

Scurry County Appraisal District

Application for Employment

Instructions for Applicants

Thank you for your interest in employment with the Scurry County Appraisal District (SCAD). Please read these instructions carefully before completing your application.

1. Complete all sections of the application in ink or via the provided fillable PDF. Incomplete applications may not be considered. Résumés may be attached but will not be accepted in lieu of a completed application.
2. Include copies of any relevant certifications, licenses, or transcripts. If the position requires a valid Texas driver's license, attach a photocopy.
3. Submit applications in person, by mail, or electronically to:

Scurry County Appraisal District
Attn: Board Chairman
2612 College Avenue
Snyder, Texas 79549

employment@scurrytex.com

4. Applications are currently being accepted
5. Applicants selected for further consideration will be required to sign the Authorization and Release section to allow verification of employment history, references, and a background check.

Cover Letter to Applicants

Dear Applicant,

We appreciate your interest in joining the team at the Scurry County Appraisal District. Our mission is to provide fair, accurate, and equitable property appraisals in accordance with the laws of the State of Texas, serving both the public and our local taxing entities with integrity and professionalism.

SCAD offers a professional work environment where dedication, positive work ethic, and collaboration are valued and rewarded. We seek individuals who are committed to public service and who take pride in the quality of their work.

We look forward to reviewing your application and learning more about your qualifications. Should you have any questions during the application process, please feel free to contact our office.

Sincerely,

Richard Petree
Interim Chief Appraiser
Scurry County Appraisal District

Application for Employment

Position Applied For:	
Date of Application:	
Available Start Date:	
Current Employment Status:	Full-time Part-time Temporary

Personal Information

Name (Last, First, Middle):	
Address:	
City, State, ZIP:	
Phone (Home):	
Phone (Cell):	
Email Address:	

Education

High School:	Graduation Year:
College / Vocational School:	Degree / Major:
Other Training / Certifications:	

Employment History (List most recent first; include last 10 years)

Employer 1

Employer:	
Job Title:	
Address:	
Dates (From–To):	
Supervisor & Contact #:	
Starting / Ending Salary:	
Responsibilities:	
Reason for Leaving:	

Employer 2

Employer:	
Job Title:	
Address:	
Dates (From–To):	
Supervisor & Contact #:	
Starting / Ending Salary:	
Responsibilities:	
Reason for Leaving:	

Employer 3

Employer:	
Job Title:	
Address:	
Dates (From–To):	
Supervisor & Contact #:	
Starting / Ending Salary:	
Responsibilities:	
Reason for Leaving:	

Employer 4

Employer:	
Job Title:	
Address:	
Dates (From–To):	
Supervisor & Contact #:	
Starting / Ending Salary:	
Responsibilities:	
Reason for Leaving:	

Employer 5

Employer:	
Job Title:	
Address:	
Dates (From–To):	
Supervisor & Contact #:	
Starting / Ending Salary:	
Responsibilities:	
Reason for Leaving:	

References (Not former employers)

Name & Relationship	Phone Number

Authorization & Release for Background Check and Reference Verification

I, the undersigned, authorize the Scurry County Appraisal District and its designated representatives to:

1. Contact any and all current and former employers, educational institutions, personal references, and other sources deemed necessary to verify my qualifications, employment history, education, certifications, and character.
2. Conduct a criminal history check, driver's record check, and other background investigations relevant to the position for which I am applying.
3. Obtain any information concerning my previous employment, education, and character, whether or not it is part of public record.

I release and hold harmless the Scurry County Appraisal District, its officers, employees, and agents, as well as all individuals and organizations providing information, from any liability or damage resulting from the furnishing or receipt of such information.

This authorization is valid for the duration of my application process and, if hired, for the duration of my employment.

Signature of Applicant:	
Printed Name:	
Date:	
Driver's License Number & State:	
Date of Birth (for background check purposes only):	