City of Willacoochee

Employment Application

_____
Date

Personal Information

Name_____
Last First Middle

Present Address_____
Street City State Zip

Phone Number (_____)_____ Social Security No._____-_____-_____

Date of Birth_____/_____/_____ Are you a legal citizen?___Yes _____No

Do you have a valid Georgia Drivers License? _____Yes _____No

License Number_____ Expiration_____

Desired Employment

Position Applying for_____ Desired Salary_____

Employment Desired _____Full-Time ____Part-Time ____Full or Part-time

Date you can start_____/_____/_____

Qualifications

Types of computers, electronic or mechanical equipment that you are qualified to operate or repair:

_____

_____

Professional Licenses, Certifications or Registrations:

_____

_____

Summarize other employment related to this job:

Additional skills including supervision skills, other languages, or information regarding the career/occupation you wish to bring to the employers attention:

_____

_____

Education

School Type	*School Name*	*Location (Address)*	*Years Completed*	*Major or Degree*
Elementary School				
High School				
GED				
College				
Other				

Military

Have you ever been in the armed forces? _____Yes _____No

Are you a member of the National Guard? _____Yes _____No

Rank _____

Specialty _____

Date Entered _____/_____/_____ Discharge Date _____/_____/_____

Convictions

Have you ever been convicted of a crime? _____Yes _____No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offence(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation:

_____

_____

_____

Have you had any accidents during the past three years?_____ How many? _____
Have you had any moving violations during the past three years? _____How many?___

Employment Record

List last or current employment first, including summer or temporary jobs. Be sure all your experience or employers related to this job are listed here; use an extra sheet of paper if necessary.

Employer Name and Address

_____
_____
_____
_____

Position Title/Duties/Skills

_____
_____
_____
_____

Supervisor Name: _____
Telephone (____)_____-_____

Dates employed:
From: _____
To: _____

Reason for leaving:

_____
_____

Employer Name and Address

_____
_____
_____
_____

Position Title/Duties/Skills

_____
_____
_____
_____

Supervisor Name: _____
Telephone (____)_____-_____

Dates employed:
From: _____
To: _____

Reason for leaving:

_____
_____

Employer Name and Address

_____
_____
_____
_____

Position Title/Duties/Skills

_____
_____
_____
_____

Supervisor Name: _____
Telephone (____)_____-_____

Dates employed:
From: _____
To: _____

Reason for leaving:

_____
_____

If currently employed, may we contact your current employer? _____**Yes** _____**No**

INFORMATION TO THE APPLICANT: as part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your reference.

If necessary for employment, you may be required to: supply a birth certificate or other proof of authorization to work in the US, have a physical examination and/or drug test, or to sign a conflict of interest agreement and abide by its terms.

I understand and agree to the information shown above.

SIGNATURE:_____ DATE ____/____/____

EQUAL EMPLOYMENT OPPORTUNITY: While many employers are required by federal law to have an Affirmative Action Program, all employers re required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.

CITY OF WILLACOOCHEE TITLE VI POLICY STATEMENT: The City of Willacoochee assures that no person shall on the grounds of race, color, national origin, or sex, as provided by Title VI of the Civil Rights Act of 1964 as amended, and the Civil Right Restoration Act of 1987 (P.L. 100.259) be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity receiving Federal financial assistance.

The City of Willacoochee further assures every effort will be made to ensure nondiscrimination in all of its programs and activities, whether those programs and activities are federally funded or not.

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview ____Yes ____No
Remarks:_____
_____
_____

_____ Date: ____/____/____
Interviewer

Hired _____Yes _____No Date of Employment: ____/____/____

Job Title:_____
Department:_____

Hourly Rate $_____

CONSENT FORM

I hereby authorize the City of Willacoochee to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal agency in Georgia.

Please print the following:

_____

Last Name **Middle** **First**

_____

Address

_____ _____ _____ _____

Sex **Race** **DOB** **SSN**

_____

Signature

_____ _____

Notary **Date**

My commission expires:_____

O.C.G.A. 35-3-34