



CITY OF DAHLONEGA
465 Riley Road
Dahlonega, Georgia 30533
Phone: 706-864-6133 • Fax: 706-864-4837

APPLICATION FOR EMPLOYMENT

DATE: _____

PERSONAL INFORMATION:

NAME: _____
LAST FIRST MIDDLE

PRESENT ADDRESS: _____
STREET CITY STATE ZIP

PHONE NUMBER 1: _____ PHONE NUMBER 2: _____

EMAIL ADDRESS: _____

ARE YOU EIGHTEEN (18) YEARS OF AGE OR OLDER: YES NO

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES: YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME, OR PLED GUILTY OR NOLO CONTENDERE TO ANY CRIME? YES NO

IF YES, PLEASE COMPLETE:

CONVICTION TYPE: FELONY MISDEMEANOR

OFFENSE: _____

DATE: _____

LOCATION: _____

(THIS IS NOT A DISQUALIFIER FROM EMPLOYMENT BUT CAN BE USED TO THE EXTENT RELEVANT TO THE JOB BEING PURSUED.)

DO YOU HAVE A VALID DRIVERS LICENSE: YES NO

LICENSE NUMBER: _____ STATE _____

CLASS LICENSE: _____ EXPIRATION DATE: _____

HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED: YES NO

HAVE YOU EVER BEEN CONVICTED, PLED GUILTY OR NOLO CONTENDERE TO A CHARGE OF DWI OR DUI: YES NO

IF YES, PLEASE EXPLAIN: _____

ARE THERE ANY DWI OR DUI CHARGES CURRENTLY PENDING AGAINST YOU?

YES

NO

IF YES, PLEASE EXPLAIN: _____

EMPLOYMENT DESIRED:

POSITION: _____ SALARY DESIRED: _____

ARE YOU CURRENTLY EMPLOYED: YES NO

IF YES, MAY WE INQUIRE OF YOUR CURRENT EMPLOYER? YES NO

REFERRED BY: _____

EDUCATION HISTORY:

HAVE YOU RECEIVED A GED OR HIGH SCHOOL DIPLOMA: YES NO

HIGH SCHOOL ATTENDED: _____

COLLEGE ATTENDED: _____

TRADE, BUSINESS OR CORRESPONDENCE SCHOOL ATTENDED: _____

I ACKNOWLEDGE, SHOULD I RECEIVE A JOB OFFER, I WILL BE REQUIRED TO SUBMIT PROOF OF EDUCATION HISTORY (IF REQUIRED BY THE JOB)

INITIALS

EMPLOYMENT HISTORY:

PLEASE DESCRIBE YOUR WORK HISTORY FOR THE LAST FIVE (5) YEARS INCLUDING MILITARY IF APPLICABLE. LIST THE NAMES OF YOUR PRESENT OR PREVIOUS EMPLOYERS IN CHRONOLOGICAL ORDER WITH PRESENT OR MOST CURRENT EMPLOYER LISTED FIRST. FAILURE TO PROVIDE COMPLETE INFORMATION REGARDING EACH JOB HELD MAY RESULT IN YOUR DISQUALIFICATION. A RESUME MAY BE ATTACHED ONLY AS ADDITIONAL INFORMATION AND WILL NOT BE ACCEPTED IN LIEU OF COMPLETING THIS SECTION.

<u>DATE</u>	<u>NAME OF EMPLOYER</u>	<u>SALARY</u>	<u>POSITION</u>
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____

FROM: _____

TO: _____

PLEASE EXPLAIN ANY GAPS IN YOUR EMPLOYMENT HISTORY. BE SURE TO ACCOUNT FOR ALL PERIODS OF TIME INCLUDING MILITARY SERVICE AND ANY PERIODS OF UNEMPLOYMENT.

HAVE YOU EVER BEEN TERMINATED OR ASKED TO RESIGN FROM ANY JOB: YES NO

IF YES, PLEASE EXPLAIN THE CIRCUMSTANCES: _____

LIST ANY PROFESSIONAL DESIGNATIONS, CERTIFICATIONS, COURSES, OR SPECIAL SKILLS THAT MAY BE APPLICABLE TO THE JOB FOR WHICH YOU ARE APPLYING:

PLEASE DESCRIBE ANY OTHER EXPERIENCE (TO INCLUDE MILITARY) THAT YOU HAVE WHICH WOULD BE RELEVANT TO THE JOB FOR WHICH YOU ARE APPLYING:

REFERENCES:

	NAME	ADDRESS	PHONE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE PRESENT AND PREVIOUS EMPLOYERS AND REFERENCES LISTED ON APPLICATION TO PROVIDE THE CITY ANY PERTINENT INFORMATION.

I AUTHORIZE THE CITY TO PROVIDE FUTURE EMPLOYERS ANY PERTINENT INFORMATION CONCERNING THE EMPLOYMENT WITH THE CITY, IF HIRED.

I AUTHORIZE A PRE-EMPLOYMENT PHYSICAL AND DRUG SCREEN.

I AUTHORIZE AN EXTENSIVE BACKGROUND CHECK WHICH MAY INCLUDE CONTACTING PAST EMPLOYERS, SCHOOLS ATTENDED, CRIMINAL HISTORY, MOTOR VEHICLE RECORD AND CREDIT CHECK.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

DATE: _____ SIGNATURE: _____

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: _____ DATE: _____

REMARKS: _____

HIRED: YES NO

POSITION: _____ DEPARTMENT: _____

SALARY/WAGE: _____ BEGINNING DATE: _____

APPROVED: _____

CITY MANAGER

DEPARTMENT HEAD/SUPERVISOR