

## Dear Applicant for Employment:

Thank you for submitting an application for the current job opening. It is the West Central Texas Council of Governments (WCTCOG) desire to attract, employ, and retain the best persons possible for our staff.

**All applications for employment must be made on our Application for Employment form.** Please fill out the application carefully and completely. Neatness is important. All information is subject to verification. A false or misleading response will result in disqualification. Applications will be reviewed and scored using standard scoring instruments. From this scoring process, the best qualified applicants will be contacted and interviewed. Background checks, drug and alcohol testing, and/or other forms of testing may be conducted during the pre-employment process as required by the Department Director or grant funding source.

This process was established to ensure that each applicant is accorded an equal opportunity for consideration. All applicants will be notified of the outcome of the application process if an email address is provided.

Although it is the WCTCOG's desire to fill the position in a timely manner, no specific timetable exists for the completion of the above process.

Again, let me express our appreciation to you for taking an interest in employment with us. This process of thorough consideration helps ensure that the WCTCOG continues to provide rewarding opportunities for highly qualified people.

3702 Loop 322 Abilene, TX 79602 (325) 672-8544 FAX (325) 675-5214

## WEST CENTRAL TEXAS COUNCIL OF GOVERNMENTS 3702 Loop 322 – Abilene, TX 79602 (325) 672-8544

## **Application for Employment**

		Α	Applican	t Info	orma	ation				
Full Name:			Date:							
Address:										
Phone:				Emai	l:					
Position Adver	tised:						Date Available:			
Are you a citize	en of the United States?		ES NO	lf n	io, ar	e you a	uthorized to work in the U.S.?	YES	NO	
Have you ever	worked for this compar		S NO	lf y	yes, v	vhen?_				
Do you or your If yes, explain:	spouse have any relati	ves workii	ng for or s	servinç	g as a	an office	er of the WCTCOG?	YES	NO	
Have you ever If yes, explain:	been convicted of a feld		ES NO							
Have you beer If yes, explain:	n fired or asked to resigr	_	ES NO							
other work per contract, purch	formed by or for the W nase, sale, or service b ential conflict of interest	CTCOG, etween th between	nor shall le WCTC you and a	perso OG ar any me	nally nd an embe	profit d y perso	ts of any contract, service or directly or indirectly from any on or company. Is there any our family and the WCTCOG's	YES	NO	
			Ed	ucati	on					
High School:			_ Addres	ss:						
From:	To:	_ Did yo	u graduat		ES	NO				
College:			_ Addre	ss:						
From:	To:	_ Did yo	u graduat		ES	NO	Degree:			
Other:			_ Addre	ss:						
From:	To:	Did vo	u graduat		ES	NO	Degree:			

	References
Please list	three professional references.
Full Name:	Relationship:
	Phone:
Address:	
Full Name:	Relationship:
	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
-	Employment History
	Start with your present or most recent job. Include Military Service.  Use additional employment sheets if necessary. If there is no former employer, write "NONE".
Company:	Phone:
Address:	Supervisor:
Job Title:	
Duties, Res	ponsibilities, and Accomplishments:
,	
From:	To: Reason for Leaving:
May we cor	YES NO ntact your previous supervisor for a reference?

Company:				Phone:	
Address:				Supervisor:	
Job Title:					
Duties, Responsibil	ities, and Accomplishments:				
From:	To:	Reason fo	r Leaving:		
		YES	NO		
May we contact you	ur previous supervisor for a reference?				
Company:				Phone:	
۸				Supervisor:	
Job Title:					
Duties, Responsibil	ities, and Accomplishments:				
From:	To:	Reason fo	r Leavina:		
From:	To:	Reason fo	r Leaving:_ NO		

Company: Address: Job Title: Duties, Resp	ponsibilities, and Accomplishments:					
From:	To:					
May we con	tact your previous supervisor for a reference?	YES	NO П			
	Military	Service				
Branch:			From:		To:	
Rank at Disc	charge:	Type of Di	scharge:			
If other than	honorable, explain:					
	Additional	mormation				
	Disclaimer a	nd Signatu	re			
I certify that my answers are true and complete to the best of my knowledge.						
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
Signature:				Date:		