, but is nal history, disciplinary and conviction recorer. I understand that the information released isclosed to such third parties as necessary in ustodians, from any and all liability for damagant of compliance, or any attempts to comply,	nools s no rds. is fo n the	
this authorization.	willon may at	arry unito i	count to me	011 00000	ant or compliance, or any attempts to comply,	VVICI	
Applicant's Signature					Date		
			Го Be Con	npleted b	by Employer		
Company Name				Position	on Held		
Employment Dates Fro	m	То		Eligible	e for Rehire Yes No		
Explanation							
Performance Rating	Excellent	Good	Fair	Poor	Comments		
Attendance							
Work Habits							
Quality of Work							
Quantity of Work							
Initiative							
Cooperation							
Completed By	1		Position	ı	Date		