

APPLICATION FOR EMPLOYMENT
UNION COUNTY SHERIFF'S OFFICE
UNION COUNTY JAIL
940 Beasley Street
Blairsville, GA 30512
706-439-6066-Office
706-439-6080-Jail

Please Print

Equal access to programs, services and employment is available to all persons. Those applications requiring reasonable accommodation to the application and/or interview process should notify a representative to the Human Resources Department

Position Applied For: _____ Date of Application: _____

Name: _____ SSN: _____

Address: _____

Telephone: _____ Cell Phone: _____ DOB: _____

If you are under 18, and it is required, can you furnish a work permit? _____

If no, please explain: _____

Have you ever been employed here before? If so, give dates & positions: _____

Are you legally eligible for employment in this county? _____

Date available for work: _____ What is your desired salary? _____

Type of employment desired: _____

Full Time _____ Part Time _____ Temporary _____ Seasonal _____

Are you able to meet the attendance requirements of the position? _____

Have you ever plead "guilty" or "no contest" to, or been convicted of a crime: _____

If yes, please provide date(s) and details _____

*ANSWERING "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN
AUTOMATIC BAR TO EMPLOYMENT, FACTORS SUCH AS DATE OF THE
OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION
AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT.*

Driver's license # if driving is an essential job function _____ State: _____

Employment History

Provide the following information of your past four employers, assignments or volunteer activities, starting with the most recent.

From To	Employer	Telephone
Starting Job Title/Final	Address	
Immediate Supervisor	Nature Of Work	May We Contact Them?
Reason For Leaving		Salary
From To	Employer	Telephone
Starting Job Title/Final	Address	
Immediate Supervisor	Nature Of Work	May We Contact Them?
Reason For Leaving		Salary
From To	Employer	Telephone
Starting Job Title/Final	Address	
Immediate Supervisor	Nature Of Work	May We Contact Them?
Reason For Leaving		Salary
From To	Employer	Telephone
Starting Job Title/Final	Address	
Immediate Supervisor	Nature Of Work	May We Contact Them?
Reason For Leaving		Salary

Skills & Qualifications

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job related functions in the position for which you are applying.

Educational Background

High School: _____ Year Completed: ____

College: _____ Major: _____ Degree: _____

Other: _____

References:

Name: _____ Phone: _____ Number Of Years Known: _____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (1) cancel further consideration of this application (2) immediately discharge me from the employer's service, whenever it is discovered. Expressly authorize without reservation, the employer, its representatives, employees 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, job interview. I hereby waive any and all rights and claims I may have regarding the employers, its agents, employees, representatives, for seeking, gathering and using such information in the employment proves and all other persons, corporations or organizations for furnishing information about me.

I understand that the employer does not unlawfully discriminate its employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employers reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer 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 employer's president.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete a I-9 Form in this regard.

UNION COUNTY IS A DRUG FREE WORKPLACE!

Do not sign until you have read the above applicant statement.

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

Signature of Applicant

Date
