



CITY OF FORT VALLEY

204 West Church Street

P.O. Box 956 • Fort Valley, Georgia • 31030

Employment Application

| APPLICANT INFORMATION | | | |
|---|----------------------------|--|--------------------|
| Last | First | M.I. | Date |
| Street Address | | Apartment/Unit# | |
| City | State | | Zip Code |
| Phone | | Email Address | |
| Date Available | Social Security No. | | Desired Department |
| Position Applied For: | | | |
| Are you a U. S. Citizen | Yes / No | If no, are you authorized to work in the U.S.? | Yes / No |
| Have you ever worked for this company? | Yes / No... If so, when? | | |
| Have you ever been convicted of a felony? | Yes / No...If yes explain? | | |

| EDUCATION | | | |
|-------------|----|------------------|----------|
| High School | | Address | |
| From | To | Did you Graduate | Yes / No |
| College | | Address | |
| From | To | Did you Graduate | Yes / No |
| Other | | Address | |
| From | To | Did you Graduate | Yes / No |

| REFERENCES | |
|---|----------------|
| Please list three professional references | |
| Full Name | Relationship |
| Company | Phone () |
| Address | |
| Please list three professional references | |
| Full Name | Relationship |
| Company | Phone () |
| Address | |
| Please list three professional references | |
| Full Name | Relationship |
| Company | Phone () |
| Address | |

REQUEST FOR MOTOR VEHICLE REPORT (MVR)

| | |
|---|-------------------------|
| SECTION 1- DRIVER INFORMATION (must exactly match driving record) | |
| Full Name (First, Middle, Last) | |
| Driver - Date of Birth (MM/DD/YY) | Driver - License Number |
| SECTION 2- THIRD PARTY REQUESTOR INFORMATION | |
| CITY OF FORT VALLEY | |
| 204 W. CHURCH ST. FORT VALLEY, GA 31030 | |
| SECTION 3- AUTHORIZATION TO RELEASE REORD OF DRIVER | |
| Under penalty of law, I hereby consent to the release of my driving record to the person and/or entity named in Section 2, in accordance with O.C.G.A. 40-5-2 | |
| Signature of Driver | |
| Date | |

| PREVIOUS EMPLOYMENT | | | |
|--|--------------|--------------------|--|
| Company | | Phone | |
| | | | |
| Address | | Supervisor | |
| Job Title | Start Salary | End Salary | |
| Responsibilities | | | |
| From: | To: | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | Yes / No | |
| Company | | Phone | |
| Address | | Supervisor | |
| Job Title | Start Salary | End Salary | |
| Responsibilities | | | |
| From: | To: | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | Yes / No | |
| Company | | Phone | |
| Address | | Supervisor | |
| Job Title | Start Salary | End Salary | |
| Responsibilities | | | |
| From: | To: | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | Yes / No | |

| MILITARY SERVICE | |
|----------------------------------|-------------------|
| Branch | From: To: |
| Rank at Discharge | Type of Discharge |
| If other than Honorable, explain | |

| DISCLAIMER AND SIGNATURE | |
|--|------|
| I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. | |
| Signature | Date |

The City of Fort Valley is an Equal Opportunity Employer