Walton County Board of Commissioners
Employment Application

137 E. Washington Street Monroe, Georgia 30655
Email: hr.resume@co.walton.ga.us **Website:** www.waltoncountyga.gov
Telephone: (770) 267-1329 **Fax:** (770) 267-1415

Positions Applied For:

1. _____ 3. _____

2. _____ 4. _____

Walton County is an Equal Opportunity Employer and is committed to providing equal employment opportunities to all applicants and employees without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, age, disability, genetic information, veteran status, or any other protected characteristic under applicable law. Incomplete applications will not be accepted. Applications will only be accepted for posted positions. Applications for Sheriff's Office positions should be submitted directly to the Walton County Sheriff's Office.
Walton County is a Drug Free Workplace.

PERSONAL DATA

Please print in black or blue ink or type. **DO NOT** use pencil.

Last Name: **First Name:** **Middle Name:**

Street Address:

City: **State:** **Zip:**

Home Phone: **Business Phone:**

Cell Phone: **Email Address:**

Will you accept:
Check all that apply

☐ **Full-Time** ☐ **Shift Work**

☐ **Temporary or Part-Time** ☐ **Weekends/Holidays**

Are you eligible to work in the United States either because you are a U.S. Citizen or have U.S. government permission to do so?

**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.*

Have you ever been employed by Walton County Board of Commissioners? _____
If yes, when and what department?

Do you have any relatives who are currently employed with Walton County Board of Commissioners? _____

If yes, please list name, relationship, and department in which they work:

Do you have a valid Driver's License? **License #** **Class** **State**

**Note: Possession of a valid driver's license is not an essential function of all employment offered by Walton County. Answering "No" to this question is not necessarily a bar to consideration for employment.*

Have you had any traffic violations in the past 3 years? _____

If yes, please indicate type of offense and dates:

Have you ever been discharged from employment because your work or conduct was not satisfactory? _____

If yes, please explain:

EDUCATION

	Circle Highest Year Completed	Diploma/Degree/Certification	Course of Study
Elementary School	5 ☐ 6 ☐ 7 ☐ 8 ☐		
High School	9 ☐ 10 ☐ 11 ☐ 12 ☐		
Undergraduate			
Graduate			

Describe any specialized training, apprenticeship or skills:

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

REFERENCES: List three (3) persons, other than relatives, who have knowledge of your work experience:

Name	Address	Phone Number
Name	**Address**	**Phone Number**
Name	**Address**	**Phone Number**

EMPLOYMENT EXPERIENCE

List the positions that you have held, starting with your most recent one. THIS SECTION MUST BE COMPLETED IN DETAIL. You are encouraged to attach a resume if you wish, but reference to a resume in lieu of completing this section cannot be accepted and will be considered incomplete. INCOMPLETE APPLICATIONS WILL NOT BE SUBMITTED FOR CONSIDERATION. Under "duties", describe your job in sufficient detail so that we can determine not only your tasks but also the level of responsibility. If you have had more jobs or wish to add more detail to the "duties" section, complete a separate sheet in the same format and attach.

Name of Organization or Firm:

From (Month/Year) | To (Month/Year)

Address: | Telephone Number:

City: | State: | Zip:

Total Time Employed (Years & Months): | Official Job Title:

Supervisor's Name: | Hours Worked Per Week:

Specific Job Duties:

Specific Reason For Leaving:

Beginning Salary: $ | Per: | Ending Salary: $ | Per :

BETWEEN THESE JOBS (IF APPLICABLE): ☐ **UNEMPLOYED** ☐ **IN-SCHOOL** ☐ **OTHER**

Name of Organization or Firm:

From (Month/Year) | To (Month/Year)

Address: | Telephone Number:

City: | State: | Zip:

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Supervisor's Name: | Hours Worked Per Week:

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Specific Reason For Leaving:

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BETWEEN THESE JOBS (IF APPLICABLE): ☐ UNEMPLOYED ☐ IN-SCHOOL ☐ OTHER

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the answers given herein on this application are true and complete to the best of my knowledge. I understand that any misrepresentations or material omission of fact on this or any other document required by Walton County, if employed, may be considered as constituting grounds for disciplinary measures, including dismissal. I further understand that any offer of employment is subject to successful completion of a drug screen and where necessary, other examinations and background investigations. Having applied for employment with Walton County, I do hereby agree and do give my consent that any person, firm or organization listed herein is authorized to furnish Walton County with personal or reference material concerning my character, past employment or any other information they so request and release them from any damages whatsoever for issuing same.

May we contact your present employer? ☐ YES ☐ NO

Signature Date

NOTE: If you are contacted for an interview and need special accommodations due to a disability, please advise at that time as to the type of accommodation.

Walton County Board of Commissioners
Affirmative Action Form

The following information is sought only to assist the County in analyzing and monitoring its recruitment process in compliance with Federal laws. The information will be kept separately from your application form, and will not be used in employment decisions.

Please check items that apply:

- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ Native American or Alaska Native
- ☐ Native Hawaiian or Pacific Islander
- ☐ Two or More Races
- ☐ White

☐ Female ☐ Male

Position applied for:

_____

How did you learn of this job opening?

- ☐ State Employment Service
- ☐ Job Board Websites
- ☐ County Bulletin Board/Website
- ☐ Friend/Relative
- ☐ Walk-in
- ☐ Other *(explain)* _____

NAME **DATE**

ADDRESS **CITY** **STATE** **ZIP CODE**

HOME PHONE