



Employment Application Form

East Alabama Regional Planning and Development Commission

(Attach Additional Sheets, If Necessary, To Provide Complete Information)

Position (Job) you desire

Name (last, first, middle)	Home Telephone Area Code	When will you be available
Number and Street, R.D. Or Post Office Box Number	Business Telephone Area Code	Will you accept Temporary work <input type="checkbox"/> Yes <input type="checkbox"/> No Part-time work <input type="checkbox"/> Yes <input type="checkbox"/> No
City, State, and Zip Code		

Are you a High School Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Schools attended other than High School	Location (state)	Courses or Major	Credits Completed		Degree or Certificate		
				Sem. Hrs.	Qtr. Hrs.	None	Type	Year

Other training you received (for, example, special courses, work training programs, armed forces training). Please estimate the number of hours of training you received.

Special qualifications and skills (licenses; certifications; publications--do not submit copies unless requested; public speaking; membership in professional or scientific societies; knowledge of computer software programs and applications; typing and shorthand speed; graphic, cartographic, and GIS skills and training; etc.)

Experience - start with present or last job and work back. Include paid or unpaid, full or part, military, summer jobs, etc. time

Do we have your consent to contact your present supervisor? Yes No Initial Here

Do we have your consent to contact previous supervisors? Yes No Initial Here

Job Title

Starting Date	Ending Date	Name and address of present employer:	
Starting Salary	Ending salary	Hours per week	Name, title and phone number of your immediate supervisor

Description of duties and responsibilities

Reason for leaving

Job Title

Starting Date	Ending Date	Name and address of employer:	
Starting Salary	Ending salary	Hours per week	Name, title and phone number (if known) of your immediate supervisor

Description of duties and responsibilities

Reason for leaving

Job Title _____			
Starting Date	Ending Date	Name and address of employer:	
Starting Salary	Ending salary	Hours per week	Name, title and phone number (if known) of your immediate supervisor
Description of duties and responsibilities _____			
Reason for leaving _____			

(Attach Additional Sheets, If Necessary, To Provide Full Employment History)

References: List three persons who are not related to you and would have knowledge of your Qualifications for the position(s) for which you are applying, such as former co-workers teachers, etc. Do not list names of supervisors listed under experience.

Do we have your consent to contact these references? Yes No Initial Here _____

Name	Business or home address/Telephone #	Business or occupation

Military Status

Draft Certificate (If applicable) _____

Active military service record: _____

Branch: _____

From _____ To _____

Rank or grade at discharge _____

Type of Discharge _____

Reserve Status _____

Have you ever been convicted of a felony? (You may omit: (1) traffic violations, and (2) any offence committed before your 20th birthday which was finally adjudicated in a juvenile court or under Youth Offender Law)..... YES NO

While in the Military service, were you ever convicted by a general court-marshal?.....YES NO

If your answer is yes, give details below. Show for each offence: (1) date, (2) charge, (3) place, (4) court, and (5) action taken.

NOTE: A conviction does not automatically mean you cannot be appointed ,what you were convicted of, and how long ago, are important. Give all of the facts so a decision can be made.

Certification: I certify that all of the statements made in this statement are true, complete, and correct to the best of my knowledge and belief and made in good faith.

Signature of applicant _____ Date _____