East Medina County Special Utility District

Physical: 16313 FM 471 S, Devine, TX 78016 Mailing: PO Box 628, Devine, TX 78016 Ph: 830.709.3879 <u>https://www.emcsud.dst.tx.us/</u>

Employment Application

East Medina County SUD is an equal opportunity employer.

Applicant Information

Full Name:							Date:			
	Last First					M.I.				
Address:	Street Address							Apartment/Unit	#	
	City						State	ZIP Code		
Phone:					Email					
Date Availa	ble:	Social	Security	/ No.:			Desired	Salary: \$		
Position Ap	plied for:									
Are you bilir			YES	NO □	If yes	s, what				
Are you a citizen of the United States?			YES		lf no, a	are you	authorized to wo	YES rk in the U.S.?		
Have you e	ver worked for this	company?	YES	NO □	lf yes,	when?				
Have you e	ver been convicted	of a felony?	YES	NO □						
lf yes, expla	uin:									
				Educ	ation		_	_		
High Schoo	l:			Address						
_		Di			YES	NO □				
College:			/	Address						
From:	То:	Di	d you gr	raduate?	YES	NO □	Degree:			
Other:			/	Address						
From:	To:			aduate?	YES		Degree:			

References

Please list three professional references.				
Full Name:	Relationship:			
Company:				
Address:				
Full Name:	Relationship:			
Company:				
Address:				
Full Name:	Relationship:			
Company:				
Address:				
	Previous Employment			
Company:	Phone:			
Address:	Supervisor:			
Job Title:	Starting Salary: Ending Salary	:\$		
Responsibilities:				
From: To:	Reason for Leaving:			
M	YES NO			
May we contact your previous supervisor for a	reference?			
Company:	Phone:			
Address:	Supervisor:			
Job Title:	Starting Salary: £ Ending Salary	Ending Salary:		
From: To:	Reason for Leaving:			
May we contact your previous supervisor for a	YES NO			
	reference?			
Company:	Phone:			

Address:			Supervisor:						
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary:	\$				
Responsibilities:									
From:	То:	Reason fc	or Leaving:						
May we contact ye	our previous supervisor for a reference?	YES	NO □						
Military Service									
Branch:			From:	· · ·	То:				
Rank at Discharge:		Type of	Discharge:						
If other than hono	rable, explain:								

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. My signature below authorizes East Medina County Special Utility District to make investigations. My signature indicates my awareness that false statements or failures to disclose certain information may be sufficient to disqualify me for employment, or, if employed, may be grounds for my immediate dismissal.

I understand that neither this form nor statements by representatives of East Medina County Special Utility District constitutes an employment contract.

Upon employment, I agree to the following:

- Meeting any and all employability requirements to include but not limited to Form I-9, W-4, New Hire, and various East Medina policies
- Abiding by all rules, regulations, and performance standards
- A pre-employment health evaluation, if required
- Completing and executing a surety bond application, if required
- Attending all necessary training schools as required for the position being applied for
- Providing all necessary documentation to check driving record if necessary

Signature:

Date:

Please attach resume if available.