



Murray County E9-1-1 Center Application for Employment

The Murray County E9-1-1 Center is an equal opportunity employer, dedicated to the policy of non-discrimination in employment on any basis including race, color, age, sex, religion, or national origin.

(This application must be completed in your own handwriting)

I. Personal Information

Full Name: _____
(Last) _____ (First) _____ (Middle) _____

Other Names Used: _____
(Maiden, Legal Name Change, Aliases, Nicknames)

Address: _____
(Street Address) _____ (Apartment #) _____

(City) _____ (State) _____ (Zip Code) _____

List prior address if you have lived at your current address less than five years.

Prior Address: _____
(Street Address) _____ (Apartment #) _____

(City) _____ (State) _____ (Zip Code) _____

Home Telephone Number: _____ Cell Phone Number: _____

Email: _____

Date of Birth: _____ Social Security Number: _____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Place of Birth: _____ Driver's License: _____
(City and State) _____ (State and Number) _____

List any other states in which you have been issued a driver's license: _____

II. Education

High School Diploma: Yes No GED or Equivalent: Yes No

Name of High School or Issuer of GED/Equivalent: _____

City, State: _____ Year Graduated: _____

List any languages you are fluent in: _____

College or University: _____

City, State: _____ Years Attended or Graduated: _____

Degree Received: _____

Specialized Schools or Training (*If more room is need, attach additional training to application.*):

Name of School: _____ City, State: _____

Area of Study: _____ Year: _____

III. References

List three persons **NOT RELATED** to you whom you have known for at least three years.

Full Name: _____ Relationship: _____

Address: _____ Phone Number: _____

Full Name: _____ Relationship: _____

Address: _____ Phone Number: _____

Full Name: _____ Relationship: _____

Address: _____ Phone Number: _____

IV. Employment History

Current Employer

Company: _____ Telephone Number: _____

Address: _____
(Street Address)

City: _____ State: _____ Zip Code: _____

Job Title: _____ Supervisor: _____ Hire Date: _____

Previous Employers

Company: _____ Telephone Number: _____

Address: _____
(Street Address)

City: _____ State: _____ Zip Code: _____

Job Title: _____ Supervisor: _____ Hire Date: _____

End Date: _____ Reason for Leaving: _____

Company: _____ Telephone Number: _____

Address: _____
(Street Address)

City: _____ State: _____ Zip Code: _____

Job Title: _____ Supervisor: _____ Hire Date: _____

End Date: _____ Reason for Leaving: _____

Company: _____ Telephone Number: _____

Address: _____
(Street Address)

City: _____ State: _____ Zip Code: _____

Job Title: _____ Supervisor: _____ Hire Date: _____

End Date: _____ Reason for Leaving: _____

Are you a citizen of the United States? Yes No

If no, are you authorized to work in the United States? Yes No

V. Position Applying For

Are you currently certified as Basic Communications Officer in Georgia? Yes No

Are you able to work any shift? Yes No

Do you have any physical conditions which may limit your ability to perform the job of a Communications Officer? Yes No

Are you related to any employee of the Murray County E9-1-1 Center? Yes No
If yes, list employee: _____

Have you applied here before? Yes No If yes, when? _____

Have you applied with any other E9-1-1 Centers? Yes No
If yes, where? _____

VI. Military Record

Have you ever served in the United States Military? Yes No

Branch of Service: _____ Dates of Service: _____

Type of Separation/Discharge: _____

Are you a member of the National Guard or Reserve? Yes No

VII. Court Record

Have you ever been arrested? Yes No

If yes, list below:

Year	Charge	Police Agency	City/State	Court	Disposition

1. Did you answer truthfully all the questions on your application? Yes No
2. Did you omit any information from the application that you feel might disqualify you from consideration for this position? Yes No
3. Have you ever used an alias? Yes No
4. Have you ever been terminated from employment? Yes No
5. If yes, for or what reason? _____
6. Have you ever quit a job in lieu of being terminated? Yes No
7. Have you ever been asked to resign from a job? Yes No
8. Are there any former employers who wouldn't give you a favorable recommendation? Yes No
9. Have you ever stolen anything from an employer? Yes No
10. Do you drink alcohol? Yes No
11. Describe your drinking habit: _____
12. Have you ever drunk more than you do now? Yes No
13. Have you ever called in sick to work because of a hangover? Yes No
14. Have you ever gone to work with a hangover? Yes No
15. Have you ever worked under the influence of alcohol or drugs? Yes No
16. When was the last time you were under the influence of either alcohol or drugs? _____
17. When was the last time you drove a vehicle while under the influence of alcohol or drugs? _____
18. Have you ever used marijuana? Yes No How many times? _____
19. When was the last time? _____
20. Have you ever purchased, distributed, or manufactured any illegal drugs? Yes No
21. Have you ever used any illegal drugs other than marijuana? Yes No
22. If yes, list: _____
23. When was the last time you were with someone who used any illegal drugs? _____
24. How many friends or family members of yours are involved in illegal drug activity? _____
25. What is the largest amount of money you have won or lost at one time gambling? _____

26. Do you owe any gambling debts? Yes No

27. Have you ever joined or attempted to join the military? Yes No

28. Did you receive an honorable separation? Yes No

29. While in the military did you ever receive a court martial or any other disciplinary action?
 Yes No If yes, explain: _____

30. Were you ever the subject of any military investigation? Yes No

31. How many traffic citations have you received? _____

32. How many vehicle accidents have you been involved in as the driver? _____

33. Has your auto insurance ever been cancelled? Yes No

34. Has your driver's license ever been suspended or revoked? Yes No

35. Do you have good credit? _____

36. Have you ever filed bankruptcy? Yes No

37. Are there any outstanding citations or warrants for you? Yes No

38. Have you ever been the subject of any criminal investigation? Yes No

39. If yes, explain: _____

40. What is the most serious crime you have ever been involved in?

Applicant Signature

Date



**Murray County E9-1-1 Center
810 G.I. Maddox Pkwy
Chatsworth, GA 30705
Ph.: (706) 695-6222 Fax: (706) 517-5957**

Background Consent Form

I, _____, hereby authorize any representative of the Murray County
(Applicant's Printed Name)
E9-1-1 Center, bearing this release or copy thereof, within one year of its date, to obtain all records pertaining to my employment, military, credit, or educational records to include but not limited to personal history, disciplinary records, medical records, and credit records. I also give my consent for a criminal history record check and driver's history record check.

The undersigned agrees and consents to submit to a drug testing as part of the undersigned's pre-employment application.

I hereby release you, as custodian of such records, from any liability for damages of whatever kind, because the compliance with this authorization and request to release information, or any attempt to comply with it.

I am furnishing my Social Security Number on a voluntary basis with the understanding such is not required by State or Federal Statute or regulation. I understand the Murray County E9-1-1 Center will utilize this number **only** to facilitate the location of such records listed above in connection with this application.

Applicant Signature

Date

Witness

Date