Houston County Sheriff's Office Communication Division



Hiring Process

January 2025

"We, the men and women of the Houston county Sheriff Department Communications Division, are dedicated to improving the quality of life in our community by providing an effective channel of communication between the public and public safety providers. We are committed to providing a professional response to each call for service that is caring and helpful. We are responsible for the uninterrupted flow of information in the area of emergency services communication. We are organized, trained, and committed to maximize effective and efficient public service to maintain a positive work environment. We work to fulfill our mission in a manner that inspired the public's trust and confidence and protects the constitutional rights of each citizen." - Houston County Emergency Services Mission Statement

The mission statement from the Houston County Emergency Services Policy Manual, sets forth a standard for the staff. Traits identified are professionalism, ethical, honest, service, and commitment.

Houston County Communication Division's Agency Goals are as follows: "We are committed to the highest level of performance by providing effective, efficient and courteous service. We continually strive to protect life and property, and to be sensitive to the needs of others. We pledge to treat all with dignity and respect. Through continued education and training, we endeavor to achieve and maintain our tradition of excellence. All employees will devote their time and attention to the Houston County 911 Emergency Communications Center and the functions thereof. They will not engage in any activity that may interfere with the efficiency of the Center nor will they participate in, or be a part of, any activity that would reflect a bad image of the Center. Whenever dealing with the public, employees will conduct themselves in a courteous manner and refrain from boisterous conduct. Furthermore, employees will display respect and courtesy when dealing with other employees."

Furthermore, O.C.G.A. 35-8-23 establishes *minimum* selection standards. It includes criteria on citizenship, age, and education. It also requires applicants be found of good moral character and be found free of any physical, emotional, or mental condition.

After reviewing the Georgia Peace Officer Standards and Training Council (P.O.S.T.) *Manual for Background Investigators*, state, and federal laws, and CALEA (Commission on Accreditation for Law Enforcement Agencies), the following areas should be included in the selection process:

Phase One:

- ☐ Application and required documentation review:
 - Credit Score and Report (minimum requirement 500 or higher to submit application. Can be obtained at www.creditkarma.com or www.annualcreditreport.com) Must include entire, detailed, report.
 - Certified Drivers History (Will need a 7-year history. Can obtain history at Driver's License Department) Must be dated within 7 days of submittal.
 - Birth Certificate (Must be a U.S. or Naturalized Citizen- Will need birth certificate or one or more of the following: Baptismal Record, Draft Card, Court Records, Passport, Citizenship papers, Armed Forces Discharge Paper (DD214), Certified.)

yo	gh School Diploma or equivalent (If you do not have your certificate for proof, u can submit a certified transcript showing graduation dates or an accredited llege degree or certified college transcripts showing graduation date.
☐ Preliminary back	ckground check (DDS and state files)
• Ap	pplication Review
• Cre	edit score and report review
• Dr	iver's History Review
• Cr	iminal History Review
• Int	ernet Check (Twitter, Facebook, Google, Instagram, etc.)
• Per	rsonal History Questionnaire (PHQ) review
Phase Two: (If y	ou are called in for second phase, prepare to stay for the entire day)
☐ Realistic Job Pr	review
☐ Cognitive Testi	ing (Must pass cognitive testing with an 80- or higher to go to next phase)
☐ Writing Exercis	se
☐ Typing Test	
☐ Panel Interview	<i>1</i>
☐ Two Hour Obse	ervation
Phase Three:	
☐ Interview with	Captain and Lieutenant
☐ Personal / Profe	essional References Checked
☐ Detailed Backg	ground investigation
Phase Four:	
☐ Psychological 7	Гest
☐ Conditional Of	fer of Employment (COE) letter
☐ Complete Phys	ical and Drug screen
☐ Hearing / Visio	n Test
☐ Interview with	Sheriff, if needed. (All appointments must be approved by the Sheriff.)

Although rigorous, this process is designed to provide for the best opportunity to select new hires that will represent the Sheriff with the highest level of professionalism and integrity.

