Employment Application

City of Colquitt · 154 West St, Colquitt, GA 39837 · (229) 758-1000

Blank form. Print and fill in by hand. Please print clearly.

1. Applicant information

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

Position applied for *

_____

Date *

_____

Type of employment desired *
[ ] Full-Time [ ] Part-Time [ ] Temporary [ ] Seasonal [ ] Educational Coop

Are you able to meet the attendance requirements of this position? *
[ ] Yes [ ] No

Desired salary *

_____

Last name *

_____

First name *

_____

Middle name

_____

Social Security number *

_____

Email (optional)

_____

Street address *

_____

City *

_____

State *

_____

ZIP code *

_____

Home phone *

_____

Cell phone *

_____

Alternative phone

_____

Driver's license number *

_____

Driver's license state *

_____

2. Eligibility and background

Do you have any physical limitations? *
[ ] Yes [ ] No

If yes, please explain *

_____
_____
_____

If you are under 18 and it is required, can you furnish a work permit? *
[ ] Yes [ ] No

If no, please explain *

_____
_____
_____

Have you ever been employed here before? *
[ ] Yes [ ] No

If so, give dates and position *

_____
_____
_____

Are you legally eligible for employment in this country? *
[ ] Yes [ ] No

Date available for work *

_____

Have you ever pled guilty or no contest to, or been convicted of, a crime? *
[ ] Yes [ ] No

ANSWERING YES TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT.

If yes, provide dates and details *

_____
_____
_____

Skills and qualifications

_____
_____
_____

References. Provide three people who can speak to your work or character.

Reference 1
Name *

_____

Telephone number *

_____

Years known *

_____

Reference 2
Name *

_____

Telephone number *

_____

Years known *

_____

Reference 3
Name *

_____

Telephone number *

_____

Years known *

_____

3. Education

Do you possess a valid high school diploma or GED equivalent? *
[ ] Yes [ ] No

High school
Name and location

_____

Number of years completed

_____

Did you graduate?
[ ] Yes [ ] No

Course of study

_____

College
Name and location

_____

Number of years completed

_____

Did you graduate?
[ ] Yes [ ] No

Course of study

_____

Other

Name and location

_____

Number of years completed

_____

Did you graduate?
[ ] Yes [ ] No

Course of study

_____

4. Work history

List up to four employers, starting with the most recent. Leave a block blank if you do not have that many employers. If you fill in any line in a block, include the employer name, address, and phone.

