



Frio County Emergency Services District No.1



Employment Application

Important Instructions:

- Please *TYPE* or *PRINT* in *INK*
- Applications are accepted only for job titles for which recruitment is currently being conducted.
- All information requested must be completed on the application. Incomplete or illegible applications will not be processed.
- This application form, and its attachments, are official property of the Frio County Emergency Services District (ESD) No. 1 and will not be returned, reused or copied for you after being submitted. You should retain a copy of this application for future use or reference.
- The Frio County Emergency Services District No. 1 affords equal employment opportunity to all individuals regardless of race, color, national origin, sex, religion, age, qualified disability status or veteran status.
- Reimbursement for travel expenditures during a testing or interview process is not available and will be completed when not on shift.
- Please make sure you meet the minimum qualifications and the application deadline.
- Applications must be submitted by email to info@txesd.net



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Section A: Applicant Information

Official Job / Title Applying For		Date of Application		Sex	
				<input type="checkbox"/> Male <input type="checkbox"/> Female	
Social Security #			Date of Birth		
Last Name		First Name		Middle Name	Suffix (Jr, Sr, III, Etc)
Mailing Address		City		State	Zip
Cell Phone #	Home Phone #		Email Address		
Driver's License #		State Issuing License		Class or Type of License	
Can you provide documentation to your identity and your legal right to work in the United States?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
Check the schedules you are willing to work:					
<input type="checkbox"/> Other than 8 AM - 5 PM		<input type="checkbox"/> Weekends/Holidays		<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time
Are you presently employed? If yes, specify where					
<input type="checkbox"/> Yes <input type="checkbox"/> No		Specify:			
Have you ever been terminated or asked to resign from a previous employer?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
Are you over the age of 18? If yes, can you provide proof of your eligibility to work?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					



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If you are related to any Frio County ESD No. 1 employees? If yes, specify names, relationship and department:

Have you ever been employed/volunteered with Frio County ESD No. 1 or any of the VFD in Frio County?

Yes No If Yes, From: _____ To: _____

Have you ever applied with Frio County ESD No. 1?

Yes No If Yes, When: _____

Are you currently in another hiring process with a different agency?

Yes No

Are you able to perform all the essential functions of the job for which you are applying, with or without, reasonable accommodation?

Yes No

If you have been employed or attended school under other names, list names and dates of use:

Dates of Military Service	Branch of Service
From: _____ To: _____	_____

From: _____ To: _____

Section B: Answer all questions.

Have you ever been convicted of a crime (misdemeanor, felony, or military court martial)?

Yes No

Have you ever been placed on probation?

Yes No

Have you ever been placed on deferred adjudication?

Yes No

Are there criminal charges currently pending against you?



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Yes No

For any yes answer to questions 25-29, list type or offense, location and fine or sentenced received. Convictions do NOT necessarily disqualify an applicant from employment consideration.

Section C: Education, Certification, Licenses & Additional Skills

Do you have a High School Diploma or GED?

Yes No

Check highest level of completion:

Some HS HS/GED Some College

Associate Bachelor Master Doctoral

College or University Name	From	To	Major	Degree earned	Sem. Hours
1.					
2.					
3.					

License or Certifications	Date Earned	Expiration Date
1.		
2.		
3.		
4.		

In what language(s) other than English are you proficient?

1. Speak Read Write

2. Speak Read Write



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Additional Skills: List equipment, software, specialized systems or other skills that are related to the job for which you are applying.

Section D: List jobs in reverse order starting with your most recent job. List your work history for the last 10 years including volunteer, part-time, temporary, self-employment and military jobs. Provide a detailed description of duties performed. Do NOT substitute a resume for completion of this section. You may attach additional pages in the same format if more space is needed.

Employer	Address	City, State and Zip Code	
Job Title	From (Month/Year)	To (Month/Year)	
Hourly or Salary Rate	Hours per Week	Reason for Leaving	
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Duties:

Employer	Address	City, State and Zip Code	
Job Title	From (Month/Year)	To (Month/Year)	



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Hourly or Salary Rate	Hours per Week	Reason for Leaving
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Duties:		
Employer	Address	City, State and Zip Code
Job Title	From (Month/Year)	To (Month/Year)
Hourly or Salary Rate	Hours per Week	Reason for Leaving
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Duties:		



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Employer	Address	City, State and Zip Code	
Job Title	From (Month/Year)	To (Month/Year)	
Hourly or Salary Rate	Hours per Week	Reason for Leaving	
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Duties:			
Employer	Address	City, State and Zip Code	
Job Title	From (Month/Year)	To (Month/Year)	
Hourly or Salary Rate	Hours per Week	Reason for Leaving	
Supervisor's Name	Supervisor Phone #	May we contact this supervisor?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	



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Duties:

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References: Name	Relationship/ Occupation	Phone #	Email Address
1.			
2.			
3.			



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APPLICANT ACKNOWLEDGEMENT

Drug Free Work Environment: Frio County ESD No. 1 is committed to providing a safe, efficient, drug-free work environment for all employees. In keeping with this commitment, finalists for all job openings will be required to provide body fluids (blood or urine) to determine the use of alcohol, illegal or controlled substances. Failure of the drug/alcohol screen will result in denial of employment.

Falsification of Information: I hereby certify that all statements made on this application and attachments are true and correct to the best of my knowledge and belief. I understand that any false statement, misrepresentation or omission made by me on this application or subsequent interview(s) could cause me to be ineligible for employment or terminated from employment. Further I understand that I am required to abide by all rules and regulations of Frio County ESD No. 1.

Verification of Information: I authorize Frio County ESD No. 1 its constituents to investigate and verify the facts claimed by me on this application. I further authorize my former employers to provide any information requested by Frio County ESD No. 1. I understand that employment processing may include a criminal background check, drug screening and/or review of the driving record. I hereby release Frio County ESD No. 1 and its agents from all liability in making any investigation and inquiry related to information contained in the application form.

I understand that nothing in this application or in any prior or subsequent written or oral statement creates a contract of employment or any rights in the nature of a contract. I agree to submit to medical examination and drug screening, if required.

Frio County ESD No. 1 participates in all State and Federal law, requiring all employers to verify the identity and employment eligibility of all persons hired to work in the United States. Frio County ESD No. 1 will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

I understand that, if accepted, this application does not constitute a contract of employment for any specific period of time. I further understand that all employment is at will and may be terminated by notification from either party at any time, with or without cause, and without prior notice.

I have read and agree to the above statements

DATE

SIGNATURE OF APPLICANT



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WAIVER AND RELEASE

In consideration of my being permitted to take the Physical Assessment required in connection with my application for the position of Fire Chief, and having been advised that as a part of this assessment, it will be necessary for me to demonstrate my strength, endurance, and physical ability in a series of tests.

I, _____ (print name) do hereby release Frio County ESD No. 1 and their respective officials and employees from any and all claims, damages, liabilities, actions and causes of action whatsoever which may occur or arise as a result of any injury or damage that I may sustain as a result of participating in such examinations. I make this release for heirs, my executors, administrators, and myself.

PLEASE COPY THE FOLLOWING STATEMENT LEGIBLY AND IN YOUR OWN HANDWRITING:

“I CERTIFY THAT I HAVE READ THE FOREGOING WAIVER AND RELEASE AND UNDERSTAND ITS PROVISIONS.”

DATE

SIGNATURE OF APPLICANT