Application and Required Documentation

The candidate should print or pick up an application packet from the 911 center. The packet

should include:
☐ Application accuracy notice
☐ Application instructions
☐ Selection process outline and what to expect during the process
☐ Houston County Application for Employment
☐ List of required documentation to be turned in with the application
o Birth Certificate or proof of citizenship
o Copy of valid driver's license
o Copy of High School Diploma or GED
o DD-214 long form showing character of service (if applicable)
o Recent color photograph
o Credit history to include credit score
o Certified copy of Drivers History (7-year history)
☐ Job summary to include minimum requirements and special requirements
☐ U.S. Fair Credit Reporting Act (FCRA) of 1996 advisement and authorization
☐ Personal History Questionnaire (PHQ)
☐ Reference release statement form
☐ Authorization to release information form
☐ Willingness checklist
☐ Candidate data sheet (information required by P.O.S.T.)
☐ Lautenberg Act (18 U.S.C. 922) screening form
☐ Consent to background investigation, physical examination, and drug testing form

APPLICATION WILL NOT BE ACCEPTED UNTIL FULLY COMPLETED. IF APPLICATION IS TURNED IN WITH MISSING DOCUMENTS, ITEMS OR SECTIONS, APPLICATION WILL NOT BE PROCESSED AND THE APPLICANT WILL BE NOTIFIED VIA LETTER

Application Accuracy Notice

It is to your advantage to be absolutely truthful in answering all questions in your interviews, on your application and personal history questionnaire.

A misstatement of fact or the omission of requested information is ground for automatic rejection.

We have found in the past that some applicants have been rejected because of a misstatement or omission where the fact which they attempted to hide would not have been a reason for rejection.

We encourage you to be absolutely truthful in these matters.

I fully understand what I have read:	
Applicant Printed Name	Applicant Signature / Date
Witness Printed Name	Witness Signature / Date

Instructions and Information

Please read carefully before beginning.

1. A background investigation will be conducted based on the information you provided in this application. It is critical that you fill out this application completely, truthfully, and accurately. If at any point during the background investigation, or thereafter, it is found that you misrepresented, deliberately omitted, or falsified any information, you will be automatically disqualified from further consideration. It is imperative that you list any arrests and/or convictions to include a finding or a verdict of guilt or a plea of guilty and a plea of Nolo Contendere in a criminal proceeding, regardless of whether the judgment of quilt or sentence is withheld or not entered thereon. This includes first offenders (Georgia State Law 35-8-7.1). You will need to include a reason for the violation.

Do not leave any blanks in this packet. If an item does not apply, write N/A.

- 2. The following situation WILL prohibit an applicant from serving as a Communication Deputy:
 - Conviction in any Court of a felony offense.
 - Conviction in any Court of a drug related offense.
 - Less than eighteen (18) years of age at the time of appointment.
- 3. The following situations MAY prohibit an applicant from serving as a Communication Deputy:
 - Any pending criminal action in any court.
 - A military Discharge other than Honorable.
 - Seven (7) or more points accumulated against drivers' record at the time of the application.
 - Not a citizen of the United States of America.
 - Engaging in actions or behaviors that conflict with the agency's code of conduct, goals or mission statement.

Note: An applicant, who has received an official pardon or other similar action for any offense or applicable condition as stated above, is not obligated to disclose the offense or condition in this application. If, however, during the course of a background investigation, facts are discovered regarding the offense or condition, the applicant may be required to produce proof of such pardon or action to remain in consideration for employment.

- 4. If you have any questions regarding this application, please contact the Houston County Sheriff's Office Communications Division at (478) 542-9911. For specific questions about positions with the Houston County Sheriff's Office Communication Division, please contact the Houston County Sheriff's Office Communications Division at (478) 542-9911.
- 5. Once completed, signed, dated, and all required documents attached, return the application to the Houston County Communication Division at 200 Carl Vinson Pkwy in Warner Robins, Ga.

Selection Process Outline

The purpose of this letter is to inform you the procedures that we take during the selection process. It is very important the application submitted is completed in full, as incomplete applications will not be considered for employment. Once we have received your completed application, the process could take anywhere from 4 to 6 weeks to complete. If you are ruled out as a prospective employee, at any time during the process, you will be notified in writing. You may only submit an application every six months. The application process are as follows:

