CITY OF DUNWOODY APPLICATION FOR EMPLOYMENT

PLEASE PRINT

Position(s) Applied for _____ Date of Application_____/_____/_____

Name_____
LAST FIRST MIDDLE

Address_____
STREET CITY STATE ZIP CODE

Telephone ( ) _____ Social Security Number_____-_____-_____

If you are under 18, can you furnish a work permit?…… ☐ Yes ☐ No

Have you ever been employed here before?…… ☐ Yes ☐ No

Are you legally eligible for employment in this country? ……... ☐ Yes ☐ No
(Proof of U.S. citizenship or immigration status will be required upon employment.)

Date Available for Work…… ____/_____/____

Type of Employment Desired: ☐ Full Time ☐ Part-Time ☐ Temporary ☐ Seasonal ☐ Educational Co-Op

Have you been convicted of a felony in the last seven (7) years?……... ☐ Yes ☐ No

If yes, please explain:_____
(Such conviction may be relevant if job related but may not automatically bar you from employment.)

_____

Driver's license number (if job related) _____ State _____

Employment History

List the last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience.

From	To	Employer	Telephone
			( )
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities	
Reason for Leaving		Hourly Rate/Salary Start: $_____ per _____ Final: $_____ per _____	

From	To	Employer	Telephone
			( )
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities	
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From	To	Employer	Telephone
			( )
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities	
Reason for Leaving		Hourly Rate/Salary Start: $_____ per _____ Final: $_____ per _____	

AN EQUAL OPPORTUNITY EMPLOYER

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you for work with our City. Please include any courses, seminars or training that you have completed that would enable you to perform the job duties for the position for which you are applying. Add additional pages if necessary.

_____

_____

_____

_____

Educational Background

Name and Location	Years Attended	Years Completed	Did You Graduate?			Course of Study
High School						
College			Major	Degree		
College			Major	Degree		
Other						

List academic honors, extracurricular activities, or any relevant offices held.

_____

_____

_____

References

Name	Telephone	Years Known
	Area Code ( )	
	Area Code ( )	
	Area Code ( )	

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the City of Dunwoody's service if I have been employed.

I give the City of Dunwoody the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the City of Dunwoody and its representatives for seeking such information, and all other persons, corporations and organizations for furnishing such information.

The City of Dunwoody is an Equal Opportunity Employer. The City of Dunwoody does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

I understand that the City of Dunwoody requires the successful completion of a drug test as a condition of employment. By submitting this Application for Employment, I hereby consent to a drug test, at the City of Dunwoody's discretion.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the City of Dunwoody and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, the City of Dunwoody reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the City of Dunwoody has the authority to make any assurances to the contrary.

Signature of Applicant _____ Date ____/_____/____