



EMPLOYMENT APPLICATION

Gilmer County Government (BOC)

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status. If you are hired by Gilmer County, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. Gilmer County is a drug free work place. By way of my signature below I acknowledge and authorize Gilmer County to perform a post offer drug screen and background check prior to official hire.

Instructions: Complete **all** sections of the application including signature. You may attach a resume for the work history section as long as it includes all vital information on job responsibilities. Applications without signatures will not be considered. Please print clearly. The (ADAAA) American with Disabilities Amendment Act requires reasonable accommodations for qualified disabled applicants. If you require assistance in completing this employment application, please notify the Human Resources Department.

Date: _____

Last Name: _____ First Name: _____ Middle Name: _____
Street Address: _____ City: _____ State: _____ Zip: _____
Phone #: _____ Cell Phone #: _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? ☐ Yes ☐ No

Are you currently employed by Gilmer County: ☐ Yes ☐ No

May we contact your current/previous employer(s)? Yes ☐ No ☐ Email: _____

Position applied for: _____

When are you available to start? _____ Desired pay range: \$ _____ to \$ _____

Do you wish to work Full time _____ Will you consider Part time? _____

What hours and days are you available to work? _____

Have you worked for Gilmer County before? ☐ Yes ☐ No

If so, which department? _____ What position? _____ Dates: _____

Are you related to anyone who works for Gilmer County Government? ☐ Yes ☐ No

If so, what is the relationship? _____ Which Department?: _____

Educational Background:	<u>No. of Years</u>	<u>Major</u>	<u>Diploma/Degree</u>
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High School:	_____	_____	_____
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College:	_____	_____	_____
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Other Training:	_____	_____	_____
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Computer Skills:	_____	_____	_____
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List all other skills and qualification: _____

Work History: (Most current first)

Company Name: _____
Address: _____ City/State: _____
Phone #: _____ Name of Supervisor: _____
Position Held: _____ Date Started: _____ Date Ended: _____
Wage rate: \$ _____ at time of separation
Responsibilities: _____
Reason for leaving: _____

Company Name: _____
Address: _____ City/State: _____
Phone #: _____ Name of Supervisor: _____
Position Held: _____ Date Started: _____ Date Ended: _____
Wage rate: \$ _____ at time of separation
Responsibilities: _____
Reason for leaving: _____

Company Name: _____
Address: _____ City/State: _____
Phone #: _____ Name of Supervisor: _____
Position Held: _____ Date Started: _____ Date Ended: _____
Wage rate: \$ _____ at time of separation
Responsibilities: _____
Reason for leaving: _____

Company Name: _____
Address: _____ City/State: _____
Phone #: _____ Name of Supervisor: _____
Position Held: _____ Date Started: _____ Date Ended: _____
Wage rate: \$ _____ at time of separation
Responsibilities: _____
Reason for leaving: _____

References: *List the names and phone numbers for three references, not related to you whom you have known for more than one year.*

_____ Phone #: _____
Phone #: _____
Phone #: _____

I certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this document shall be considered sufficient cause for dismissal. Gilmer County is hereby authorized to make any investigations of my prior education, employment, and background. Post offer fingerprinting where applicable to the job may be required and annual motor vehicle reporting may be required where applicable. I understand that any information obtained will be considered in determining my suitability for employment.

Applicant Name Printed: _____

Signature: _____ **Date:** _____