

ETM COMPUTER SERVICES
 900 N.E. LOOP 410 STE D 101, SAN ANTONIO, TX 78209
 PHONE: 210-822-7700 FAX: 210-822-7712

Employment Application

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

DATE _____

READ INSTRUCTIONS CAREFULLY:

- These instructions must be followed exactly. Fill out the application completely, in ink or type. If questions are not applicable, enter "NA".
- Do not leave any questions blank.
- Résumés will be accepted for additional information, but not in place of a completed ETM Computer Services application.
- Be sure to sign the application when it is completed.
- A separate application is required for each posting. Unsolicited applications will not be accepted.
- All applications must be received at the address listed above by the closing deadline. Faxed applications will be accepted at the fax number listed above.

NAME _____ Social Security No. _____
(Last) (First) (Middle)

ADDRESS _____
(Street) (City) (State) (Zip)

List any other names used if different from name given on this application. _____

() _____
 Work Phone

() _____
 Home Phone

() _____
 Cell Phone

 E-mail Address

Position Number and Title you are applying for: _____
Position Number Position Title

Salary expected \$ _____ Date available for work _____

Have you ever been subject to conviction, deferred adjudication, probation, supervised release, or community supervision for a felony or crime of theft?
 Yes No If yes, please provide specific details on a separate page. This may not disqualify you, but a false statement will.

Current Driver's License # (if required for position) _____
(State) (Number)

EDUCATION:

Did you graduate from high school or receive GED? Yes No

(NOTE: TRANSCRIPTS MAY BE REQUIRED FOR VERIFICATION OF EDUCATION)

Type of School	Name and Location of School	Number of Semester Hrs. Completed	Graduated		Type of Diploma or Degree	Major Field of Study
			Yes	No		
COLLEGE OR UNIVERSITY	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
TECHNICAL OR VOCATIONAL	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

List college subject(s) in which you have 12 or more semester hour credits: _____

Current Licenses/Certifications/Registrations (Indicate types and dates received): _____

Special Skills/Qualifications: List all special skills you possess such as computer software skills : _____

Approximate typing speed : _____

Do you speak Spanish? (If desired or required for this position) Yes No If yes, how fluently? Fair Good Excellent

EMPLOYMENT RECORD:

Please indicate at least the last 10 years of employment. **Start with present or most recent position and work back.**

You may attach a résumé for additional information, *but not in place of a completed application.*

DO NOT LEAVE ANY BLANK SPACES.

Are you presently employed? Yes No

If yes, why are you seeking other employment? _____

MAY WE CONTACT?:

Present Employer Yes No

Date of Employment: From _____ To _____ Salary _____

Name of Employer _____ Business Address _____

Type of Business _____

Supervisor's Phone _____ Name & Title of Immediate Supervisor _____

Title of your Position _____ Reason for leaving _____

Description of work performed _____

Date of Employment: From _____ To _____ Salary _____

Name of Employer _____ Business Address _____

Type of Business _____

Supervisor's Phone _____ Name & Title of Immediate Supervisor _____

Title of your Position _____ Reason for leaving _____

Description of work performed _____

Date of Employment: From _____ To _____ Salary _____

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Name of Employer _____ Business Address _____

Type of Business _____

Supervisor's Phone _____ Name & Title of Immediate Supervisor _____

Title of your Position _____ Reason for leaving _____

Description of work performed _____

Date of Employment: From _____ To _____ Salary _____

Name of Employer _____ Business Address _____

Type of Business _____

Supervisor's Phone _____ Name & Title of Immediate Supervisor _____

Title of your Position _____ Reason for leaving _____

Description of work performed _____

Please tell us in your own words anything that you think we should know when considering you for employment.

Give the names and addresses of three persons, other than relatives, who have knowledge of your work experience or ability.

NAME	ADDRESS AND PHONE	OCCUPATION

You may indicate any additional experience or training you have had which, in your opinion, would qualify you for the position you seek. Continue on the back of this page, if necessary.

After reading the job description for the available opening, I believe that I meet the minimum requirements and am able to perform the primary functions of the job. I hereby certify that the foregoing statements as well as those on any attachment(s) to this form are, to the best of my knowledge, true and correct and that they are all given of my own free will. I agree that any misstatement(s) or omission(s) as to material facts will constitute grounds for unfavorable consideration or dismissal from employment. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S. I understand that there may be a background check with the Texas Department of Public Safety and/or the Federal Bureau of Investigation for any criminal history in accordance with applicable statutes. I authorize any of the persons or organizations referenced in this application, unless otherwise noted, to give you any and all information concerning my previous employment, education or any other information they might have with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you. I understand that if employed, I will serve an initial provisional period. I also understand that employment with ETM Computer Services is at the will of the organization and that, if hired, either I or ETM Computer Services may terminate this relationship at any time, for any reason, with or without cause or notice. Further, this application or any position offer is not a contract guaranteeing employment for any specific duration.

Applicant's Signature _____ Date _____

EQUAL EMPLOYMENT OPPORTUNITY SURVEY

It is the policy of ETM Computer Services to comply fully with the non-discrimination provisions of all Federal and State laws and regulations by assuring that no person shall be excluded from consideration for recruitment, selection, appointment, training, promotion, retention, or any other personnel action, or be denied any benefits or participation in any educational programs or activities on the grounds of race, religion, color, national origin, sex, disability, age or veteran status.

The following requested information will be held confidential and in no way affects you as an individual applicant. It will be used to find out how effective our recruitment efforts are in reaching all segments of the population and in validating our selection methods, and for EEO reporting purposes in accordance with the applicable Federal laws, rules, and regulations. You do not have to complete this form to be considered for a position with ETM Computer Services.

NAME _____ **JOB NUMBER** _____
(Last, First, MI)

ADDRESS _____ **PHONE NUMBER** _____
(Street)

(City, State, Zip)

SOCIAL SECURITY NUMBER _____ **BIRTHDATE** _____

RACE/ETHNIC GROUP:

- Asian (Pacific Islander)
- Black
- Hispanic
- Native American
- White

REFERRAL SOURCE:

- ETM Website
- TWC referral
- Internet
- Newspaper
- Job Posting/Walk-in
- Employee
- Other _____

- Female
- Male