



GILMER COUNTY GOVERNMENT

EMPLOYMENT APPLICATION www.gilmercounty-ga.gov

Applications may be emailed to:
Krambo-bray@gilmercounty-ga.gov
Or faxed to: **706-635-4349**
Or hand delivered/mailed to:
Gilmer County BOC
Human Resources Department
1 Broad St., Suite 106
Ellijay, GA 30540

Note: All fields must be answered fully in order to be considered for employment. Application must be typed or completed in ink. Please ask for assistance if any portion of the application is unclear.

APPLICANT INFORMATION		Date of Application
Last Name	First Name	Middle Name
Street Address	Apartment/Unit #	P.O. Box
City	State	Zip Code
Cell Phone	Home/Other Phone	Email Address
Position Desired	Date Available for employment	Desired Salary/Hourly Rate
Type of Employment (Check all that apply) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal <input type="checkbox"/> Volunteer		
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, are you authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Note: If offered employment, you will be required to provide documentation to verify employment eligibility. Failure to provide the requested documentation may result in a determination that the applicant is ineligible for employment in the United States.		
Are you related to anyone who currently works for Gilmer County Government? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what is the relationship? _____ Name of Employee? _____		
Have you ever been previously employed by Gilmer County? <input type="checkbox"/> Yes <input type="checkbox"/> No Position Held? Department? _____		
EDUCATION		
High School/GED	City	State
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Trade (or Apprentice) School	City	State
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
1. College or Business School	City	State
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. College or Business School	City	State
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Special Courses or Certifications which relate to the position you are applying for:		

PAST WORK HISTORY

Describe your work history, beginning with your current or most recent job. Include any volunteer experience and/or any periods of unemployment. All fields with the exception of "supervisor", are required. Failure to complete all required fields of information for each job held may result in disqualification.

A resume may be attached only as additional information and will not be accepted in lieu of completing this section.

Company Name:	Telephone Number:	Supervisor:
Street Address:	City/State:	Zip Code:

Employment Dates: (Start-End)	Position Held:
-------------------------------	----------------

Describe your duties:

Reason for Leaving:

Company Name:	Telephone Number:	Supervisor:
Street Address:	City/State:	Zip Code:

Employment Dates: (Start-End)	Position Held:
-------------------------------	----------------

Describe your duties:

Reason for Leaving:

Company Name:	Telephone Number:	Supervisor:
Street Address:	City/State:	Zip Code:

Employment Dates: (Start-End)	Position Held:
-------------------------------	----------------

Describe your duties:

Reason for Leaving:

Company Name:	Telephone Number:	Supervisor:
Street Address:	City/State:	Zip Code:

Employment Dates: (Start-End)	Position Held:
-------------------------------	----------------

Describe your duties:

Reason for Leaving:

MILITARY

Branch:	Highest Rank Obtained:	Type of Discharge:
---------	------------------------	--------------------

If served in the Military, please include a copy of your DD214.

REFERENCES		
List the name, address, email, and telephone number of three (3) Professional References. Do not list relatives. All listed references will be contacted. (Full Name, email and Telephone Number must be completed.)		
1. Name:		Email:
Street Address:	City/State/Zip:	Telephone Number:
Company:		
2. Name:		Email:
Street Address:	City/State/Zip:	Telephone Number:
Company:		
3. Name:		Email:
Street Address:	City/State/Zip:	Telephone Number:
Company:		
REFERRAL SOURCE		
Referred by:		
<input type="checkbox"/> County Website		
<input type="checkbox"/> Indeed		
<input type="checkbox"/> Other		
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No May we contact your current/previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>Gilmer County is a drug free workplace.</i>		
DRUG FREE WORKPLACE ACKNOWLEDGEMENT		
As a condition of employment with Gilmer County Government, you will be required to submit to an alcohol and controlled substance test. In order to be employed by Gilmer County Government, you must successfully pass this screening test. Candidates rejected for failing to pass the required screening will be required to wait at least 12 months before reapplying for employment. Employees must, as a condition of employment, abide by the Gilmer County Substance Abuse/Drug Testing Policy. Employees who are indicted for or convicted of a controlled substance related violation under state or federal law, or who please guilty or no contest to such charges must inform their Supervisor or Human Resources in writing within five (5) business days of the conviction or plead (this is a requirement of the Drug Free Workplace Act of 1988). Should you be offered a job with Gilmer County Government, your position will be subject to post accident and reasonable suspicion testing. All safety sensitive positions will be subject to random drug and alcohol testing. These requirements are in accordance with the County's Substance Policy.		

By signing this form, you acknowledge the above and consent to such examination and screening test.

Applicant's Signature _____ Date: _____

APPLICANT'S CERTIFICATION AND AGREEMENT

Read carefully before signing. Unsigned applications will be disqualified.

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

I authorize without reservation all corporations, companies, credit agencies, persons, educational institutions, law enforcement agencies, persons, educational institutions, law enforcement agencies, and former employers to release information they may have about me, and release them from any liability and responsibility for doing so at the request of Gilmer County Government or its acting agent in the process of verifying my application for consideration of employment. I authorize you to request, receive, and verify all information given by me in this application for employment.

If I am employed at the Gilmer county Government, I agree to conform to the polices, rules and regulations may be changed, interpreted, withdrawn, or added to by the employer at any time, at the employer's sole option.

I understand that this application is not a contract of employment. I further understand that if I become employed by Gilmer County Government, my employment is at-will and not a contract of employment and may be terminated with or without cause at any time by me or by Gilmer County.

If a physical agility test and/or physical examination is required by Gilmer County Government for the position I am applying, I consent to undergo the test/exam, after I have been offered employment, as deemed necessary.

Employment is contingent upon successfully passing the required test/exam.

I understand resumes, letters of reference, certificates, etc., submitted with the application become the property of Gilmer County and cannot be returned. The information I have provided on the application is subject to public disclosure under the Georgia Open Records Act.

By signing this application, I hereby acknowledge that I understand and agree to all provisions outlined herein.

Applicant's Printed Name: _____

Applicant's Signature: _____

Date: _____

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. EOE