

# APPLICATION FOR APPRAISAL REVIEW BOARD APPOINTMENT

Grayson Central Appraisal District **ATTN: TLO** 512 N Travis St, Sherman, TX 75090 903-893-9673

A. APPLICANT INFORMATION			
Last Name	First Name	Middle Initial	
Address			
City		State	Zip Code
Email		Social Security Number:	
Telephone Number			
Daytime ( )	Evening ( )	Cell Phone ( )	

## B. APPRAISAL REVIEW BOARD QUALIFICATION STATEMENT

*Please answer the following questions by checking "Yes" or "No"*

1. Are you a resident of Grayson County? **If answer is "Yes" please state how long you have lived in Grayson County. \_\_\_\_\_ years \_\_\_\_\_ months.** YES  NO
2. Are you now or have you ever been employed by, or been an officer or director of, the Grayson Central Appraisal District? YES  NO
3. Are you an employee of the Office of the State Comptroller of Public Accounts? YES  NO
4. Are you now or have you ever been employed by, or been an officer or member of the governing body of any taxing unit (county, city school district) served by the Grayson Central Appraisal District? If so, what was the last date you filled this position? **If yes, give the date you were last employed.**  
 \_\_\_\_\_ YES  NO
5. Have you ever appeared before the Appraisal Review Board for compensation? (ie: as a tax consultant, accountant, appraiser or representative of a property owner)? **If yes, give the date you last appeared.**  
 \_\_\_\_\_ YES  NO
6. Do you, or does any relative of yours within the second degree by either blood or marriage, do business in the Grayson Central Appraisal District as a paid property tax agent, or as an appraiser who performs appraisals for use in property tax proceedings? YES  NO

These are the degrees of relationship included:

***1st Degree by Consanguinity (blood)***

Parents                  Children

***1st Degree by Affinity (marriage)***

Spouse                          Spouses of relatives listed under consanguinity  
 Stepparents  
 Spouse's children                  Stepchildren

***2nd Degree by Consanguinity (blood)***

Grandparents      Brothers and Sisters  
 Grandchildren

***2nd Degree by Affinity (marriage)***

Spouse's grandparents      Spouse's brothers & sisters

7. Are you, or a business in which you hold a substantial interest, a party to a contract with the appraisal district or with a taxing unit in the district? A substantial interest means that you and your spouse together own at least 10% of the voting stock or shares in the business, or that either of you is a partner, limited partner, or officer of the business entity. YES  NO
8. Is any relative of either you or your spouse employed by the Grayson Central Appraisal District in any capacity, or a member of the Grayson Central Appraisal District Board of Directors? YES  NO

Relatives' Name: \_\_\_\_\_

Relative's Address: \_\_\_\_\_

Degree of Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

GCAD Position: \_\_\_\_\_

**C. PERSONAL BACKGROUND**

1. Have you ever been convicted of a felony, or a misdemeanor involving moral turpitude, or are you presently under indictment? If "Yes", explain below the nature of the offense, date and location. YES  NO
2. Are you a U. S. Citizen? YES  NO   
 If "No", are you eligible to be employed under a visa or entry permit? YES  NO
3. Use the space below to list professional society memberships, job related licenses, registrations, certificates (with their numbers), and expiration dates. Provide additional comments or information that would be of assistance in considering you for this position.

**D. EDUCATION & TRAINING (List most recent first)**

COLLEGE - UNIVERSITIES TRADE OR BUSINESS SCHOOLS	CITY/STATE (LIST CAMPUS ATTENDED)	DATES ATTENDED MO/YR TO MO/YR	DEGREE / DIPLOMA AND DATES RECEIVED	SEMESTER HOURS EARNED	QUARTER HOURS EARNED	MAJOR AREA OF STUDY
1.						
2.						
3.						

**E. WORK HISTORY (List most recent job first) Include paid or verifiable non-paid experience including military service. If you have had more than one position with the same employer, please list each position separately.**

FROM (MO/YR)	TO	JOB TITLE
HOURS WORKED	TYPE OF BUSINESS	
NO. OF EMPLOYEES SUPERVISED DIRECTLY / INDIRECTLY	EMPLOYER'S NAME	
SUPERVISOR'S NAME	COMPLETE ADDRESS	
SUPERVISOR'S TITLE		
REASON FOR LEAVING		
FROM (MO/YR)	TO	JOB TITLE
HOURS WORKED	TYPE OF BUSINESS	
NO. OF EMPLOYEES SUPERVISED DIRECTLY / INDIRECTLY	EMPLOYER'S NAME	
SUPERVISOR'S NAME	COMPLETE ADDRESS	
SUPERVISOR'S TITLE		
REASON FOR LEAVING		
FROM (MO/YR)	TO	JOB TITLE
HOURS WORKED	TYPE OF BUSINESS	
NO. OF EMPLOYEES SUPERVISED DIRECTLY / INDIRECTLY	EMPLOYER'S NAME	
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SUPERVISOR'S TITLE		
REASON FOR LEAVING		

