

# APPLICATION FOR EMPLOYMENT



**CITY OF HELEN**  
**25 Alpenrosen Strasse**  
**PO Box 280**  
**Helen, GA 30545**  
**706-878-2733**

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position (s) Applied for			Date of Application		
How Did You Learn About Us?					
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend		<input type="checkbox"/> Walk-in	
<input type="checkbox"/> Employment Agency		<input type="checkbox"/> Relative		<input type="checkbox"/> Other _____	
Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number (s)				Social Security Number	

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No

Have you ever filed an application with us before?  Yes  No  
 If Yes, give date \_\_\_\_\_

Have you ever been employed with us before?  Yes  No  
 If Yes, give date \_\_\_\_\_

Are you currently employed?  Yes  No

May we contact you present employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No  
*Proof of citizenship or immigration status will be required upon employment.*

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full time  Part time  Shift work  Temporary

Do you have a valid State of Georgia drivers license?  Yes  No

Have you been convicted of a felony within the last 7 years?  Yes  No  
*Conviction will not necessarily disqualify an applicant from employment*

If yes, please explain  
 \_\_\_\_\_  
 \_\_\_\_\_

## EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone number (s)		Hourly Rate/Salary		
		Starting	Final	
Job title	Supervisor			
Reason for leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone number (s)		Hourly Rate/Salary		
		Starting	Final	
Job title	Supervisor			
Reason for leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone number (s)		Hourly Rate/Salary		
		Starting	Final	
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Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone number (s)		Hourly Rate/Salary		
		Starting	Final	
Job title	Supervisor			
Reason for leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*

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## Other Qualifications

Summarize special job related skills and qualifications acquired from employment or other experience.

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## Specialized Skills

### Check Skills / Equipment Operated

\_\_ PC--List software experience: \_\_\_\_\_

\_\_ Fax                      \_\_ Backhoe                      \_\_ Hydraulic lift                      \_\_ Street / leaf vacuum

\_\_ Copier                      \_\_ Dump truck                      \_\_ Power tools                      Others List: \_\_\_\_\_

\_\_ Ten key by touch      \_\_ Bucket truck                      \_\_ Tractor                      \_\_\_\_\_

State any additional information you feel may be helpful to us in considering your application.

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**Note to applicant:** DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities in such a job or occupation is attached.  Yes       No

## References

1. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
name phone number  
\_\_\_\_\_  
address
2. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
name phone number  
\_\_\_\_\_  
address
3. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
name phone number  
\_\_\_\_\_  
address
4. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
name phone number  
\_\_\_\_\_

## EDUCATION

	Name & Address of School	Course of Study	Years Completed	Diploma Degree
High School				
College				
Tech School				

Indicate any foreign language you can speak, read, and / or write:

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Describe any specialized training, apprenticeship, skills and extracurricular activities. Include any job-related training received in the United States military.

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- 1) Any misrepresentation or deliberate omission of a fact in my application is justification for refusal of, or if employed, termination from employment.
- 2) I understand that the City of Helen will make a thorough investigation of my entire work history and may verify all data given in my application for employment. In addition, I understand that the City may use criminal background reports, credit reports and driving records for employment purposes, including hiring, promotion, retention, and termination.
- 3) I further understand that the City may require alcohol/drug testing for employment purposes, including hiring, promotion, retention, and termination.

**My signature below indicates that I understand the above statements and grant permission for the City of Helen to run my criminal history, credit report, driving record, and contact current or previous employers (unless otherwise stated).**

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Signature

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Date

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**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**