

MIDLAND JUDICIAL DISTRICT  
COMMUNITY SUPERVISION AND CORRECTIONS DEPARTMENT  
215 W. Industrial  
Midland, TX 79701  
432-688-4100

**APPLICATION FOR EMPLOYMENT**

*Fill out the application form completely. The Midland Judicial District Community Supervision and Corrections Department is an Equal Opportunity Employer. It does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or the provision of services. Resumes will not be accepted in lieu of applications. This application becomes public record and is subject to disclosure. Proof of education (i.e., college transcripts, high school diploma) will be required.*

Name: \_\_\_\_\_ SSN. \_\_\_\_\_  
(Last, First, Middle)

Other Names Used (i.e., maiden name): \_\_\_\_\_

Are you authorized to work in the United States? Yes  No

Current Physical Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Position for which you wish to apply: \_\_\_\_\_

Date Available for Work: \_\_\_\_\_

Have you ever been convicted of a felony?  
Yes  No  I prefer not to answer.

Have you ever been convicted of a misdemeanor?  
Yes  No  I prefer not to answer.

Have you served a term of probation?  
Yes  No  I prefer not to answer.

Comments regarding criminal history: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*A background may be carried out before an offer of employment is made.  
A background check will be conducted if an offer of employment is made.  
Failure to disclose criminal history may result in retraction of an employment offer or termination of employment if the applicant is already employed at the time the background check results are obtained.*

Do you have any relatives working for the Midland CSCD? Yes  No

**REFERENCES**

*Please list three references that the Midland CSCD can contact to provide a reference regarding your ability to perform the duties of the job to which you are applying:*

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

**EDUCATION**

**Last High School Attended:**

Name of school: \_\_\_\_\_

City and state of school: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ (From) \_\_\_\_\_ (To)

Graduated: Yes  No

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**College Attended:**

Name of school: \_\_\_\_\_

City and state of school: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ (From) \_\_\_\_\_ (To)

Graduated: Yes  No

**If yes, the degree obtained:** \_\_\_\_\_

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**College Attended:**

Name of school: \_\_\_\_\_

City and state of school: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ (From) \_\_\_\_\_ (To)

Graduated: Yes  No

**If yes, the degree obtained:** \_\_\_\_\_

Do you speak a language other than English? Yes  No

If yes, what language(s) do you speak? \_\_\_\_\_  
How fluently? Fair  Good  Excellent

**EMPLOYMENT HISTORY**

*Provide your current and most recent employment below. You must provide a resume with a detailed work history highlighting your ability to perform the job duties to which you are applying.*

**Name of business/employer:** \_\_\_\_\_

**City and state of employer:** \_\_\_\_\_

**Start date:** \_\_\_\_\_ **Termination date (N/A if currently employed):** \_\_\_\_\_

**Phone number of employer:** \_\_\_\_\_

**Position held/job title:** \_\_\_\_\_

**Provide a brief description of your duties and responsibilities:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Full Time**  **Part-Time**  **Seasonal/Temporary**

**Reason for Leaving/wanting to leave:** \_\_\_\_\_

=====

**Name of business/employer:** \_\_\_\_\_

**City and state of employer:** \_\_\_\_\_

**Start date:** \_\_\_\_\_ **Termination date (N/A if currently employed):** \_\_\_\_\_

**Phone number of employer:** \_\_\_\_\_

**Position held/job title:** \_\_\_\_\_

**Provide a brief description of your duties and responsibilities:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Full Time**  **Part-Time**  **Seasonal/Temporary**

**Reason for Leaving/wanting to leave:** \_\_\_\_\_

=====

**EMPLOYMENT HISTORY CONTINUED**

Name of business/employer: \_\_\_\_\_

City and state of employer: \_\_\_\_\_

Start date: \_\_\_\_\_ Termination date (N/A if currently employed): \_\_\_\_\_

Phone number of employer: \_\_\_\_\_

Position held/job title: \_\_\_\_\_

Provide a brief description of your duties and responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Full Time  Part-Time  Seasonal/Temporary

Reason for Leaving/wanting to leave: \_\_\_\_\_

\_\_\_\_\_

**LICENSES OR CERTIFICATES**

*For example: CSO, Law Enforcement, LCDC, LPC, PSRS, etc.:*

Type of license or certification: \_\_\_\_\_

Date issued: \_\_\_\_\_ Expiration date (if applicable): \_\_\_\_\_

License number (if issued): \_\_\_\_\_

Issuing Authority (name & state): \_\_\_\_\_

\_\_\_\_\_

Type of license or certification: \_\_\_\_\_

Date issued: \_\_\_\_\_ Expiration date (if applicable): \_\_\_\_\_

License number (if issued): \_\_\_\_\_

Issuing Authority (name & state): \_\_\_\_\_

\_\_\_\_\_

**MILITARY SERVICE**

Were you a member of any branch of the U.S. Military (Army, Navy, Air Force, Marines, Coast Guard):      Yes  No

Date of Service (From / To): \_\_\_\_\_

Were you Honorably Discharged?      Yes  No

If no, please explain: \_\_\_\_\_

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

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED**

1. *I certify that all the information I provided in connection with my application, whether in this document or not, is accurate and complete. I understand that any misstatement, falsification, or omission of information shall be grounds for a refusal to hire or, if hired, termination.*
2. *As a condition of employment, I must provide legal proof of authorization to work in the U.S.*
3. *The department will check with the State Criminal Record Repository, Driver's License Bureaus, and/or the Federal Bureau of Investigation for any criminal history or driving records per applicable statutes, regulations, and policies.*
4. *I authorize any of the people or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, concerning any of the subjects covered by this application. I release all such parties from all liability for any damage resulting from furnishing such information to you.*
5. *I understand that Midland Judicial District CSCD requires a urine drug test to be conducted by an independent lab chosen by the Midland CSCD at their expense upon offer of employment. I authorize the Midland Judicial District CSCD to obtain the results of my urine drug test to determine illegal drug use that may block my employment with the Midland CSCD. I understand that a positive test result for illegal or controlled substances may result in the offer of employment being withdrawn and I will not be considered further for employment with the Midland Judicial District CSCD. I further understand that if I am allowed to begin work before the results of the urine drug test have been received by the Midland CSCD I will be subject to termination of employment if a positive test result for illegal or controlled substances is received.*

Applicant sign here: \_\_\_\_\_

**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
DATE