

NEWTON COUNTY CENTRAL DISPATCH CENTER
APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, martial or veteran status, sexual orientation, or any other legally protected status.

EEO: Newton County is an equal employment opportunity employer. Newton County does not discriminate against qualified handicapped persons in all employment actions, decisions, policies and practices.

PLEASE PRINT

POSITION APPLIED FOR: _____ DATE: _____

HOW DID YOU LEARN ABOUT US? Relative Walk-In Advertisement
 Employment Agency Friend
 Other _____

LAST NAME FIRST NAME MIDDLE NAME

ADDRESS CITY STATE ZIP

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

If you are under 18 years of age can you provide required proof of your eligibility to work? YES
 NO

Social Security Number _____
Have you ever filed an application with us before? YES NO If YES, when? _____

Have you ever been employed with us before? YES NO
If YES, when? _____ Reason for leaving? _____

Will you work overtime, if required? YES NO
If NO, explain. _____

Are you currently employed? YES NO

May we contact your present employer in regard to your character, work record, qualifications, or abilities?
 YES NO
If NO, explain: _____

Are you prevented from lawfully becoming employed in the country due to immigration status?
 YES NO (proof of citizenship or immigration status will be required upon employment.)

On what date would you be available to begin work? _____

Are you available to work? FULL TIME PART TIME SHIFT WORK

Are you currently on "lay-off" status and subject to recall? YES NO

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Can you travel if job requires it? YES NO

Have you been arrested, convicted, pled guilty, or no contest to a crime? YES NO

Conviction will not necessarily disqualify an applicant from employment.

If YES, explain: _____

Have you been discharged or asked to resign from employment? YES NO

If YES, explain: _____

Are you a United States Armed Forces Veteran? YES NO

Are you a member of the Reserves or National Guard? YES NO

Would you be willing to take a truth verification test over statements made in the application? YES NO

EDUCATION

	Name and Address Of School	Course of Study	Years Completed	Diploma or Degree
Elementary				
High School				
College				
College				
Trade or Tech School				
Other				

Indicate any foreign languages you can speak, read and/or write:

Speak _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Speak _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Speak _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Read _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Read _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Read _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Write _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Write _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair
Write _____	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair

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Describe any specialized training, apprenticeship, skills, certifications, and/or extra-curricular activities which relate to this position:

Describe any job-related training received in the United States Military:

Describe or explain why you would like to be a member of the Newton County Central Dispatch Center team. Include any additional information which you feel may be helpful to us in considering your application:

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EMPLOYMENT EXPERIENCE

Begin with your present, or most recent job. List all jobs, paid or volunteer, civilian or military, over the past ten (10) years. A resume may be attached to provide additional, or more detailed, information but will not be accepted in lieu of completing this section. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protested status.

**DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.
IF ADDITIONAL SPACE IS NEEDED PLEASE CONTINUE ON A SEPARATE PAGE**

Employer & Address	Dates Employed	Work Performed
	From:	
	To:	
Job Title:	Rate of Pay:	
Supervisor:		
Reason for Leaving:		
Employer & Address	Dates Employed	Work Performed
	From:	
	To:	
Job Title:	Rate of Pay:	
Supervisor:		
Reason for Leaving:		
Employer & Address	Dates Employed	Work Performed
	From:	
	To:	
Job Title:	Rate of Pay:	
Supervisor:		
Reason for Leaving:		
Employer & Address	Dates Employed	Work Performed
	From:	
	To:	
Job Title:	Rate of Pay:	
Supervisor:		
Reason for Leaving:		

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LIST PROFESSIONAL, TRADE, BUSINESS, OR CIVIC ACTIVITIES AND OFFICES HELD

SPECIALIZED SKILLS

- CRT PC MAC FAX CALCULATOR
 TYPEWRITER WORD EXCEL LOTUS 1-2-3 PBX SYSTEM
 MULTI-SCREEN CONSOLE MULTI-LINE PHONE

OTHER MACHINERY OR EQUIPMENT _____

NOTE TO APPLICANTS: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of activities involved in such a job or occupation is available

- YES NO

REFERENCES [NON-RELATED AND KNOWN FOR AT LEAST ONE (1) YEAR]

NAME: _____ PHONE: _____

ADDRESS: _____

BUSINESS: _____ YEARS ACQUAINTED: _____

NAME: _____ PHONE: _____

ADDRESS: _____

BUSINESS: _____ YEARS ACQUAINTED: _____

NAME: _____ PHONE: _____

ADDRESS: _____

BUSINESS: _____ YEARS ACQUAINTED: _____

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APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. They are made voluntarily upon application for employment, and as inducement therefor.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of a "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by a authorized executive of this organization.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I do hereby release all parties and individuals connected therewith from all liabilities for any damage whatsoever incurred in furnishing such information.

Signature of Applicant

Date

NEWTON COUNTY POLICY:

A physical examination, including drug testing, shall be required of all applicants prior to employment.

NEWTON COUNTY PARTICIPATES IN E-VERIFY TO CONFIRM THE LEGAL WORKING STATUS OF NEW HIRES.

E-Verify reduces unauthorized employment, minimizes verification-related discrimination, and protects civil liberties and employees privacy.

Signature of Applicant

Date

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NEWTON COUNTY CENTRAL DISPATCH CENTER
Background Check Authorization Form
Consent for Criminal Background History Check
Authorization/Waiver/Indemnity

I hereby give my permission to Newton County Central Dispatch Center to obtain information relating to my criminal history record. The criminal history record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for employment with this organization. I also understand that as long as I remain an employee here, the criminal history records check may be repeated at any time.

I hereby affirm that all information provided on the attached application is true and correct and that I have not knowingly withheld any fact or circumstances that would, if disclosed, affect my application unfavorably.

I understand that any false information submitted in this application may result in my discharge.

I, the undersigned, do hereby remise, release and forever discharge and agree to indemnify the Newton County Central Dispatch Center and each of their officers, directors, employees and agents and hold them harmless from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever and any and all related attorneys' fees, court costs and other expenses resulting from the investigation of my background in connection with my application for employment.

A photocopy or facsimile of this authorization may be deemed to be equivalent of the original and may be used as a duplicate of the original.

APPLICANT SIGNATURE

DATE

PRINTED NAME OF APPLICANT

SOCIAL SECURITY NUMBER

PRINT ANY NAMES PREVIOUSLY USED:

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FOR PERSONNEL DEPARTMENT USE ONLY

ARRANGE INTERVIEW YES NO

REMARKS: _____

INTERVIEWER _____ DATE _____

EMPLOYED YES NO

DATE OF EMPLOYMENT: _____ JOB TITLE: _____

HOURLY RATE: _____ DEPARTMENT: _____

BY _____

NOTES _____