	nit an application every six months. The application process are as follows:
Phase One:	
□ Application	and required documentation review:
•	Credit Score and Report (minimum requirement 500 or higher to submit application. Can be obtained at www.creditkarma.com or www.annualcreditreport.com) You must provide the ENTIRE detailed report.
•	Certified Drivers History (Will need a 7-year history. Can obtain history at Driver's License Department)
•	Birth Certificate (Must be a U.S. or Naturalized Citizen- Will need birth certificate or one or more of the following: Baptismal Record, Draft Card, Court Records, Passport, Citizenship papers, Armed Forces Discharge Paper (DD214), Certified.)
•	High School Diploma or equivalent (If you do not have your certificate for proof, you can submit a certified transcript showing graduation dates or an accredited College degree or certified college transcripts showing graduation date.
□ Preliminary	background check (DDS and state files)
•	Application Review
•	Credit score and report review
•	Driver's History Review
•	Criminal History Review
•	Internet Check (Twitter, Facebook, Google, Instagram, etc.)
•	Personal History Questionnaire (PHQ) review
Phase Two: (l ☐ Realistic Jol	If you are called in for second phase, prepare to stay for the entire day) b Preview
☐ Cognitive T	esting (Must pass cognitive testing with an 80- or higher to go to next phase)
☐ Writing Exe	ercise
☐ Typing Test	t .
☐ Panel Interv	
□ Two Hour (Observation

Phase Three:

Interview with Captain and Lieutenant
Personal / Professional References Checked
Detailed Background investigation

Phase Four:	
☐ Psychological Test	
\square Conditional Offer of Employment (COE)	letter
☐ Complete Physical and Drug screen	
☐ Hearing / Vision Test	
☐ Interview with Sheriff, if needed. (All app	pointments must be approved by the Sheriff.)
I fully understand what I have read:	
Applicant Printed Name	Applicant Signature / Date
Witness Printed Name	Witness Signature / Date

Use of Credit Information for Employment Purposes

The U.S. Fair Credit Reporting Act (FCRA) of 1996 (15 U.S. Code 1681, Section 604(b) requires that you be notified separately of your rights before any prospective employer may use credit data as part of an employment decision.

You are hereby notified that your prospective employer intends to use credit data as **part** of its decision-making process for the position for which you have applied. You will be required to furnish your credit report with credit score to your prospective employer. You can go to www.creditkarma.com or www.annualcreditreport.com to get your credit report.

Before you submit your credit information to your prospective employer, you need to verify the information on the report is accurate. Once submitted by you, the report will be considered accurate and complete.

CERTIFICATION: I certify that Houston County Emergency Services has my consent to vi my credit report and score for the limited purpose of my pre-employment background investigation.	
Applicant Printed Name	Applicant Signature / Date
Witness Printed Name	Witness Signature / Date

Personal History Questionnaire

Communication Deputy position?
Do you fluently speak or write any foreign languages? YESNO
Do you possess any profession licenses such as pilot, etc.? YESNO If YES, please list:
Communication Deputy Employment History
List previous Communication Deputy employment starting with the most recent first:
Name/Address of Agency
Dates of Employment Reason for leaving
Name and telephone number of immediate supervisor
Job Title:Brief Description of Job Duties:
May we contact this agency? YESNO
Name/Address of Agency
Dates of Employment Reason for leaving
Name and telephone number of immediate supervisor Job Title:
Brief Description of Job Duties:

May we contact this agency? YESNO
Name/Address of Agency
Dates of Employment Reason for leaving
Name and telephone number of immediate supervisor Job Title:
Brief Description of Job Duties:
May we contact this agency? YESNO
Complete this section only if you are currently or have been a Communication Deputy.
Are you currently a certified Communication Deputy?
If "YES", State of Certification:Certification #: Certification date:Name of Training Center:
How many years of law enforcement experience do you have?
Have you ever been the subject of an internal investigation? YES NO If "YES", attach an explanation to this application giving full details.
Have you ever resigned in lieu of termination? YESNO If "YES", attach an explanation to this application giving full details.
NON-LAW ENFORCEMENT EMPLOYMENT HISTORY List all previous employment for the past ten (10) years, beginning with the most recent first.
Name/Address of Employer:
Dates of Employment Reason for leaving

Name and telephone number of immediate supervisor
Job Title:
Brief Description of Job Duties:
May we contact this employer? YESNO
N. /A.1.1 CF 1
Name/Address of Employer:
Dates of Employment Dessen for leaving
Dates of Employment Reason for leaving
Name and telephone number of immediate supervisor
Job Title:
Brief Description of Job Duties:
May we contact this employer? YES NO
Name/Address of Employer:
Dates of Employment Reason for leaving
Name and telephone number of immediate supervisor
Job Title:Brief Description of Job Duties:
Bitel Description of 300 Buttes.
May we contact this employer? YES NO
Name/Address of Employer:
Dates of Employment Reason for leaving

Name and telephone number of immediate supervisor Job Title:
Brief Description of Job Duties:
May we contact this employer? YESNO
Name/Address of Employer:
Dates of Employment Reason for leaving
Name and telephone number of immediate supervisor
Brief Description of Job Duties:
May we contact this employer? YESNO
Name/Address of Employer:
Dates of Employment Reason for leaving
Name and telephone number of immediate supervisor
Job Title:
May we contact this employer? YESNO

Criminal Record History

Please check appropriate responses.

