CITY OF JESUP
APPLICATION FOR EMPLOYMENT

To Applicant: We appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications and the City's needs. City of Jesup is an equal opportunity employer

PERSONAL

Date:_____

Name _____ Social Security No. _____
Last First Middle

Present Address

_____
Street City State Zip Code

E-mail address:

_____

Are you legally eligible for employment in the U.S.A.? _____
Daytime Telephone # _____

What method of transportation will you use to get to work?

_____

Position(s) applied for: _____ Rate of pay expected
$_____ per week

Would you work : Full Time _____ Part-Time _____ Specify days and hours if Part-Time

_____

Were you previously employed by us? _____ If so, when?

_____

What date will you be available to start work?

_____

Do you speak any other language(s) other than English? _____ If yes, what language(s) can you speak

_____

List any experiences or skills which you feel would qualify you for this position.

_____

_____

_____

RECORD OF EDUCATION

You must possess a standard high school diploma or G.E.D. to be considered

SCHOOL	NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	LAST YEAR COMPLETED	DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
ELEMENTARY					
HIGH					
COLLEGE					
OTHER (SPECIFY)					

List below all present and past employment, beginning with your most recent

NAME & ADDRESS OF COMPANY AND TYPE OF BUSINESS	FROM	TO	DESCRIBE THE WORK YOU DID	WKLY STARTING SALARY	WKLY ENDING SALARY	REASON FOR LEAVING	NAME OF SUPERVISOR
PHONE #							
PHONE #							
PHONE #							
PHONE #							

May we contact the employers listed above? _____ If not, indicate which one(s) you do not wish us to contact.

_____

PERSONAL REFERENCES (Not former Employers or Relatives)

Name & Occupation Address Phone Number

_____

_____

_____

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? Yes ____ No ____ If yes, what branch?

_____

Dates of duty: From _____ To _____ Rank at Discharge_____

List duties in the service including special training_____

_____

Have you taken any training under the G.I. Bill of Rights? _____ If yes, what training did you take? _____

_____

PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history, financial and credit record through any investigative or credit agencies or bureau of your choice.

_____

Signature

Wayne County

Emergency Management Agency / E-911

E-911 Office (912) 427-5992 Facsimile (912) 427-5957 155 North Wayne Street Jesup, Georgia 31546

I hereby give consent for the Wayne County E-911 Center and **CITY OF JESUP** to conduct an inquiry and receive any Georgia criminal history record information pertaining to me which may be contained in the files of any state or local criminal justice agency in Georgia.

Full Name (Print) _____

_____ -- _____ -- _____
Social Security Number

Address _____

Height _____ **Eye Color** _____ **Sex** _____ **Race** _____ **Date of Birth** _____ **Place of Birth** _____

One of the following must be checked:

☐ This authorization is valid for 90/180/_____ (circle one) days from date of signature.

☐ I, _____ give consent to the above named to perform periodic criminal history background checks for the duration of my employment with the company.

Signature _____ **Date** _____

Notary _____ **Date** _____

Date of inquiry: _____ **Time of inquiry:** _____ **Operator's initials:** _____

Purpose Code used: (check one)

- ☐ **Code E Employment (E) – Provides *Georgia* Criminal History Record Information**
- ☐ **Code M Employment with Mentally Disabled (M) - Provides *Georgia* Criminal History Record Information**
- ☐ **Code W Employment with Children (W) - Provides *Georgia* Criminal History Record Information**
- ☐ **Code N Employment with Elder Care (N) - Provides *Georgia* Criminal History Record Information**
- ☐ **Code P Public Records (P) – Provides *Georgia Felony Convictions* Only**

The inquiry resulted in the following: (check all that apply)

	No Georgia CHRI results available.
	Georgia CHRI attached / released.

	No NCIC/GCIC Warrant results available.
	Possible NCIC/GCIC Warrant. Contact Agency listed below.
Wanting Agency Name:	
Agency Telephone:	

Agency Designee Signature and Title _____ **Date** _____