

**City of Barwick
Application for Employment**

PERSONAL INFORMATION:

Full Name: _____
 First Middle Last
Street Address: _____ Phone: _____
City: _____ State: _____ Zip Code: _____
Mailing Address (if different): _____
City: _____ State: _____ Zip Code _____
S.S. #: _____ Driver License: _____ Exp Date: _____ State Issue _____

POSITION DESIRED:

Position: _____ Expected Salary: _____
Have you ever been employed by the City of Barwick: YES NO When: _____
Are you available to work: Full Time Part Time Do you object to working night shifts: YES NO
Can you travel if required by position: YES NO

CRIMINAL HISTORY:

Have you ever been charged, plead guilty or been convicted of an offense in

- Municipal and /or City Court? Yes _____ No _____
- State Court? Yes _____ No _____
- Federal Court? Yes _____ No _____

Please give offense, date, location and disposition of case to all yes answers above (use back of page if more room is needed:

EDUCATIONAL BACKGROUND:

Are you a high school graduate or equivalent? Yes _____ No _____

Name and address of school _____

Have you received a college degree? Yes _____ No _____

Check degree level: Associate _____ Bachelor _____

Major/Course of study: _____

Name and address of school: _____

BACKGROUND INVESTIGATION:

The City of Barwick require all employees to submit to a preemployment background investigation Please complete the attached Criminal History Report form, Personal History Release and SF 180(former military personnel only), which will authorize the City of Barwick to receive any background record information pertaining to you.

Yes, I agree to this search _____ No, id on agree to this search _____

FORMER MILITARY PERSONNEL:

Branch of Service: _____ Date of Service: _____

Serial Number: _____ Rank _____

Type of Discharge: _____ Are your currently a member of a Reservice Unit: Yes No

Were you ever the subject of any disciplinary action while a member of the United State Military Yes No

If yes, please explain: _____

EMPLOYMENT HISTORY:

Please list your last (5) employers (Explain any periods of unemployment):

Employer: _____ Phone Number _____

Address _____

Job Title: _____ Supervisor: _____

Date of Employment: _____ Pay Rate: _____

Employer: _____ Phone Number _____

Address _____

Job Title: _____ Supervisor: _____

Date of Employment: _____ Pay Rate: _____

Employer: _____ Phone Number _____

Address _____

Job Title: _____ Supervisor: _____

Date of Employment: _____ Pay Rate: _____

Employer: _____ Phone Number _____

Address _____

Job Title: _____ Supervisor: _____

Date of Employment: _____ Pay Rate: _____

Have you ever been involuntarily terminated from any position: YES NO

Explain any YES _____

ADDITIONAL INFORMATION:

Please state any education or training you feel may be helpful to us in considering your application:

Please list any specific skills, qualifications, or achievements you feel may be helpful to us in considering your application.

REFERENCE:

Please provide at least three (3) reference (not relatives, former or present employers) who have known you for at least (5) years.

Name: _____

Address: _____

City: _____ State: _____ Zip Code _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code _____

I understand that the City of Barwick is committed to providing equal opportunity in all equal opportunity in all employment practices, including but not limited to selection, hiring, promotion, transfer, and compensation to all qualified applicants and employees regardless of age, race, national origin, religion, handicap, disability, or any other category protected by law. I understand that it is the policy of the City of Barwick to consider all applicants for employed based on their qualifications considering job vacancies. I understand this employment application, or any other City of Barwick documents are not promises of employment. Should I be employed I understand that my employment will be a trial period of six months from the date of hiring. I further understand that I am employed I can terminate my employment at any time with or without cause and with or without advance notice and that the City of Barwick has a similar right. I understand that no manager or representative of the City of Barwick has any authority to enter into any agreement for employment for any specified period, or to make any agreement contrary to the foregoing. The information given by me in this application is true and completer to the best of my knowledge, I agree that if the information is found to be false, misleading or unsatisfactory in any respect in the City of Barwick judgement that I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I hired.

Application Signature

Date _____

Thank you for your interest in employment with the City of Barwick

CITY OF BARWICK
HUMAN RESOURCE DIVISION

CRIMINAL HISTORY REPORT

P.O. Box 146 Barwick, Georgia 31720 Telephone: (229) 735-2311 Fax (229) 735-4151

The City of Barwick requires all employees to submit to a [re-employment criminal history investigation. Please complete this form, which will authorize the City of Barwick to receive any criminal history record information pertaining to you. National, State, and local criminal justice agency records will be included in the criminal history search.

Print Full Name: _____

Address: _____

Mailing Address: _____

S.S. Number: _____ Sex: _____ Race: _____ DOB: _____

Driver's License # _____ State: _____ Expiration Date: _____

Applicant Signature

Date

Notary

Date Signed

POLICE DEPARTMENT USE ONLY

Request originally rec'd by: _____

Date Rec'd: _____

Local records searched by: _____

Date: _____