<u>Yes</u>	<u>No</u>	
		Have you ever been arrested, charged, or convicted of any offense?
		_ Have you ever been arrested, charged, or convicted of a firearms or explosive
		charge?
		_ Are there currently any charges pending against you for any criminal offense?
		_ Have you ever been arrested, charged, or convicted of any offenses related to
		alcohol or drugs?
		Have you ever been given a traffic citation? (list all citations below)
		Have you ever been arrested, charged, or convicted of a domestic violence offense?
		Are you currently or have you ever been under investigation?
		ow any questions that you have answered yes to above:
Date of	of Offe	ense /Law Enforcement Authority/Court

Driving Record

Can you operate a motor vehicle? YES NO
Do you possess a valid Georgia Driver's License? YESNO If yes, give license number, and expiration date:
Have you ever possessed a drivers' license from any other State? YES NO If yes, give State and License number:
Has your license ever been suspended or revoked? YESNO If yes, for what reason? If yes, was it restored?
Have you ever been refused a license by any State? YESNO
Give details of any motor vehicle accidents you have been involved in:

Personal References

Personal references (other than family members). Please provide at least three references, with
three methods of contact:
Name:
Address:
Talanhona
Telephone:
Email Address:
Name:
Address:
Telephone:
Email Address:
Name:
Address:
Telephone:
Email Address:
Nama
Name:
Address:
Telephone:
Email Address:
Name:
Address:
Telephone:
Email Address:
Nama
Name:Address:
Audicos.
Telephone:
Email Address:

Professional References

Professional references. Please provide at least three references, with three methods of contact:
Name:
Address:
Telephone:
Telephone:
Email Address:
Name:
Address:
Telephone:
Email Address:
Name:
Address:
Telephone:
Email Address:
Name:
Address:
Telephone:
Email Address:
Name:
Address:
Telephone:
Email Address:
Name:
Address:
Address.
Telephone:
Email Address:

BACKGROUND INFORMATION

(Marital and Family Information)

NO
_ Age:
A aa.
_ Age:
Age:
_ Age:

List every child born to you: Child's Name, Date of Birth, and Address where child resi	des:		
Are you related to any Houston County employee? YES _		NO	
If yes, please name the employee:			
What Department do they work in?			
Do you know any employees of the Sheriff's Office? YES			-
If yes, please give their names:			
OTHER INFORMAT	ΓΙΟΝ		
This position may require you to:			
Wear a uniform. Do you agree?		NO	
Work rotating shift. Do you agree?		NO	
Work overtime. Do you agree?		NO	
Work nights. Do you agree?	YES _	NO	-
Work weekends. Do you agree?	YES _	NO	-
Work holidays. Do you agree?	YES _	NO	-
Have you ever had experience working shift work?	YES_	NO	=
If so, where and when:			
If you have ever been fingerprinted by a police agency other	er than t	for an arrest, giv	ve details
below. Your answer will be checked with the FBI and other			Cactains
Agency / Date / Purpose	n ugene		
9\\ . =L 20.5			

Do you drink alcoholic beverages?				
If yes, when was the last time?				
Have you ever used marijuana?		NO		
If yes, when was the last time?				
Have you ever used any other illegal dr	ugs, opiates, p	ills, etc.? YES _	NO	
What were the circumstances:				
Do you now or have you ever associate	d with anyone	that uses drugs	or engages in crimina	al
activity?				
YES NO				
If yes, explain:				
н уса, схрини.				
Have you ever been fired or permitted t	to resign emplo	oyment for brea	ch of trust, embezzler	ment,
theft, or other crime? YESNO _	 			
If yes, what were the circumstances?				
		1	6 .1 6	
Have you ever been fired or permitted t		oyment for abus	e of authority or for a	any
disciplinary reasons? YES NO _				
If yes, what were the circumstances?				

