

City of Donalsonville
Employment Application

Personal Data

Name: (last, middle, first) _____ Date: _____

Social Security Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email Address: _____

Driver's License Number: _____ State: _____ Valid: Yes No

If employed, can you provide proof of U.S. Citizenship? Yes No N/A

Are you 18 or over? Yes No Date of Birth: _____

Have you ever been arrested? Yes No If Yes, Explain: _____

Have you ever been convicted of a misdemeanor? Yes No If Yes, Explain: _____

Have you ever been convicted of a felony criminal act? Yes No If Yes, Explain: _____

Are you legally eligible to own or possess a legal firearm? Yes No

Names of friends or relatives employed by this city: _____

Do you have any physical or mental disability that may limit your performance in the job you are applying for? Yes No If Yes, what can be done to accommodate your limitation? _____

EDUCATION

HIGH SCHOOL

Name: _____ Address: _____

(name of the high school or state authority issuing the diploma or certificate)

Circle highest grade completed 7 8 9 10 11 12 Graduated? Yes No

Colleges/ Universities

Please complete the following section for post-secondary education (Technical Schools/Colleges/Universities):

Name of School	City	State	If No Degree Hours Earned		Major	Type of Degree	Degree Earned Yes/No
			Quarter	Semester			

Describe any specialized training, qualifications, apprenticeship, skills, and extra-curricular activities which can relate to the job for which you are applying. Include office equipment, computer skills, foreign language skill, typing skills, business equipment machine operating skills which may relate to the position for which you are applying. **USE ADDITIONAL SHEETS IF NECESSARY**

REFERENCES – Give names, addresses, and telephone numbers of three (3) references that ARE NOT related to you and ARE NOT previous employers.

Name Phone #

Address City State Zip

Name Phone #

Address City State Zip

Name Phone #

Address City State Zip

WORK HISTORY

Describe your work history for the past 10 years, **beginning with your current or most recent job**. Including military and volunteer experience and periods of unemployment. Failure to give complete information regarding each job held may result in your disqualification. Complete addresses with zip codes and telephone numbers for all employers are necessary.

RESUME MAY BE ATTACHED ONLY AS ADDITIONAL INFORMATION AND WILL NOT BE ACCEPTED IN LIEU OF COMPLETING THIS SECTION. Use additional sheets if necessary.

Name of Organization or Firm: _____ Telephone: _____

Address: _____

Dates Employed: From Mo/Yr: _____ To Mo/Yr: _____ Pay Start: _____ Pay End: _____

Name of Your Supervisor: _____

Your Official Job Title: _____

Describe Your Specific Job Duties: _____

Name of Organization or Firm: _____ Telephone: _____

Address: _____

Dates Employed: From Mo/Yr: _____ To Mo/Yr: _____ Pay Start: _____ Pay End: _____

Name of Your Supervisor: _____

Your Official Job Title: _____

Describe Your Specific Job Duties: _____

Name of Organization or Firm: _____ Telephone: _____

Address: _____

Dates Employed: From Mo/Yr: _____ To Mo/Yr: _____ Pay Start: _____ Pay End: _____

Name of Your Supervisor: _____

Your Official Job Title: _____

Describe Your Specific Job Duties: _____

Please use this space for additional information pertinent to your education, training and experience:

Please state what your salary expectations would be if you are selected as the successful applicant for this position. \$ _____ Annually.

The Mayor and Council of the City of Donalsonville retain the right to be the sole, final, deciding authority as to who is hired for this position, and as such, may act at their discretion to hire an individual who appears to be either more or less qualified than any other applicant, but who, in their own opinion is the best qualifies individual to perform the particular job for which this application is supplied. If you do not agree with this statement, do not submit an application for this position.

Applicant Signature

Date

