Print Form

BRAZOS COUNTY
EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER (M/F/D/V)

Human Resources Dept.
200 S. Texas Ave., Suite 206
Bryan, Texas 77803
(979) 361-4114 | (979) 823-6993 (fax)

INSTRUCTIONS: *All applications for employment with Brazos County must be made on this form. Consider each question carefully.* ***YOU MUST ANSWER ALL QUESTIONS.***
If a question is not applicable, enter "N/A". ***Please print legibly****. Resumes will be accepted as* ***additional*** *information, but not in place of a completed application.*
Please note: This form has fillable fields, but the edits you make will NOT be saved. Please be sure the document has successfully printed for submission before leaving this form!
Be sure that the HUMAN RESOURCES DEPARTMENT receives your completed application. *For more detailed instructions please* ***click here.***

Last Name	First Name	Initial	Social Security Number
Position Desired			Today's Date (mm/dd/yyyy)
Street Address	City	State	Zip

Phone Number: Area Code Number	Drivers License Number: State Number (If job you're applying for requires one)

YES	NO	Please attach additional information, if needed, to answer details of the following questions.
☐	☐	Can you submit proof age, if hired? All applicants must be at least 18 years of age (21 if applying for a deputy sheriff position).
☐	☐	Have you ever been convicted of a felony? If YES, give details:
☐	☐	Are you legally eligible to work in the U.S.? (Verification will be required if hired).
☐	☐	Are you related by blood or marriage to any BRAZOS COUNTY employee/official? If YES, give name and relationship:
☐	☐	Have you previously been employed by Brazos County? If YES answer the following: When:
		Position: Reason for leaving:
☐	☐	Are you currently employed? May we contact your current employer?
☐	☐	Have you made an application before? If YES, when:
		Date available to begin work: Starting salary desired:

EDUCATION

	Name and Location	Major Subjects	No. of Years Completed	DIPLOMA Degree
High School				
College				
College				
High School				

Other (Trade, business, or professional school):

Other course work applicable to this type of work:

U.S. MILITARY SERVICE

Number of years served:	Branch of Service:	Rank at discharge:

Duties:

YES	NO	
☐	☐	Are you a member of the National Guard or Reserve? ☐ Active ☐ Inactive
☐	☐	Do you anticipate any active duty, including reserve training, in the future?

PREVIOUS EMPLOYMENT

*Start with your **present or most recent job** (including military service). Provide employer information for the last **10 Years** and any other work history you feel is relevant. Attach additional sheets, or extra copies of this page if necessary.*

(1) Present or most recent employer			Phone Number: Area Code Number
Street Address	City	State	Zip
Job Title	Supervisor's Name		
Dates Employed From: To:	Starting Salary	Final Salary	
Reason for Leaving			
Your Duties			

(2) Present or most recent employer			Phone Number: Area Code Number
Street Address	City	State	Zip
Job Title	Supervisor's Name		
Dates Employed From: To:	Starting Salary	Final Salary	
Reason for Leaving			
Your Duties			

(3) Present or most recent employer			Phone Number: Area Code Number
Street Address	City	State	Zip
Job Title	Supervisor's Name		
Dates Employed From: To:	Starting Salary	Final Salary	
Reason for Leaving			
Your Duties			

LICENSES / EQUIPMENT / MACHINES OPERATED

Attach additional sheets if necessary.

Computers, Office Equipment		Typing (wpm)
Licenses (CDL electrician, etc.)		
Heavy / Light Equip., Machinery		
Mechanical, Repair Experience		
Special Skills / Training (welding, etc.)		
Other		

PRE-EMPLOYMENT STATEMENT

Please read the following carefully, then sign and date where indicated:

I authorize Brazos County to make any inquiries they desire regarding my education, employment, ability, habits, and personal character for the purpose of determining my fitness for employment. I also authorize previous employers or any other persons to whom the county may refer to give any and all information regarding my employment or scholastic record together with any information personal or otherwise and I hereby release such persons and any companies they represent from all liability or any damages whatsoever in connection with their compliance. I understand that misrepresentation or omission of any fact or circumstance called for in this application which would affect my application unfavorably or receipt of unsatisfactory references will be sufficient cause for termination without liability. This application is not an employment contract and is not intended to create contractual obligations of any kind. Neither the county nor its employees are bound to continue the employment relationship if either chooses at its will to end the relationship at anytime. All employment is at will and the relationship cannot be modified unless in writing.

Signature	Date

BRAZOS COUNTY
Voluntary EEO Self-Identification Form

In an effort to comply with requirements regarding government record keeping, reporting and other legal obligations which may apply, we invite you to complete this Voluntary EEO Self-Identification form. Providing this information is strictly voluntary. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Name	**Date**
Position	
Gender ☐ Male ☐ Female	

Ethnicity: (Check all that apply)

☐ **Asian/Pacific Islander**
All persons having origins in any of the original peoples of the Far East, Indian Subcontinent, Southeast Asia or the pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

☐ **Black**
All persons having origins in any of the black racial groups of Africa.

☐ **Hispanic**
All Persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture/origin, regardless of race.

☐ **American Indian/Alaskan**
All persons having origins in any of the original peoples of North America.

☐ **White**
All persons having origins in any of the original peoples of Europe, North Africa or Middle East.