EDWIN A. KLEIN, JUDGE 420th District Court



TY McCARTY – DIRECTOR
MONICA MARTIN – DEPUTY DIRECTOR
THOMAS ANTHONY - SUPERVISOR

NACOGDOCHES COUNTY CSCD

District Probation

206 WEST PILAR ST. NACOGDOCHES, TEXAS 75961 (936) 560-7715 Fax (936) 560-5790

Job Announcement

Position: Assistant Community Supervision Officer
Department: Nacogdoches County CSCD
Application Deadline: 12/09/22
Salary: Based on experience

Type: Regular, Full-Time

General Description:

Under the direction of the Nacogdoches County CSCD the Assistant Community Supervision Officer provides casework services for those offenders placed on Indirect supervision by the Courts of Nacogdoches County. This position performs moderately complex social service work in providing supervision, and counseling for felony and or misdemeanor offenders. This position will also serve as a Court Officer for the County Court at Law.

Knowledge, Skills & Abilities:

- General working knowledge of case management techniques
- An understanding of human behavioral patterns and the ability to apply good judgment in dealing with the problems of individual offenders
- Ability to assess the needs of individual offenders, and to utilize available continuum of sanctions in meeting those needs in a firm. but rehabilitative manner
- Ability to maintain effective working relationships with officials of other county. state. municipal and civic organizations and other agencies
- Ability to comply with code of ethics set forth by the TDCJ-CJAD
- Ability to work independently and as part of a team
- Ability to use independent judgment and analytical thinking skills
- Excellent verbal and written communication skills
- Skill in using computers and performing data entry

Qualifications:

- High School Diploma or GED, Bachelor Degree preferred due to the possibility of future advancement.
- One year of experience in full-time community supervision, casework or counseling preferred,
- Bilingual in English/Spanish preferred

Additional Requirements:

(Reasonable accommodations may be made to enable individuals with disabilities to perform essential job functions)

- Regular punctual attendance on the job
- Valid Texas Driver License or ability to obtain within thirty days from date of hire
- Exposure to varying environmental conditions including outdoor exposure during periods of extreme cold or extreme hot and humid conditions

- Ability to operate or ride in vehicles for extended periods of time
- Sufficient mobility to operate in an office environment and perform field work as needed
- Ability to sit or stand for extended periods of time
- Ability to bend, reach, pull, and push to properly and safely file materials on a continuing basis
- Ability to move, Lift, and carry up to 25 pounds for short periods of time
- Ability to visually identify offenders
- Ability to effectively handle multiple tasks in a high stress environment
- Ability to effectively communicate with offenders and the public
- Ability to read, speak, hear, and write the English language

Instructions:

Complete the Nacogdoches County CSCD Employment Application and submit to the address below by 12/09/22. Resume and professional references may be attached to the application, but are not accepted in place of the completed application.

Submit application to: Nacogdoches County CSCD

Attn: Ty McCarty 206 W. Pilar

Nacogdoches, TX 75961

Email: tmccarty@co.nacogdoches.tx.us

NACOGDOCHES COMMUNITY SUPERVISION AND CORRECTIONS (ADULT PROBATION) DEPARTMENT

COPIES OF THE DOCUMENTS LISTED BELOW MUST ACCOMPANY THE APPLICATION AND PERSONAL HISTORY STATEMENT PRIOR TO AN INITIAL SCREENING. ORIGINALS MAY BE REQUIRED PRIOR TO ANY ACTUAL EMPLOYMENT OFFER.

- Proof of legal citizenship status;
- High school diploma or GED certificate (unless you graduated from college);
- College transcript (an original will be required prior to an employment offer as an Officer);
- Drivers license;
- Social Security card;
- Proof of vehicle financial responsibility;
- Texas concealed handgun license (if you have one; used only to show the applicant has been screened by DPS);

AS AN APPLICANT FOR A POSITION WITH THIS DEPARTMENT, YOU NEED TO KNOW:

- All employment applicants and all active employees are subject to drug testing on a random and/or a suspicion basis;
- All positions are subject to psychological examination (required for Officers);
- All applicants are subject to criminal history and driving history verification;
- All employees are subject to the usual risks associated with adult criminal contact; Officers are also required to perform contacts outside of the office;
- All positions are subject to budgetary restrictions and/or terminations;
- All positions are subject to reassignement at the discretion of the Director;
- All positions are "at will", and there is no "last hired, first fired" employment policy;
- Employees are not to seek or accept outside income without approval from the Director;
- Information concerning any reasonable accommodation needed due to physical limitations should be included with this application packet; It is the intent of this Department to provide such accommodation when possible, subject to budget, mission, policy, and/or safety concerns;

Applicant's signature and date:	

EMPLOYMENT APPLICATION & PERSONAL HISTORY STATEMENT

PLEASE READ THESE INSTRUCTIONS CAREFULLY BEFORE PROCEEDING

These instructions are provided as a guide to assist you in properly completing your Application and Personal History Statement. It is essential that the information be accurate in all respects. It will be used as the basis for a background investigation that will determine your eligibility for employment. Any incomplete or falsified information will disqualify you from further consideration of employment and/or subject you to termination if employed.