Internet Check Release

It is essential for every applicant to recognize that the proper functioning of any 9-1-1 Center relies upon the public's confidence and trust in its agency. Therefore, any matter which brings or could potentially bring individual employees or the agency into disrepute has the corresponding effect of reducing public confidence and trust in our agency. As such, the policy of this division is to perform an internet check on all applicants. All candidates seeking employment with this agency shall be required to complete an affidavit indicating their participation in any social networking sites. This affidavit shall include the name of the sites. The candidate shall provide the agency with access to their site as part of any background examination. Failure to disclose any social media account can result in disqualification.

Please check below if you have an active account with any of the listed sites.

☐ Facebook Name:	
Reddit:	
☐ Other Social Network:	
List any other sites in which you particip comments/opinions for public access or	pate in any online blogging, journaling, or posting of viewing:
Applicant Printed Name	Applicant Signature / Date
Witness Printed Name	Witness Signature / Date

Personal Essay

In the space provided below (and in your own handwriting), give a brief biography or history of yourself. Begin with your past, bring yourself into the present, and project yourself into the future. Tell where you were born, where you grew up, significant experiences and accomplishments in your life. Tell something about your hobbies, special interests, and any othe subject which "zeros in" on your individuality. Also describe your reasons for applying for a position with the Houston County Sheriff's Office. If you need additional space, attach a separar sheet to this application.	er
	_
	_
	_
	_
	_
	_

ATTESTATION

Questionnaire is true and correct to the best	e information supplied by me in this Personal History st of my knowledge. I understand that any material any information will automatically disqualify me for with the Houston County Sheriff's Office.
Applicant Printed Name	Applicant Signature / Date
Witness Printed Name	Witness Signature / Date

THIS APPLICATION WILL BE ACTIVE UNTIL THE CANDIDATE IS DECLARED INELIGIBLE OR FOR 6 MONTHS WHICHEVER COMES FIRST.

REFERENCE RELEASE STATEMENT / FORM

(To be mailed to the reference or completed by phone interview)

I authorize the addressed individual, company, or institution to furnish the Houston County Sheriff's Office with any information that they may have concerning me which they have on record or otherwise; and I release such individual, company, or institution and the Houston County Sheriff's Office from any and all liability for any damage whatsoever incurred in furnishing such information. A photocopy of my signature on this page will suffice as an original.

Applicant Printed Name	Applicant Signature / Date
Witness Printed Name	Witness Signature / Date

WILLINGNESS CHECKLIST

In the past, many people have taken the job of Communication Deputy without carefully considering the requirements of the work. It is in your best interest to answer each question honestly. For each job requirement on the list below, circle "YES" if you are willing to do it. "NO" if you are not willing.

Do you believe that you can set aside any personal prejudices and be fair in dealing with callers? **Yes No**

Are you willing to work a twelve (12) hour shift? **Yes No**

Are you willing to work alternating weekends? Yes No

Are you willing to work all holidays which are not on your regular days off? **Yes No**In the event of an emergency, such as a shift vacancy, are you willing to work on your day(s) off? **Yes No**

Are you willing to wear a uniform to work every day? Yes No

Are you willing to work in a tobacco free environment? Yes No

Are you willing to participate in training to learn and develop techniques and skills required of a Communication Deputy? **Yes No**

Are you willing to instruct first aid, including CPR, to callers who are ill or injured? Yes No

Are you willing to work in an environment which can be noisy? Yes No

Are you willing to work on a computer for long periods of time? Yes No

Are you willing to work in a situation where you may be cursed at and/or verbally threatened? **Yes No**

If you circled no to any of these questions, you are probably not suited for this type of work and should not continue to pursue a position as a Communications Deputy.

I have read the above and wish to cont	inue with the application process.
Anglicant Drinted Name	Applicant Signature / Data
Applicant Printed Name	Applicant Signature / Date

CANDIDATE DATA SHEET

This Information is required by P.O.S.T. To be used to create Data Gateway account and complete Communication Deputy school application.

