

APPLICATION FOR EMPLOYMENT

Please complete the application. If you must fill this out by hand, please use blue ink. Attach your personal resume, if available. Information provided will be verified, as appropriate.

An Equal Opportunity Employer

OWBC is committed to building a high-quality workforce and a strong future. We are proud to be an equal opportunity employer and consider all qualified applicants without regard to race, sex, color, religion, national origin, age, disability, marital status, sexual orientation, veteran status, or any other legally protected status.** **If you require an accommodation during the application process, please contact us. We are happy to assist.**

POSITION APPLYING FOR: _____

PERSONAL INFORMATION

(LEGAL NAME) LAST NAME	FIRST NAME	MIDDLE NAME	TODAY'S DATE
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LIST ANY OTHER NAMES USED IF DIFFERENT FROM NAME ABOVE (FOR BACKGROUND VERIFICATION PURPOSES ONLY. THIS INFORMATION WILL NOT AUTOMATICALLY DISQUALIFY YOU FROM BEING CONSIDERED FOR EMPLOYMENT.)

PRESENT ADDRESS	CITY AND STATE	ZIP CODE	ARE YOU OVER THE AGE OF 18 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO
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HOME PHONE	BUSINESS PHONE	IF OFFERED EMPLOYMENT, CAN YOU SUBMIT EVIDENCE OF YOUR LEGAL RIGHT TO WORK FOR THE COMPANY IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO
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GENERAL INFORMATION

AVAILABILITY	AVAILABLE START DATE:	DAYS AND HOURS AVAILABLE TO WORK: <input type="checkbox"/> MON _____ <input type="checkbox"/> TUES _____ <input type="checkbox"/> WED _____ <input type="checkbox"/> THURS _____ <input type="checkbox"/> FRI _____ <input type="checkbox"/> SAT _____ <input type="checkbox"/> SUN _____
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PROFESSIONAL REFERENCES

Please list at least 3 individuals who are qualified to evaluate your capabilities, preferably managers, peers, or subordinates. DO NOT INCLUDE RELATIVES

NAME	RELATIONSHIP	TITLE	COMPANY	HOME PHONE/WORK PHONE
1.				
2.				
3.				
4.				
5.				

SECURITY DATA INFORMATION

Please provide accurate and complete information in response to the following 4 questions. This information will be taken into account in the employment process. Do not include in response to any of the questions below: arrests without convictions or incarcerations for which a record has been sealed or expunged. **Please note that "yes" responses will not necessarily disqualify you from employment, nor will a "no" response guarantee employment.**

1. YES NO Within the last seven years, have you been convicted of or pleaded guilty or nolo contendere (no contest) to a crime or other offense? Include any and all court convictions, military service convictions, deferred adjudication or guilty or nolo contendere (no contest) pleas.
2. YES NO Are you currently on parole, probation, work release program, deferred adjudication, conditional release, or serving a weekend sentence as a result of a conviction or a guilty or nolo contendere (no contest) plea?
3. YES NO In the last seven years, have you been confined (incarcerated) as a result of the sentence of any court? (Include incarcerations resulting from the sentence of a military court or similar proceeding.)
4. YES NO Are you presently under indictment or are you currently a defendant in any criminal proceeding?

If you answered "yes" to any of the above questions, please provide the following information as an attachment: list date(s), offense(s), and disposition(s).

Hiring Policies and Procedures

*OWBC is committed to building a high-quality workforce and a strong future. We are proud to be an equal opportunity employer and consider all qualified applicants without regard to race, sex, color, religion, national origin, age, disability, marital status, veteran status, or any other legally protected status.** Our hiring decisions are based on a variety of factors, including knowledge, skills, and the ability to perform the job, relevant work experience, employment references regarding character and work ethic, willingness to accept the offered salary, and the outcome of personal interviews.*

EMPLOYMENT INFORMATION – Starting with your current or most recent employment, list all previous employers including self-employment, military service, summer and part-time jobs for at least the last 10 years. This must be completed in full for each employer. **Writing “see resume” is not acceptable.** Use additional sheet if necessary to cover 10 years of employment.

1.)Organization Name:		Title:	Start Date:	End Date:
Address:			Phone:	
Name and Title of Supervisor:		May we contact?		
Salary:	Reason for leaving:			
2.)Organization Name:		Title:	Start Date:	End Date:
Address:			Phone:	
Name and Title of Supervisor:		May we contact?		
Salary:	Reason for leaving:			
3.)Organization Name:		Title:	Start Date:	End Date:
Address:			Phone:	
Name and Title of Supervisor:		May we contact?		
Salary:	Reason for leaving:			
4.)Organization Name:		Title:	Start Date:	End Date:
Address:			Phone:	
Name and Title of Supervisor:		May we contact?		
Salary:	Reason for leaving:			

Certification(s) Obtained

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Read, Speak and Write (list below all language proficiency)

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EDUCATION HISTORY

Type of School	Name and Location of School	Degree/Area of Study	Number of Years Attended	Graduated	
				Yes	No
High School	<i>Name</i> _____ <i>Address</i> _____			Yes	No
	<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____				
College	<i>Name</i> _____ <i>Address</i> _____			Yes	No
	<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____				
Graduate School	<i>Name</i> _____ <i>Address</i> _____			Yes	No
	<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____				
Other/Trade School	<i>Name</i> _____ <i>Address</i> _____			Yes	No
	<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____				

CERTIFICATION

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION.

I affirm that I am making this application because I am sincerely interested in being hired by Opportunities for Williamson & Burnet Counties., (hereby known as "OWBC") and not for any other purpose.

I certify that all statements I have made on this application, on my resume, or other supplementary materials are true and correct. I hereby authorize OWBC to investigate the accuracy of this information from any person or organization and I release the Organization and all persons and organizations from all claims or liabilities of any nature arising from such investigations or the supplying of information for such investigations. I understand that if I am being considered for a position which requires driving an OWBC vehicle, a report examining my driving record may also be requested, and I similarly release all persons and organizations from all claims or liabilities of any nature arising from such examination or the supplying of information for such examination.

I acknowledge that any false statement, significant omission, or misrepresentation on this application or supplementary materials will be cause for refusal to hire or, ***if employment has already begun, for immediate dismissal at any time during the period of my employment.***

I will regard and preserve as confidential, and will not divulge to unauthorized persons, or use for unauthorized purposes, either during or after the term of my employment, any information, matter or thing of a secret, confidential, or private nature connected with the business of OWBC without the written consent of an officer of OWBC. Similarly, I represent and agree that I have not and will not improperly disclose to OWBC any confidential business information, trade secrets, or proprietary information belonging to any former employer or other party.

I am in agreement with the Organization's policy of equal opportunity in all phases of employment without regard to race, sex, color, religion, national origin, sexual orientation, age, veteran's status, marital status, or disability.

I also understand that if employment is offered and accepted, such employment is not for any specified term and can be terminated at any time, with or without cause and with or without notice, by either OWBC or me. I further understand that this application is not, and is not intended to be, a contract of employment and that my at-will employment status cannot be changed except by a written document signed by the Executive Director of OWBC. I further understand that no supervisor, manager, or other employee or representative of OWBC, other than the Executive Director, has the authority to change the at-will nature of my employment and that any oral promises of employment for a definite period or statements that are otherwise contrary to my at-will status are not binding upon the OWBC.

I understand that, if offered employment, I will have **three days** to submit documents to verify my identity and authorization to work for OWBC in the U.S. and that failure to submit such documents within three days will preclude me from actually beginning employment with OWBC and may result in withdrawal of OWBC's offer of employment to me, or, if employment has begun, will result in the termination of my employment. I certify that any documents I furnish to verify my identity and authorization to work for OWBC in the U.S. will be authentic and will relate to me.

I understand additional documentation will be required as a pre-condition for employment and that I may be required to submit to a pre-employment physical, pre-employment drug testing, and a background security check. I understand and agree that my completion of this form does not guarantee that OWBC will offer me employment. I further understand and agree that if I am hired I am required to read and abide by all rules and regulations of OWBC governing the conduct of its employees, including those set forth in the OWBC Employee Handbook.

I understand that this application, and other OWBC paperwork, may be used interchangeably regardless of where OWBC locates employees, and I understand that OWBC is a subscriber under the Texas Workers' Compensation Act for covered employees.

Your signature reflects that you have read and understood all of the above statements and conditions of employment. Your signature further reflects that you understand and agree that any material misrepresentation or deliberate omission of the facts you provide to Opportunities for Williamson & Burnet Counties will justify termination of its consideration of your application for employment, or, if employment has begun, terminating your employment.

Signature of Applicant

Date

Pre-Employment Affidavit for Applicants for Employment at Certain Child Care Operations

The following affidavit is offered to satisfy the requirement of Texas Human Resources Code Section 42.0563, in accordance with Texas Civil Practices and Remedies Code Section 132.001.

Texas Human Resources Code Section 42.0563 requires an applicant for a position of employment at a General Residential Operation, Licensed Child Care Center, School-Age Program, Before and After-School Program, Licensed Child Care Home, and Registered Child Care Home to complete and submit, to the employing entity, this pre-employment affidavit disclosing whether the applicant has ever been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor.

This affidavit should be completed by the applicant during the application process and does not require notarization. The applicant may attach additional documentation to this form to support that a **charge** the applicant lists below was determined to be **false** (e.g., copy of the associated police report, certified copy of a court document, or extra pages which list all relevant facts), but this form must be completed in its entirety.

I swear or affirm the following:

- I **have never** been charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor.
- I **have been** charged with, adjudicated for, or convicted of having an inappropriate relationship with a minor. The following are all relevant facts pertaining to the charge, adjudication, or conviction:

List all relevant facts for each **charge**, including whether the charge was determined to be **true** or **false**. Examples of facts include but are not limited to: details about the incident, responding law enforcement agency and date of the charge. If you do not have any charges, write **none**.

Charge:

The charge was determined to be: True False

Charge:

The charge was determined to be: True False

List all relevant facts for each **adjudication**. Examples of facts include but are not limited to: details about the incident, responding law enforcement agency and date of the adjudication. If you do not have any adjudications, write **none**.

List all relevant facts for each **conviction**. Examples of facts include but are not limited to: details about the incident, responding law enforcement agency and date of the conviction. If you do not have any convictions, write **none**.

Declaration of Applicant

I declare under penalty of perjury that the foregoing is true and correct. I understand that failure to disclose the information required by this affidavit is grounds for termination of employment.

Printed Name (First, Middle, Last):

Date of Birth:

Address (Street, City, State, Zip Code, Country):

Signature _____

Signed on _____, in state of _____, County of _____.