- 1. This document is to be printed legibly in ink by you and no one else; Do not type. Answer all questions to the best of your ability.
- 2. If a question is not applicable to you, enter N/A in the space provided.
- 3. Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is correct and in proper sequence before you begin.
- 4. You are responsible for obtaining correct addresses and telephone numbers; Do not guess or leave the information blank.
- 5. If there is insufficient space on the form for you to include all information required, attach extra sheets; Be sure to reference the relevant section and question number before continuing your answer.
- 6. An accurate and complete form will help expedite your investigation; Deliberate omissions or falsifications will result in disqualification.
- 7. Initial and date the bottom right hand corner of each page if there is no signature line.

Applicant's signature and date:	
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EMPLOYMENT APPLICATION AND PERSONAL HISTORY STATEMENT

APPLICANT IDENTIFICATION identification purposes only.		provided in th	nis section is u	ısed
Name				
Name Last	Firs	st	Middle	:
AddressNumber and				
Number and	Street or PO Box			
City	Sta	ite	Zip	
Telephone Numbers				
Home				
Cell				
Date of BirthMonth				
Month	n Day	Year		
Nickname(s), Maiden Name	e, or other names by	which you have	been known	
Social Security Number				
Place of Birth				
City		County	State	
Are you a U.S. Citizen?	_YesNo			
Driver's License Number			_	
State of Issue				

	ng with present	addresses whe address. List d				
From	То	Ad	dress (include d	city, state, :	zip)	
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Name o	sor					
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From To Employer
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Duties
Supervisor
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Reason for Leaving (Be specific)
From To Employer
Address
Phone NumberJob Title
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Supervisor
Name of CoWorker
Reason for Leaving (Be specific)
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Reason for Leaving (Be specific)

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D. MILITARY RECORD

Branch:	D	ates of Service: Fro	om	To
Highest Rank He	eld	Type of [Discharge	
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If yes, provide de	tails, including dis	position(s)		
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EDUCATIONAL High School		ost recent first) Dates	Gradua	ated?
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High School College or Univer	Location rsity attended	Dates		
High School College or Univer	Location rsity attended	Dates		
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College or Univer City and State Dates attended _ Major/Minor	Location rsity attended	DatesUnits comple	eted	
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Dates attended	Units completed
Major/Minor	
Degree received, if any, and date	
College or University attended	
City and State	
Dates attended	Units completed
Major/Minor	
Degree received, if any, and date	
College or University attended	
City and State	
Dates attended	Units completed
Major/Minor	
Degree received, if any, and date	
College or University attended	
City and State	
Dates attended	_Units completed
Major/Minor	
Degree received, if any, and date	

DETAIL ANY OTHER SCHOOLS ATTENDED (TRADE, VOCATIONAL, BUSINESS, ETC.) WITH DATES, AREAS OF STUDY, AND CERTIFICATES;

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ist any specializ processing and/or					
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If yes, cor	nplete the follo	owing.		
Agency	City/State	Date	Charge(s)	Disposition of case(s
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With what	company do			
With what	. company do			

	narrative any traffic acciden e dates and locations:	ts in which you have been	involved,
	st three persons who know you and who have known yo	you well enough to provide ou for 3 years or more. Do	
relatives or former			
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PERSO	NAL DECLARATIONS
Do you	drink alcohol?
	ou ever used marijuana or any other drug not prescribed by your physician es No
If yes, w	hat were the circumstances?
	ou ever sold or furnished drugs or narcotics to anyone? Yes
If yes, e	ou ever sold or furnished drugs or narcotics to anyone? Yes

foregoing statements and answers to qu	srepresentations, omissions, or falsifications in the estions. I am fully aware that any such willful ions may be grounds for immediate rejection or
Signature of Applicant	Date

AUTHORIZATION TO RELEASE INFORMATION

	, hereby request and authorize you to furnish the
with any and all information they may	pervision and Corrections (Adult Probation) Department request concerning my work record, educational history,
specifically intended to include any and	racter, and general reputation. This authorization is d all information of a confidential or privileged nature as
well as photocopies of such documer purpose of determining my eligibility for	nts, if requested. The information will be used for the employment as a probation officer.
I understand that any information obtain	ained which is developed either directly or indirectly, in
	horization may be considered in determining my stability person(s) who may furnish such information concerning
me shall not be held accountable for	giving this information; and I do hereby release said which may be incurred as a result of furnishing such
information.	The state of the s
	inty Community Supervision and Corrections Department any liability which may or could result from gathering the
	ny subsequent use of such information in determining my
I further agree to waive any rights who psychological report developed through	atsoever to the background investigation report and the this waiver.
A photocopy of this release form will photocopy does not contain an original	be valid as an original thereof, even though the said writing of my signature.
Date of Birth: Licens	se Number & State:
Applicant's Signature	Date
Address	City & State
SWORN AND SUBSCRIBED BEFOR	E ME THIS DAY OF,
	NOTARY PUBLIC IN AND FOR
	COUNTY, TEXAS
	MY COMMISSION EXPIRES: