

## 25TH JUDICIAL DISTRICT OF TEXAS

### GUADALUPE COUNTY

#### COMMUNITY SUPERVISION & CORRECTIONS DEPARTMENT

**SEGUIN OFFICE** 209 E. Donegan Seguin, Tx. 78155 (830) 303-0058 379-7270 Fax (830) 379-3843

**SCHERTZ OFFICE** 1052 Fm 78, Ste 105. Schertz, Texas 78154 (210) 945-8280 Fax (210) 566-1287

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**THE APPLICATION MUST BE FILLED OUT IN INK OR TYPED AND MUST BE  
COMPLETED PROPERLY TO BE CONSIDERED**

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1. Name (Last, First M.) \_\_\_\_\_

1a. Have you ever worked under any other name? If so, please list name(s):

\_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_  
(Street Address) (City) (County) (State) (Zip)

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

3. Social Security Number \_\_\_\_\_

4. What do you consider your normal occupation or profession?

\_\_\_\_\_

5. Do you have an automobile for full-time use?

current driver's license # \_\_\_\_\_ State \_\_\_\_\_

auto liability company? \_\_\_\_\_ auto liability insurance # \_\_\_\_\_

6. Do you have any computer skills (describe)? \_\_\_\_\_

7. What languages other than English do you speak?

\_\_\_\_\_

8. Give name, address, relationship, and phone number of a person other than your spouse who would normally know how to contact you.

\_\_\_\_\_

9. Give the names, addresses and phone numbers of three persons we may contact (other than relatives) who know you personally and who are willing to certify to your character, ability and experience.

NAME

ADDRESS

PHONE

EDUCATION

**A. High School:**

Name & Location	No. of Years	Dates Attended

Did you graduate from High School?\_\_\_\_\_ Date\_\_\_\_\_

**B. College:**

Name & Location	# of Years	Dates of Attendance	Major/Minor Subjects	Degree & Date or No. of semester hrs Of work completed

**C. Professional School:**

Name & Location	No. Terms Attended	Dates of Attendance	Major Subjects

**D. Vocational or Business School Attended:**

Name & Location	No. Months Attended	Dates of Attendance	Major Subjects

Other information related to your educational background that you consider important to the position for which you are applying:

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**EXPERIENCE:** Start with your present or last job and work back. Include paid or unpaid, full or part-time, military, summer jobs, etc. **NOTE:** We may contact any previous supervisors to verify your description of past duties.

Starting Date	Ending Date	Name & Address of Present Employer	
Starting Salary	Ending Salary	Hours per Week	Name, Title & Phone Number of Immediate Supervisor

**Reasons for Leaving:**

**Description of duties & responsibilities:**

Starting Date	Ending Date	Name & Address of Present Employer	
Starting Salary	Ending Salary	Hours per Week	Name, Title & Phone Number of Immediate Supervisor

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10. State date you will be available to start:\_\_\_\_\_

11. Are you a United States citizen? YES\_\_\_\_ NO\_\_\_\_

12. Have you been fired or asked to resign in the last 5 years?

YES\_\_\_\_\_ NO\_\_\_\_\_ If yes, give details:\_\_\_\_\_

13. Have you ever been convicted of any violation of law other than traffic offenses?

YES\*\_\_\_\_\_ NO\_\_\_\_\_ If yes, give details:

*\*Answering YES does not necessarily, in and of itself, disqualify you from being considered for the position.*

14. Are there any charges pending against you at this time?\_\_\_\_\_

15. Indicate the types of work you would accept using "Yes", "No" or "Maybe"

a.\_\_\_\_\_permanent

b.\_\_\_\_\_temporary

c.\_\_\_\_\_full-time

d.\_\_\_\_\_part-time

e.\_\_\_\_\_daywork

f.\_\_\_\_\_nightwork

g.\_\_\_\_\_weekends

h.\_\_\_\_\_work extra with compensation time given in lieu of  
payment

Explain those blanks marked "No" or "Maybe":

16. AFFIDAVIT:

**I hereby certify this application contains no willful misrepresentation or falsification and the information given by me is true, complete and correct to the best of my knowledge and belief. I understand that should an investigation disclose any such misrepresentation or falsification, my application will be rejected and I will be declared ineligible for employment. I authorize my present or former employers to divulge and release to this employer or its authorized representative any and all employment records and other information it may have about my employment. I understand that the information will be used for the purpose of evaluating my application for employment and that I am responsible for providing legal documents verifying my identity and eligibility for employment. In addition, I understand that, if selected for an interview, true copies of all degrees, certificates, or licenses listed on this application will be required before an employment decision can be made.**

**A photocopy of this authorization shall be as valid as the original.**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

## **FIREARMS POLICY**

**It is the policy of this department that CSCD Officers may be authorized to carry firearms while engaged in the actual discharge of his/her duties while employed with this department**

## **EMPLOYMENT-AT-WILL POLICY**

**Employees of the Guadalupe County Community Supervision and Corrections Department are hired on an employment-at-will basis. No representative of the department has the authority to enter into any contract for any specified period of time, or to make any agreement of employment contrary to an employment-at-will basis. Absent such a written contract, any employee may leave employment at any time or be terminated at any time, with or without reason, and with or without notice.**

**I certify by my signature that I have read and do understand the above Firearms and Employment-at-will policies.**

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DATE

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SIGNATURE OF APPLICANT