at\_12:30 o'clock\_p \_M

## Fax to: 903-408-4291 Att: Sandy From: Classification JAIL COUNT Mar 23 2021 - April 5 2021

#16,719

!

APR	13	2021	
JENNIFER County Cler By	R LINE rk, Hur	DENZWEIG	5

DATE	MALE	FEMALE	HOLDING	Hopkins/Collin Co	<u>PTS</u>	<u>TOTAL</u>
23-Mar	199	53	5	1	0	258
24-Mar	195	51	5	1	0	252
25-Mar	191	57	12	1	0	255
26-Mar	193	51	5	1	0	250
27-Mar	195	50	16	1	0	262
28-Mar	202	51	8	<b>1</b> '	0	262
29-Mar	203	53	7	1	0	264
30-Mar	199	51	6	1	0	257
31-Mar	194	51	10	1	0	256
1-Apr	197	51	7	1	0	256
2-Apr	198	50	4	1	0	253
3-Apr	200	50	6	1	0	257
4-Apr	203	49	6	1	0	259
5-Apr	206	49	0	1	0	256

///

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without a reason. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.

# \*Full time – 40 hours a week with benefits – \*Part time/hourly-As needed with retirement -- \*Temporary – Special projects with an end date -- \*Seasonal – Summer/Holiday help only.

Signature of Applicant Jaycee Collett	<sub>Date</sub> <u>2/8/2021</u>		
Commissioner's Court Approval Date:	APR 13 2021		
Job Title Grade	Date Date of Employment: _Department: Hourly Rate/ Salary *Temporary*Seasonal		
**Expected Temporary Assignment Completion Date			
Employee Evaluation on file	Effective Date <u>4-5-202</u>		
Notes New Hire	A X		
Signature Elected Official/Dept. Head	Lapt Demore		



I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without a reason. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to ablde by all rules and regulations of the employer.

<u>\*Full time – 40 hours a week with benefits – \*Part time/hourly-As needed with retirement -- \*Temporary</u> – Special projects with an end date -- \*Seasonal – Summer/Holiday help only.

Signature of Applicant Date 02/01/21 APR 13 2021	
Name Date Date   Employed? -V_Yes No Date of Employment: 4/5/2021   Job Title DO Department: 521   Grade Gr44 Hourly Rate/ Salary 437,008.00   *Fulltime *PT/hourly *Temporary *Seasonal	
Employee Evaluation on file Effective Date	
Signature Elected Official/Dept. Head Capt. Damore	

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without a reason. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

## \*Full time – 40 hours a week with benefits – \*Part time/hourly-As needed with retirement – \*Temporary – Special projects with an end date – \*Seasonal – Summer/Holiday help only.

Signature of Applicant	Date		
Commissioner's Court Approval Date: APR 13 2021			
Name Dawn Rojo	Date 4/5/2021		
Employed? Xes No Date of Employ	yment:		
Job Title Department: _	Jail		
Grade <u>G5</u> Hourly Rate/ S	alary_\$43,08.00		
*Fulltime*PT/hourly*Temporary			
**Expected Temporary Assignment Completion Date			
Employee Evaluation on file Effective Dat	e_3/7/202/		
Notes Promoted to Sergeer			
Signature Elected Official/Dept. Head			

111

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without a reason. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.

# <u>\*Full time – 40 hours a week with benefits – \*Part time/hourly-As needed with retirement -- \*Temporary</u> -- Special projects with an end date -- \*Seasonal – Summer/Holiday help only.

Signature of ApplicantCrystal Yoesting		Date 03/05/2021	
Commissioner's Court Approval Date:	APR 13 2021		
Name <u>CryStal</u> <u>YDESting</u> Employed? <u>Yes</u> <u>X</u> No Job Title <u>Community Activity</u> Grade <u>V</u> *Fulltime <u>Y</u>	Hourly Rate Salary "	μ	
**Expected Temporary Assignment Completion Date			
Employee Evaluation on file	_ Effective Date $4 - 12 - 12$	2021	
Notes Transfer from HCSO to Juvenile Probation			
Signature Elected Official/Dept. Head Music Sandlin			

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

 $\sqrt{}$ 

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without a reason. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

## <u>\*Full time – 40 hours a week with benefits – \*Part time/hourly-As needed with retirement –</u> \*Temporary – Special projects with an end date – \*Seasonal – Summer/Holiday help only.

Signature of Applicant	······	Date		
Commissioner's Court Approval Date:	APR 13 2021			
Name Johny Pairsh		Date 4-5.2		
Employed?YesNo	Date of Employme			
Job Title Equip Operator	Department:	ct l		
Grade	Hourly Rate/Sala	my) <u>37,0000</u> 00		
*Fulltime*PT/hourly	*Temporary	*Seasonal		
**Expected Temporary Assignment Completion Date				
Employee Evaluation on file	_ Effective Date _	4-12-2021		
Notes Iransfer from Re	ad Crew	to Pct 1		
Signature Elected Official/Dept. Head				

1

1

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without a reason. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

## \*Full time – 40 hours a week with benefits – \*Part time/hourly-As needed with retirement – \*Temporary – Special projects with an end date – \*Seasonal – Summer/Holiday help only.

Signature of Applicant	Date			
Commissioner's Court Approval Date:	APR 13 2021			
Name Johnny Pairsh	<b>Date</b> 04/05/2021			
Employed? <u>X</u> Yes <u>No</u>	Date of Employment:			
Job TitleCDL Driver	Department: Road Crew			
Grade	Hourly Rate/ Salary			
*Fulltime <u>X</u> *PT/hourly	_*Temporary*Seasonal			
**Expected Temporary Assignment Completion Date				
Employee Evaluation on file	Effective Date 4-12-2021			
Notes <u>Resign from Road Crew effective 04</u> Signature Elected Official/Dept. Head				

///

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without a reason. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.

# \*Full time – 40 hours a week with benefits – \*Part time/hourly-As needed with retirement -- \*Temporary – Special projects with an end date -- \*Seasonal – Summer/Holiday help only.

		Date 03-30-21	
Commissioner's Court Approval Date:	APR 13 2021		
Name Robert Houghton		Date 3/20/2021	
Employed? Yes No	Date of Employment:	, 4-5-21	
Job Title Egginment BlackTor	Department:CT. 4		
Grade	Hourly Rate/ Salary	20	
*Fulltime*PT/hourly	_*Temporary	_*Seasonal	
**Expected Temporary Assignment Completion Date			
Employee Evaluation on file	Effective Date $-4-5$	-21	
Notes Housey Employee - NeupHire			
Signature Elected Official/Dept. Head			

