



CORYELL CITY WATER SUPPLY DISTRICT

Serving the Community since 1969

9440 FM 929 • Gatesville, Texas • 76528 • (254) 865-6089 • Fax: (254) 865-0148

An Equal Opportunity Employer: Under the provisions of the Americans with Disabilities Act (ADA), reasonable accommodations will be made during the selection process upon your request.

Instructions: Please print or type in ink. If more space is needed, attach a continuation sheet. Please complete all sections of the application.

Position for which you are applying _____ Location _____

Name _____

Last First Middle

Address _____

Street City State Zip Code

Phone _____

Home Work Cell

Social Security Number _____

- For the purpose of compliance with the United States Immigration and Nationalization Act, are you legally eligible for employment in the United States? _____ Yes _____ No
- Were you previously employed by Coryell City Water Supply District? _____ Yes _____ No
If yes, please provide employment dates and position title. _____
- Have you ever been convicted of a felony or misdemeanor, other than minor traffic violations? _____ Yes _____ No If yes, explain. _____
- Do you have a valid driver's license? _____ Yes _____ No Please give driver's license type, number, state, and expiration date. _____
- Have you ever been fired or resigned from a position after being notified you would be fired? _____ Yes _____ No If yes, explain. _____

	Name & Location	Date		Degree or Credits Completed	Date Graduated	Major Area of Study
		From	To			
High School or Highest Grade Completed						
College or University						
Graduate School						
Business or Trade School						

Employment History

Name, Address, & Phone Number of Employer	From Mo./Yr.	To Mo./Yr.	Starting Salary	Ending Salary	# Hours Per Week	Reason For Leaving
Supervisor's Name/Telephone						
	Position Title:					
	Description of Responsibilities & Duties:					

Employment History

Name, Address, & Phone Number of Employer	From Mo./Yr.	To Mo./Yr.	Starting Salary	Ending Salary	# Hours Per Week	Reason For Leaving
Supervisor's Name/Telephone						
	Position Title:					
	Description of Responsibilities & Duties:					

References

Name: _____ Telephone #: _____

Name: _____ Telephone #: _____

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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

EVALUATION OF CRIMINAL CHARGE(S)/CONVICTION(S) (attach additional pages as necessary)

SECTION I: BASIC INFORMATION

Type of License Requested	Last Name	First Name	Middle Name	Suffix
Last 4 of SSN	Email Address	Date of Birth / /	Maiden/Other Names	
Mailing Address:		Home Phone:	Work Phone:	

Please check one of the following boxes:

- I have been arrested or received a criminal conviction and my history is listed in Section(s) II/III.
- A Texas DPS or F.A.S.T. report is attached attesting to the criminal history.*

SECTION II: CONVICTION INFORMATION*

(List all convictions, including deferred or dismissed cases, regardless of age.)

Date Convicted / /	Offense(s) Convicted Of			
Docket Number (if known)	Trial Date (if applicable) / /			
Court Where Convicted		Court Mailing Address		
City	State	County	ZIP+4 -	Phone Number () -

SECTION III: ARREST INFORMATION* (List all arrests, regardless of age)

Date Arrested or Charged / /	County and/or Court, Address, Phone #, Where Charges are Pending			
Offense(s) Charged With (indicate felony or misdemeanor and class)				
Docket Number (if known)	Trial Date (if applicable) / /			
Name of Arresting Agency		Arresting Agency Mailing Address		
City	County	ZIP+4 -	Phone Number () -	

I affirm that the above information is true and correct. I understand that fraudulent or falsified information could result in denial of this application pursuant to Tex. Admin. Code § 30.33 or revocation of my license pursuant to Tex. Water Code § 7.303.

/ /

Name (Type or Print) Signature Date

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
CRIMINAL CHARGES/CONVICTION EVALUATION INSTRUCTIONS

SECTION I: BASIC INFORMATION

License Program – TCEQ License type for which you want to apply (Water, Wastewater, OSSF, etc.)
Last Name/First Name - as it appears on your Government-issued ID
Suffix - Jr., Sr., III, etc., as it appears on your Government-issued ID
Last 4 of SSN - Last 4 digits of your Social Security Number
Email Address - email address at which we can contact you
Date of Birth - MM/DD/YYYY (ex: 04/01/1978), as it appears on your Government-issued ID
Mailing Address – Your mailing address you want TCEQ correspondence to be delivered
Home Phone – Your current home phone number
Work Phone – Your current employer's phone number (if applicable)

SECTION II: CONVICTION INFORMATION

Date Convicted - date of guilty verdict (MM/DD/YYYY)
Offense(s) List all convictions, dismissals, and deferred cases. Convicted Of - List all offenses of which you were convicted. Include the class and level of charge – for example, First Degree Felony or Class C Misdemeanor.
Docket Number - What is the number of your court proceedings?
Trial Date - When was your trial (MM/DD/YYYY)?
Court Where Convicted - ex: Travis County Court # 3
Court Mailing Address/City/State/ZIP+4/Phone Number

SECTION III: ARREST INFORMATION

Date Arrested or Charged - date of arrest or court appearance (MM/DD/YYYY)
County and/or Court, Address, Phone #, Where Charges are Pending - ex: Travis County Court # 3
Offense(s) Charged With (indicate felony or misdemeanor and class) - List all offenses you have been charged with here. Include the class and level of charge – for example, "Class A Felony" or "Class C Misdemeanor."
Docket Number - What is the number of your court proceedings?
Trial Date - What is your trial date (MM/DD/YYYY)
Name of Arresting Agency - What law enforcement agency arrested you?
Arresting Agency Mailing Address/City/State/ZIP+4/Phone Number

* If you cannot recall arrest(s) or conviction(s), you may go to one of the websites below and purchase a report to submit along with this signed form. You must also attest to any criminal arrest or conviction outside the state of Texas.

- TxDPS Public Criminal History Search:
<https://records.txdps.state.tx.us/DpsWebsite/CriminalHistory/>
- Fingerprint Applicant Services of Texas (F.A.S.T):
http://www.txdps.state.tx.us/administration/crime_records/pages/applicantfingerprintservices.htm

Other helpful website:

- To locate Conviction Docket Numbers, etc., you will need to contact the court in which you were convicted: <http://www.courts.state.tx.us/>

CONTACT INFORMATION:

Mailing Address:
Occupational Licensing, MC-178
P.O. Box 13087
Austin, TX 78711-3087

Phone: (512) 239-6133
Fax: (512) 239-6272
Email: licenses@tceq.texas.gov
Webpage: www.tceq.texas.gov/licensing