Employer 1

Employer name, address, and phone

_____

_____

_____

Starting job title

_____

Starting hourly rate or salary

_____

Final job title

_____

Final hourly rate or salary

_____

Immediate supervisor

_____

May we contact for a reference?
[ ] Yes [ ] No

Employed from

_____

Employed to

_____

Reason for leaving

_____

Summarize work performed and responsibilities

_____
_____
_____

Employer 2

Employer name, address, and phone

_____
_____
_____

Starting job title

_____

Starting hourly rate or salary

_____

Final job title

_____

Final hourly rate or salary

_____

Immediate supervisor

_____

May we contact for a reference?
[ ] Yes [ ] No

Employed from

_____

Employed to

_____

Reason for leaving

_____

Summarize work performed and responsibilities

_____
_____
_____

Employer 3

Employer name, address, and phone

_____
_____
_____

Starting job title

_____

Starting hourly rate or salary

_____

Final job title

_____

Final hourly rate or salary

_____

Immediate supervisor

_____

May we contact for a reference?
[ ] Yes [ ] No

Employed from

_____

Employed to

_____

Reason for leaving

_____

Summarize work performed and responsibilities

_____
_____
_____

Employer 4

Employer name, address, and phone

_____
_____
_____

Starting job title

_____

Starting hourly rate or salary

_____

Final job title

_____

Final hourly rate or salary

_____

Immediate supervisor

_____

May we contact for a reference?
[ ] Yes [ ] No

Employed from

_____

Employed to

_____

Reason for leaving

_____

Summarize work performed and responsibilities

_____
_____
_____

5. Applicant statement

1. I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

2. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

3. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

4. I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

5. I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

6. If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

7. I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

[ ] I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement. *

Signature of applicant *
Sign here: _____

Date *

_____

6. Background investigation authorization

LABORCHEX INVESTIGATION AUTHORIZATION

Under the applicable provisions of the federal Fair Credit Reporting Act (FCRA), notice is hereby given that a consumer report or investigative consumer report may be made which may include information pertaining to your employment history, educational accomplishments, criminal record, driving record, credit history, character, general reputation, and personal characteristics. This report may also include information pertaining to a commercial driver's license and commercial driving work history which, under provisions of the United States Dept. of Transportation, can include inquiries into drug and alcohol testing and use. This report will be used for employment purposes only, and will be processed by LABORCHEX Companies, an employment screening service, 3900 Lakeland DR #300, Jackson, MS, 39208, 1-800-880-0366. LABORCHEX conducts business according to all applicable federal and state laws. LABORCHEX agrees to use its best and most precise efforts to furnish its clients (a client is defined as a business, company, or organization which contracts with LABORCHEX to provide employment screening services to them) with accurate, current, complete, and reliable information based on such information as it is reasonably available and obtained via applicable public records sources and/or information services utilized by LABORCHEX. Sources also include contact by phone, fax, U.S. mail, and electronic mail of an applicant's previous employers, education officials, and other individuals who can provide accurate verification and confirmation of the applicant's background. However, LABORCHEX cannot guarantee the accuracy of the information provided by these sources, which include courts, public record databases, commonly accepted information sources, and individuals, including previous

employers.

You are further advised that LABORCHEX does not counsel its clients regarding their hiring policies and procedures. LABORCHEX will not have any knowledge as to why you have been offered a position or the reason why you were denied employment, and will not be responsible or liable for actions taken by its client. Under the provisions of the FCRA, you have the right to dispute information provided in a report and, after providing proper identification, you can request a copy of such report(s), including details about the sources of information. Such information will be provided to you at no cost within 30 days after receiving your request. This information will be provided by the company, business, or organization at which you applied for employment. Upon your request, LABORCHEX will provide additional details regarding your employment screening report, particularly the names of specific resources used to gather information, such as courts, public record databases, commonly accepted data sources and individuals.

I, the undersigned, have read and fully understand the above notice. I hereby authorize LABORCHEX to investigate my employment history, educational accomplishments, criminal record, driving record, credit history, character, general reputation, personal characteristics, and information pertaining to a commercial driver's license and commercial driving work history, including inquiries into drug and alcohol testing and use. I authorize LABORCHEX to verify the facts stated by me on the attached application and/or resume. I agree not to hold LABORCHEX responsible in any manner for errors in information provided to LABORCHEX by any of the sources LABORCHEX uses to obtain such information about my employment history, educational accomplishments, criminal record, driving record, credit history, character, general reputation and personal characteristics. I also agree not to hold LABORCHEX responsible for reports deemed by me to be incorrect, when LABORCHEX has, in good faith and according to its established lawful practices, based its information on sources it normally utilizes, such as those listed above.

[ ] I have read and fully understand the notice above, and I authorize LABORCHEX to conduct the background investigation described in that notice. *

Date of birth *

_____

Applicant signature *
Sign here: _____

Date *

_____

7. Criminal history consent

Name-Based Criminal History Record Information (CHRI) Consent/Inquiry Form

I hereby authorize the City of Colquitt to conduct an inquiry for the purpose below and to receive any Georgia and/or national CHRI as authorized by state and federal law.

Purpose of inquiry: Employment.

This authorization is valid for 90 days from the date of signature.

Sex *

_____

Race *

_____

[ ] I authorize the City of Colquitt to conduct an inquiry for employment purposes and to receive any Georgia and/or national criminal history record information as authorized by state and federal law. This authorization is valid for 90 days from the date of signature. *

[ ] I give consent to the City of Colquitt to perform periodic criminal history background checks for the duration of my employment.

Signature *
Sign here: _____

Date *

_____

8. Driver's history consent

Georgia Driver's History Consent Form

O.C.G.A. § 40-5-2(f)(4) authorizes local fire departments and law enforcement agencies access to Georgia driver's history records as part of an application for employment or any current employee for use relative to the performance of official duties with the local fire or law enforcement agency.

I hereby authorize the agency named below to receive a copy of my Georgia Driver's History record as part of my application for employment, or for use relative to the performance of my official duties with the agency.

This authorization is valid for 90 days from the date of signature.

Law enforcement agency or fire department *

_____

[ ] I authorize the agency named above to receive a copy of my Georgia driver's history record as part of my application for employment, or for use relative to the performance of my official duties with the agency. This authorization is valid for 90 days from the date of signature. *

Signature *
Sign here: _____

Date *

_____

9. Driver's license

Section 9. Upload a copy of your driver's license. A photo of the front and back is enough. Files are encrypted and are not attached to the notification email.

Driver's license *
Attach a PDF or image. Up to 2 files, 10 MB each.

10. Social Security card

Section 10. Upload a copy of your Social Security card. The file is encrypted and is not attached to the notification email.

Social Security card *
Attach a PDF or image. Up to 1 file, 10 MB each.