

CITY OF NAHUNTA EMPLOYMENT APPLICATION

Employment Application Instruction Sheet

This employment application is not an offer of employment, or a contract for employment, The completion of this application or any other instrument does not stand as an agreement, or promise to hire the applicant, and any statement to the contrary by an employee is void.

1. Please print.
2. Complete all questions in detail where explanations are necessary.
3. Any questions not pertaining to you individually, list an N/A.
4. If more writing space is needed throughout this application form, use additional sheets of paper, listing the section number and the questions to be further explained.

Important

Truthful and complete responses to this application are a necessity. Information or acquiescing in false information being supplied on the application is a violation of the Criminal Code of Georgia (Ga. L. 1968, pp 1239, 1310) and upon conviction is punishable by a fine of not more than \$1,000.00 or by imprisonment for not less than 1 nor more than 5 years, or both.

This information will be subject to confirmation by administrative investigation, polygraph, and/or other forms of testing if so, determined by the hiring authority. Exclusive of the aforementioned statement, all information which is recorded in the application will be used on in relation to determining the suitability and qualification of the applicant for employment only, and no other purpose.

By signing this application, you attest that the information you have provided is true and correct at the time it is completed.

Printed Name

Signature

Position Applied For

Telephone Number

PLEASE PRINT

PERSONAL INFORMATION

Name: _____ Date: _____
(Last) (First) (Middle)

Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone Number: _____ Other Phone: _____

Are you at least 18 years of age? YES NO Date Available to Start: _____

Hours Requested (please circle) Full Time Part Time

How did you find out about this position? _____

Do you have any relatives or friends working here? _____

Please list: _____

POSITION INFORMATION

Position(s) Applying For: _____

Have you ever worked for this organization? _____

If so, date(s) _____ Prior position(s) here: _____

Reason(s) for leaving: _____

WORK REQUIREMENTS AND GENERAL INFORMATION

Are legally eligible to work in the U.S.? YES NO

Do you have a valid Driver's License? YES NO

Class: _____ Endorsements: _____

Issued by what State? _____ Driver's License #: _____

List all moving violations (convictions) and accidents and any suspensions or revocations of your license in the last five years: _____

Have you ever been convicted, or pled guilty or no contest or charged for a felony or misdemeanor, including a DUI/DWI or similar offense, had any moving violations, or had your license revoked or suspended?

YES NO

If yes, explain: _____

A conviction will not necessarily disqualify you from employment.

Have you ever been excluded or are you currently excluded from participating in any federal health program such as Medicare or Medicaid? YES NO

If yes, explain: _____

EMPLOYMENT HISTORY

(List your last three employers or volunteer activities, starting with the most recent.)

I.

Employer: _____

Job Title: _____ Supervisor: _____

Start Date: _____ Salary: _____

End Date: _____ Salary: _____

Job Description (including duties and responsibilities): _____

Employer's Telephone #: _____ May we contact?: YES NO

Reason for leaving: _____

II.

Employer: _____

Job Title: _____ Supervisor: _____

Start Date: _____ Salary: _____

End Date: _____ Salary: _____

Job Description (including duties and responsibilities): _____

Employer's Telephone #: _____ May we contact?: YES NO

Reason for leaving: _____

III.

Employer: _____

Job Title: _____ Supervisor: _____

Start Date: _____ Salary: _____

End Date: _____ Salary: _____

Job Description (including duties and responsibilities): _____

Employer's Telephone #: _____ May we contact?: YES NO

Reason for leaving: _____

MILITARY:

BRANCH OF SERVICE	DATE BEGAN	DATE ENDED	RANK & DUTIES	DATE DISCHARGED	LOCATION

Explain any gaps in employment: _____

PAST EMPLOYMENT

Have you ever been:

- Placed on probation or terminated for excessive absenteeism? YES NO
- Disciplined or fired for insubordination? YES NO
- Disciplined or fired for violation of safety rules? YES NO
- Disciplined or fired for assault or fighting? YES NO
- Disciplined or fired for harassment? YES NO
- Disciplined or fired for patient abuse? YES NO
- Disciplined or fired for alcohol or drug related activity at work? YES NO

If you answered yes to any question above, please explain: _____

Answers of Yes for any of the above questions will not necessarily disqualify you from employment.

EDUCATION AND TRAINING

HIGH SCHOOL:

Name: _____ Address: _____

Years completed: _____

Did you graduate? YES NO If not, highest grade completed: _____

Have you received your GED? YES NO

COLLEGE:

Name: _____ Address: _____

Years completed: _____

Did you graduate? YES NO If not, highest year completed: _____

Degree: _____ Major: _____

OTHER COLLEGE:

Name: _____ Address: _____

Years completed: _____

Did you graduate? YES NO If not, highest year completed: _____

Degree: _____ Major: _____

TECHNICAL SCHOOL:

Name: _____ Address: _____

Years completed: _____

Did you graduate? YES NO If not, highest year completed: _____

Certificate: _____ License: _____

Expires: _____ Expires: _____

OTHER SCHOOL/TRAINING:

Name: _____ Address: _____

Years completed: _____

Did you graduate? YES NO If not, highest year completed: _____

Certificate: _____ License: _____

Expires: _____ Expires: _____

OTHER: _____

Describe any additional qualifications or information, personal or professional, that you feel would be beneficial for us to know when considering your application:

REFERENCES

List **three** persons, other than relatives, who have knowledge of your work experience and/or education.

Name: _____ Address: _____

Occupation: _____

Years Known: _____

Telephone Number (including area code): _____

Name: _____ Address: _____

Occupation: _____

Years Known: _____

Telephone Number (including area code): _____

Name: _____ Address: _____

Occupation: _____

Years Known: _____

Telephone Number (including area code): _____

List **two** personal references that have known you for at least three years outside work.

Name: _____ Address: _____

How they know you: _____

Years Known: _____

Telephone Number (including area code): _____

Name: _____ Address: _____

How they know you: _____

Years Known: _____

Telephone Number (including area code): _____

