MACBEE SPECIAL UTILTIY DISTRCT **P O BOX 780** WILLS POINT, TEXAS 75169 903-873-2109

APPLICATION OF EMPLOYMENT

MacBee is an equal opportunity employer and selects the best-matched individual for the job based on jobrelated qualifications, regardless of race, color, creed, sex, national origin, age, handicap, or other protected $% \left({{{\mathbf{r}}_{i}}} \right)$ groups under state, federal, or local law.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you have attached a resume.

Yes O

NoO

Yes O

NoO

Personal Information Name City Address

Address	City	State	Zip
Phone Number	Email Address		
Are you legally eligible to work in the US?	Are you a veterar	ו?	
Yes O No O	Yes O	No O	
Have you been told the job's essential function, or have you vie	ewed a copy of the job description listing the job's	essential function?	
Yes O No O			

Yes O

Can you perform the essential function of the job with or without reasonable accommodation?

D	05	 nr
	03	υı

Position				
Position you are applying for		Available start date	Desired pay	
Employment desired	⊖ Full	○ Part-time		

Are you willing to work weekends, holidays, or after hours as required by the job position?

Please list any education or training that you believe relates to the position applied for and would assist you in performing the work, such as schools, colleges, degrees, vocational, or technical programs. Qualifications

School Name/Other	Degree	Address/City/State

Reference (business and professionaly only)				
Name	Title	Company	Phone	

Employment History					
Employer	Job Title		Dates		
Work Phone	Starting Pay Rate		Ending Pay Rate		
Address	City	State	Zip		
Employer	Job Title	1	Dates		
Work Phone	Starting Pay Rate		Ending Pay Rate		
Address	City	State		Zip	
Employer	Job Title		Dates		
Work Phone	Starting Pay Rate		Ending Pay Rate		
Address	City	State		Zip	
Additional Information					
If selected for employment, are you willing to submit to a back	kground check or drug test?				
Yes O No O					
Signature Disclaimer					
I certify that the facts outlined in this Application for Employment are accurate and complete to the best of my knowledge.					
l understand that if I am employed, my dismissal may result in false statements, omissions, or misrepresentations. I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of					
category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at Any time, with or without cause or without notice to the other party.					
Name (please print	Signature				
Date					

Once use only				
Interviewed by		Signature		
Remarks				
Hired Date	Position /Department		Salary/Wage	

Revised 2025