First name:	 		
Middle name:			
Last name:			
Maiden name:			
Suffix (Sr. Jr)			
Address:			
Street	ity	State	
Social Security Number:	 		
Date of Birth:	 		
City & State of Birth:			
Race:			
Eye color:			
Email address:	 		
Home Phone #:			
Name of High School:	 		
High School City & State:	 		
Year Graduated:			

Name-Based Criminal History Record Information Consent / Inquiry Form

Thereby give consen	t for the	Criminal Justice Agency	to receive any Georgia			
or III Criminal Histo	ory Record inform		ne, as authorized under state and			
	•	nployment with a crin				
Full Name (Print)						
Address:						
Sex	Race	Date of Birth	Social Security Number			
□ I,		give consent to	ne) days from date of signature. o the above named to perform periodic employment with this agency.			
Signature			Date			
Date of inquiry: Purpose Code used: (c		ime of inquiry:	Operators Initials:			
rurpose code used. (e	neek one)					
		Criminal Justice Agency (nation except juvenile or re	(J) – Provides complete Georgia and III estricted records and			
Criminal Hi			e Agency (Z) – Provides Georgia and III records that contain completed first offender			
In inquiry resulted	in the following:	(Check all that apply))			
No Georgia	No Georgia or III CHRI results available.					
Georgia / III CHRI attached / released.						
	GCIC Warrant resul					
Wanting Agency Name		Contact Agency Listed B	delow.			
Agency Telephone:						
rigoney rerepreses						
Agency Designee Si	gnature and Title	;	Date			

To: Sheriff Matthew L. Moulton 202 Carl Vinson Pkwy Warner Robins, GA 31088

PRINTED NAME PHYSICAL ADDRESS (No P.O. Boxes)			SSN DRIVERS LICENSE STATE AND NUMBER				
			CITY	STATE	ZIP	SEX	RACE

Accept this instrument as my personal request and authorization to conduct a comprehensive personal background investigation, including pending charges of any description, a complete traffic history, criminal history (including first offender status, if applicable). Credit history report, medical records, full and complete disclosure of educational institutions, financial statements and records, wherever filed; Veterans administration; employment and pre-employment records, including background reports, polygraph examinations or reports, efficiency rating, complaints or grievance by or against me. Furthermore, I voluntarily, FULLY CONSENT TO UNDERGO PHYSICAL EXAMINATION AND URINALYSIS DRUG SCREEN TESTING. I am fully aware, and consent that the information gathered in this screening process, be known to the officers and employees of the Houston County Sheriff's Office, as well as the officers and employees of the Houston County Personnel Department and the Georgia Peace Officers Standards and Training Council. I am aware that such information is required for application for P.O.S.T. certification, and employment with the Houston County Sheriff's Office. I certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information. Therefore, I AGREE THAT THE INFORMATION ACOUIRED IN THIS INVESTIGATION BE USED FOR EMPLOYMENT, TERMINATION, OR DISCIPLINARY DETERMINATIONS, and that such information becomes a matter of public information and is accessible to the public under existing laws.

In consideration of making application for employment, and in complete understanding of the foregoing facts and possible results, I agree to hold to all elements of this release waiver, and further agree TO HOLD HARMLESS, SHERIFF MATTHEW L. MOULTON, AND ALL OTHER EMPLOYEES OF THE HOUSTON COUNTY SHERIFF'S OFFICE, AND HOUSTON COUNTY, FROM ANY CIVIL LIABILITY OF ANY KIND OR DESCRIPTION, INCLUDING ACT OF OMISSION OR COMMISSION.

This declaration is made freely and voluntarily without fear of punishment or promise of reward, and with full and complete understanding of the terms and consequences of my action.

A photocopy of this release form will be valid as an ori	ginal thereof, even though the said photocopy does
not contain original writing of my signature.	

Applicant Printed Name

Applicant Signature / Date

HOUSTON COUNTY APPLICATION FOR EMPLOYMENT

It is the policy of Houston County to select new employees and to promote current employees without regard to race, sex, religion, national origin, marital status or disability.

INSTRUCTIONS: You must answer all items on this application fully and accurately. The information that you give will be used in determining your qualifications and rating for employment. If an item does not apply to you, or if there is no information to be given, write the letters "N/A" for Not Applicable. PRINT IN INK OR TYPE. A resume may be attached BUT WILL NOT be accepted in lieu of this application. In order to be assured consideration for employment, your application must be received no later than the closing date of the vacancy announcement.

