

Nueces County Appraisal District
 201 N. Chaparral Street, Suite 206
 Corpus Christi, Texas 78401
 (361) 881-9978



APPLICATION FOR EMPLOYMENT NUECES COUNTY APPRAISAL DISTRICT

Position for which Applying: _____
Indicate your lowest acceptable salary: \$ _____ per _____
Date available for Work: _____

Applicant Information

Name (Last, First, Middle)		Telephone number (area code and number) Daytime () Cell ()	
Physical Home Address (number, street, city, state and zip)			
Social Security Number	Texas Driver's License Number or government issued identification (legible copy must be attached)		

Education and Training

Name of School	City, State	Years Attended	Major/Minor	Diploma or Degree

List any other training, qualities, or attributes you consider relevant, including office held, honors, professional memberships, licenses, etc.

Employment History

Provide Employment History for the last 3 years. Attach additional sheets if necessary. You may attach a resume but this section must be completed in full.

Present/Most Recent Employer	Position
Address	Dates Employed (From month/year to month/year)
Telephone number	Reason for Leaving
Summary of Duties	
Previous Employer	Position
Address	Dates Employed (From month/year to month/year)
Telephone number	Reason for Leaving
Summary of Duties	
Previous Employer	Position
Address	Dates Employed (From month/year to month/year)
Telephone number	Reason for Leaving
Summary of Duties	

Last, First, Middle Name

Please read carefully and answer all questions

1. Have you been dismissed or asked to resign from an employer within the last 5 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Is your driver's license currently suspended or revoked?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Are you presently under indictment or have previously been convicted of a felony or a misdemeanor?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Is anyone who is related to you by blood or marriage employed by the Nueces County Appraisal District?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. Do you have any objection to our calling your current or previous employer about your qualifications and work record?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6. Are you a U.S. Citizen?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you answered No to Question 6, are you eligible to be employed under a visa or entry permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Authorization for Release of Information

As part of our hiring background and investigation process, we may obtain, where permitted, one or more reports and other information about you, including your background, employment history, academic and/or professional credentials and driving history.

I hereby authorize any investigator or duly accredited representative of Nueces County Appraisal District bearing this release to obtain any information from schools, residential management agents, employers, criminal justice agencies, or individuals, relating to my activities. This information may include, but is not limited to, academic, residential, achievement, performance, attendance, personal history, disciplinary, arrest, and conviction records. I hereby direct you to release such information upon request of the bearer. I understand that the information released is for official use by Nueces County Appraisal District.

I hereby release any individual, including record custodians, from any and all liability for damages of whatever kind or nature, which may at any time result to me on account of compliance, or any attempts to comply, with this authorization.

Date

Signature

Printed Name (Last, First, Middle)

Important – Please read carefully before you sign below

If you are selected for final consideration for employment you will be required to submit to, and pass a pre-employment Drug Test. Failure to submit and pass will result in rejection of the application.

Applicants offered employment must furnish satisfactory proof of valid driver's license and social security.

Date

Signature

Printed Name (Last, First, Middle)