



1900 Pease St. Suite 500 Vernon, TX 76384 office: 940-473-5072

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

**Instructions:** Please complete all 3 pages and attach resume. Please print, and email completed application and resume to [texomaalliance@gmail.com](mailto:texomaalliance@gmail.com) with subject line: "TASA Open Position". Applications can also be mailed or delivered in person to the agency address listed above.

Applicant Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Position(s) applied for \_\_\_\_\_

Date available to begin employment: \_\_\_\_\_

**Please Circle responses for the following questions:**

Type of employment desired: full-time part-time temporary relief

Are you able to meet the attendance requirements? Yes No Unsure

Do you have any objection to working overtime if necessary? Yes No Unsure

Can you travel if required by the position? Yes No Unsure

Have you ever been previously employed by our organization? Yes No Unsure

Can you submit proof of legal employment authorization and identity? Yes No Unsure

Have you ever been convicted of a crime in the last 7 years? Yes No Unsure

*If yes, please explain (a conviction will not automatically bar employment):*

\_\_\_\_\_

\_\_\_\_\_

Driver's license number (if driving is an essential job duty): \_\_\_\_\_ State \_\_\_\_\_

**Other Skills and Qualifications**

*Summarize any job-related training, skills, licenses, certificates, and/or other qualification that may qualify you as being able to perform job-related functions for the position for which you are applying:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employment History**

*Please provide all employment information for your past 3 employers starting with the most recent.*



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Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Educational History**

*List school name and location, years completed, course of study, and any degrees/certificates earned:*

High School: \_\_\_\_\_

College: \_\_\_\_\_

Technical Training: \_\_\_\_\_

Other: \_\_\_\_\_

**References**

*List 3 references. names, phone numbers, and years known (do not include relatives or employers)*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_



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I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, without cause, at any time, so long as there is no violation of applicable federal or state law.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

This application is current for only 60 days. At the conclusion of this time, If I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I also understand that a criminal background check will be conducted as a condition of employment and that persons convicted of crimes against a person or any other conviction that is determined to be a contraindication to employment will not be hired. I understand that all information obtained in the employment screening process will be kept strictly confidential.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_