Position(s) Desire	ed:	· ·						Date:		
(1)	(2	2)			(3)					
Full Tim	e	Part	Time	<u>.</u>	Ter	nporary	Salary I	esired:		
PERSONAL D	ATA									
Name:	Last	First		Mido	dle		Social S	ecurity N	umber	
Address:	No. &	Street		Apt. N			1.4	ity, State,	Zip	
Telephone Numb	ers:				Are you	between the a	ges of 17	and 70?		
Home:		Business:				☐ Yes	□ No			
U. S. Citizen or P	ermanent VI	SA								
☐ Yes ☐ No	If no, giv	e work perm	it nun	nber:						
traffic violation? you from employ If yes, explain on	Have you ever been convicted of a crime other than a minor traffic violation? (A conviction does not automatically exclude you from employment consideration \square Yes \square No If yes, give name(s) and relationship. If yes, explain on a separate sheet.									
Have you ever be classification:						No If yes, ξ		location a	ınd job	
Do you possess a	valid motor	vehicle Driv	er's Li	cense?] Yes	☐ No Clas	s	Lic 1	lo	
EDUCATION						Highest Grade	DAV	ı Type		Date Degree Obtained
	Name ar	ad Location	Fr	om Mo/Yr	To Mo/Yr	Completed		e Degree	Major	or To Be Obtained
High School										
College(s)										
(Other if Applicable)										
Graduate School										
MILITARY										
Branch of U.S. Ser	vice		_ Fro	om Mo/Yı	r	To	Mo/Yr		_Rank	
Major Duties: (Ex Honorable Discha	arge:		Ye	s		No	(If no, e	xplain on	separat	e sheet)
Service Schools of Do you have a Re						o (If yes, p	lease desc	ribe)		

part-time, summer, and volument detailed description of du	Please provide a complete employnteer. It is most important that you aties. If you held more than one potermine eligibility. If submitting a	provide exact dates of exition with an employer,	mployment, please treat	exact title or position, each position separately.		
Were you ever discharged or	asked to resign from any position?	☐ Yes ☐ No M		t your present employer Yes No		
(Begin with your present	or most recent employer)					
Name of Employer		Address		•		
Employment Dates (mo/yr) from / to /	Salary hrs/wk Starting: \$ per Present: \$ per	Name and Title of Sup Job Duties	pervisor	Telephone Number		
Position Title						
Reason for Leaving						
Name of Employer		Address				
Employment Dates (mo/yr) from / to /	Salary hrs/wk Starting: \$ per Present: \$ per	Name and Title of Sup Job Duties	pervisor	Telephone Number		
Position Title						
Reason for Leaving						
Name of Employer		Address				
Employment Dates (mo/yr) from / to /	Salary hrs/wk Starting: \$ per Present: \$ per	Name and Title of Sup Job Duties	pervisor	Telephone Number		
Position Title	-					
Reason for Leaving		-				
REFERENCES List three references (NOT n	ninors, relatives or former employe ADDRESS	rs) who have known you OCCUPATION	well during	the past few years. NO. YEARS O. KNOWN		
CERTIF	 TICATION AND AUTHORIZATION FO	OR RELEASE OF INFORM	(ATION			
I CERTIFY that the information given by me in this application is true and complete to the best of my knowledge knowing that any false information, misrepresentation, or concealment of fact is sufficient grounds for my application to be rejected or, if employed, my employment terminated. I UNDERSTAND AND AGREE that all information furnished in this application may be verified by the County. I further understand that any offer of employment may be revoked in the event a drug test, given by the County discloses information on me which is considered disqualifying. I hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give the Houston County Government all information relative to my employment, education and character, and hereby release such individuals, organizations, and Houston County from any liability for any claim or damage which may result.						

Signature

Date

Dear Applicant:

Houston County Board of Commissioners is an Equal Opportunity/Affirmative Action employer and subject to certain reporting and affirmative action requirements. The information required on this insert is requested only so that we may meet our Equal Opportunity/Affirmative Action obligations. Your completion of this form is purely voluntary and will not, in any way, affect your consideration for employment. This insert will be separated from your application and will be separately maintained.

Tha	nk you for your assistance		
Posi	tion:		
1 031		(Job Title)	
How			
Plea	se select the appropriate in	nformation for each cate	gory:
1.		Male Female	
2.		American Indian or Asian Black or African An Hispanic Native Hawaiian or White	nerican
App	licant's Last Name (please pri	int) First	Middle
No.	& Street	City,	State, Zip
 App	licant's Signature		Date