

EMPLOYMENT APPLICATION ADDENDUM

FATHER'S FULL NAME: \_\_\_\_\_  
Address City State

MOTHER'S FULL NAME: \_\_\_\_\_  
Address City State

COMPLETE ONLY IF JOB RELATED. LIST ANY EQUIPMENT OR MACHINES YOU OPERATE

CAN YOU TYPE? \_\_ YES \_\_ NO \_\_\_\_\_

WORDS PER MINUTE \_\_\_\_\_

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LICENSES OR CERTIFICATIONS YOU POSSESS:

\_\_\_\_ DRIVERS \_\_\_\_ CDL \_\_\_\_ PROFESSIONAL \_\_\_\_ RADIO \_\_\_\_ OTHER TECHNICAL

TYPE OF LICENSE \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

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DRIVER'S LICENSE EVER SUSPENDED? \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES, WHEN AND FOR WHAT REASON: \_\_\_\_\_

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ARE YOU WILLING TO: \_\_\_\_\_ TRAVEL \_\_\_\_\_ WORK OVERTIME \_\_\_\_\_ WORK NIGHTS

PLEASE ATTACH ANY ADDITIONAL INFORMATION THAT MAY BE HELPFUL TO YOUR EMPLOYMENT

# Paulding County Application for Employment

Return to: \_\_\_\_\_

Equal access to programs, services and employment is available to all persons. Those applicant requiring accommodation to the application and/or interview process should notify the Human Resources Department. We consider all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position(s) applied for: \_\_\_\_\_

Date of Application: \_\_\_\_\_

How did you hear about the position?

Advertisement: \_\_\_ Relative: \_\_\_ Inquiry: \_\_\_ Website: \_\_\_ Friend: \_\_\_

Employment Agency \_\_\_ Other: \_\_\_\_\_

Name : \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Street Apt. City State Zip

Telephone #: (\_\_\_\_\_) \_\_\_\_\_ Mobile/Other: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_ Best time to contact you at home is: \_\_\_ am / pm

Have you ever submitted an application to Paulding County? \_\_\_\_\_, If Yes, when? \_\_\_\_\_

Have you ever been employed by Paulding County? \_\_\_\_\_, If Yes, when? \_\_\_\_\_

Are you legally eligible for employment in the United States? \_\_\_\_\_

If you are under 18, can you furnish a work permit? \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ State / Number: \_\_\_\_\_

Are you able to meet all of the attendance requirements of this position? \_\_\_\_\_

Are you able to work overtime if necessary? \_\_\_\_\_ Will you travel if the position requires it? \_\_\_\_\_

Do you have any friends / relatives currently employed by Paulding County? \_\_\_\_\_

If Yes, who?  
\_\_\_\_\_

What is your desired salary range or rate of pay: \$ \_\_\_\_\_ per \_\_\_\_\_

Date available for work: \_\_\_\_\_

Type of employment desired:  Full Time  Part Time  Seasonal

**Employment History:** Starting with your most recent employer, provide the following information. Include any relevant volunteer activities, but exclude any organizations that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.

1. From/To \_\_\_\_\_ Employer/Organization \_\_\_\_\_

Telephone # \_\_\_\_\_ Address \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor \_\_\_\_\_ May We Contact? \_\_\_\_\_

Job Duties/Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Final Rate of Pay: \_\_\_\_\_

2. From/To \_\_\_\_\_ Employer/Organization \_\_\_\_\_

Telephone # \_\_\_\_\_ Address \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor \_\_\_\_\_ May We Contact? \_\_\_\_\_

Job Duties/Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Final Rate of Pay: \_\_\_\_\_

3. From/To \_\_\_\_\_ Employer/Organization \_\_\_\_\_

Telephone # \_\_\_\_\_ Address \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor \_\_\_\_\_ May We Contact? \_\_\_\_\_

Job Duties/Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Final Rate of Pay: \_\_\_\_\_

4. From/To \_\_\_\_\_ Employer/Organization \_\_\_\_\_

Telephone # \_\_\_\_\_ Address \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor \_\_\_\_\_ May We Contact? \_\_\_\_\_

Job Duties/Responsibilities \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Final Rate of Pay: \_\_\_\_\_

Please discuss your interest in employment with Paulding County and any qualifications beyond what is reflected in your application. Use additional sheets if needed.

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**References:** Please provide the names and telephone numbers of three professional references who are not related to you and are not previous supervisors. If professional references are not available, provide school or personal references who are not related to you.

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

### Applicant Statement and Signature:

I certify that all information I have provided in order to apply for and obtain employment with Paulding County is true, complete, and correct. I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with Paulding County and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from County service, whenever it is discovered. I give Paulding County the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency or individual assisting Paulding County in providing relevant, job-related information that will assist in this process. I expressly authorize, without reservation, Paulding County, its representatives, members 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. I hereby waive any and all rights and claims I may have regarding Paulding County, its agents, members or representatives, for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information about me.

I understand that an offer of employment may be contingent upon the successful completion of a pre-employment background criminal investigation, physical, psychological, polygraph, and/or drug and alcohol screen. If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States. If I am hired, I understand that, unless otherwise defined by applicable law, any employment relationship with Paulding County is of an "at will" nature, which means that I am free to resign at any time and Paulding County reserves the same right to terminate my employment at any time. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that all conditions of employment including, but not limited to hours, benefits and salary are subject to change by Paulding County at any time. I understand that no representative of Paulding County 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 appropriate Appointing Authority.

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

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

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please Explain Any Gaps In Employment:

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Have you ever been fired or asked to resign from a job? \_\_\_\_\_

If yes, please explain

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<b>EDUCATION</b>
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	Name and Address of School	Course of Study	Years Completed	Diploma/Degree Obtained
High School				
Undergraduate College				
Graduate Professional				
Other (specify)				

**Related Information:** Please list any relevant professional or trade organizations of which you are a member. Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.

Organization	Offices Held