



City of Austell Application for Employment

Human Resources
5000 Austell-Powder Springs Road • Suite 220
Austell, Georgia 30106
Phone: (770)944-4303

The City of Austell is an Equal Opportunity Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

PLEASE TYPE OR PRINT CLEARLY. All applications must be fully completed. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.")

Name: _____
Last First Middle

Address: _____
Number Street City State Zip Code

Primary Phone: (____) _____ Alternate: (____) _____

Email Address: _____

Position applying for: _____

Are you 18 years of age or older? Yes No

Do you have any relatives presently employed by the City of Austell? Yes No

If **Yes**, Who: _____ How Related: _____ What Department: _____

Have you ever been employed by the City of Austell? Yes No

If **Yes**, provide dates and positions: _____

Are you currently employed by the City of Austell? Yes No

Type of employment desired: Full Time Part Time Temporary

When would you be available to begin work, if offered employment? _____

If required for the position, do you have a valid driver's license? Yes No

If **Yes**, State of issuance, license #, and expiration date: _____

Are you eligible for work in the United States?

Yes No (Note: Proof of citizenship or immigration status will be required and verified.)

Have you ever been convicted of a felony? Yes No If **Yes**, provide date(s) and details:

(Note: Conviction will not necessarily disqualify applicant from employment)



Employment Experience: Describe your work history beginning with your current or most recent job. Include military or volunteer experience. If you worked for the same employer but held different jobs, describe each separately. Describe in **detail the specific duties** beginning with your primary duties. If you need more space, attach additional sheets that contain the same information requested in this section. Include any supervisory positions held. Failure to give complete and detailed information regarding each job held may result in your disqualification from employment consideration.

Current or Last Employer			Job Title		
Address			From (month/year)	To (month/year)	Hours per week
City	State	Zip Code	Check one: <input type="checkbox"/> Paid <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern		Annual Salary \$
Supervisor's Name and Title			May We Contact Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		Supervisor's Phone Number
Reason for Leaving			Number and Types of Employees You Supervised		
Primary Duty					
Other Duties					
Previous Employer			Job Title		
Address			From (month/year)	To (month/year)	Hours per week
City	State	Zip Code	Check one: <input type="checkbox"/> Paid <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern		Annual Salary \$
Supervisor's Name and Title			May We Contact Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		Supervisor's Phone Number
Reason for Leaving			Number and Types of Employees You Supervised		
Primary Duty					
Other Duties					
Previous Employer			Job Title		
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Supervisor's Name and Title			May We Contact Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		Supervisor's Phone Number
Reason for Leaving			Number and Types of Employees You Supervised		
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Supervisor's Name and Title			May We Contact Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		Supervisor's Phone Number
Reason for Leaving			Number and Types of Employees You Supervised		
Primary Duty					
Other Duties					



EDUCATION

Name of School	City/State	Did you graduate?	If No, last year/level completed	If Yes, date of graduation (except for H.S.)	Degree Received	Major
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No		X		
GED		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College/University		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College/University		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other School e.g., Vocational		<input type="checkbox"/> Yes <input type="checkbox"/> No				

Other Credentials/licenses/professional affiliations, etc., which are relevant to the job(s) for which you are applying.

Skills: Please list technical skills, clerical skills, trade skills, etc. Include relevant computer systems and software packages of which you have working knowledge, and note your level of proficiency (basic, intermediate, expert)

References: List **three** personal references that are **not** related to you and **two** business references.

Personal		
Personal		
Personal		
Business		
Business		

Applicant's Statement

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize the City of Austell to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full responses to any inquires in connection with this application for employment. If requested, I agree to submit to a medical exam, drug screen, criminal and motor vehicle history, background and credit check on me prior to employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of the City serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with City and departmental regulations.

Signature of Applicant

Date

