

**APPLICATION FOR EMPLOYMENT
CAMDEN COUNTY SHERIFF'S OFFICE
P.O. BOX 699
WOODBINE, GA 31569**

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

(Please Print)

Position Applied For:	Date of Application:
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How Did You Learn About Us?		
Advertisement ____	Friend ____	Walk-In ____
Employment Agency ____	Relative ____	Other ____

Last Name	First Name	Middle Name
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Address	City	State	Zip Code
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Telephone Number(s)	Social Security Number
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If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes No

Have you ever filed an application with us before?

Yes No

If yes, give date _____

Have you ever been employed with us before?

Yes No

If yes, give date _____

Are You currently employed?

Yes No

May we contact your present employer?

Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes No

On what date Would you be available for work? _____

Are You available to work- Full Time Part Time Shift Work Temporary

Are You currently on "lay-off status and subject to recall?

Yes No

Can you travel if a job requires it?

Yes No

Have you been convicted of a felony within the last 7 years?

Yes No

If yes, please explain. _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer Name: _____ Phone No.: (____) _____
Street Address: _____ City: _____ State: _____ Zip: _____
From: _____ To: _____ Position Held: _____ Salary: _____
Supervisor's Name: _____ Title: _____
Your Duties: _____ Reason for Leaving? _____

Employer Name: _____ Phone No.: (____) _____
Street Address: _____ City: _____ State: _____ Zip: _____
From: _____ To: _____ Position Held: _____ Salary: _____
Supervisor's Name: _____ Title: _____
Your Duties: _____ Reason for Leaving? _____

Employer Name: _____ Phone No.: (____) _____
Street Address: _____ City: _____ State: _____ Zip: _____
From: _____ To: _____ Position Held: _____ Salary: _____
Supervisor's Name: _____ Title: _____
Your Duties: _____ Reason for Leaving? _____

Employer Name: _____ Phone No.: (____) _____
Street Address: _____ City: _____ State: _____ Zip: _____
From: _____ To: _____ Position Held: _____ Salary: _____
Supervisor's Name: _____ Title: _____
Your Duties: _____ Reason for Leaving? _____

If you need additional space, please continue on a separate sheet of paper

List professional, trade, business, or civic activities and offices held.
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You may exclude membership which would reveal gender, race, religion, national origin, age ancestry, disability, or other protected status:

EDUCATION

Elementary School

Name and Address of School: _____

Course of Study: _____

Years Completed: _____

Diploma/Degree: _____

High School

Name and Address of School: _____

Course of Study: _____

Years Completed: _____

Diploma/Degree: _____

Undergraduate College

Name and Address of School: _____

Course Of Study: _____

Years Completed: _____

Diploma/Degree: _____

Graduate Professional

Name and Address of School: _____

Course of Study: _____

Years Completed: _____

Diploma / Degree: _____

Other (Please Specify)

Name and Address of School: _____

Course of Study: _____

Years Completed:

Diploma/Degree:

SPECIAL SKILLS/TRAINING

Indicate any foreign languages you can speak, read, and/or write.			
	Fluent	Good	Fair
Speak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Read	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Write	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

Describe any job-related training received in the United States military.

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

Summarize special job-related skills and qualifications acquired from employment or other experience.

Tommy Gregory, Sheriff
Camden County
P.O. Box 699
209 4th Street
Woodbine, Georgia 31569-0699

Background Request Consent Form

Criminal History

Yes ___ No ___

Checked by _____

Date _____

I hereby authorize, _____
To receive any criminal history record information pertaining to me which may be in the filed of
the Georgia Crime Information Center or local criminal justice agency in the State of Georgia.

Full Name

Street Address

City/Street/Zip

Social Security Number

Sex Race Date of Birth

Signature

Notary

Date

Printout of findings attached and if an adverse employment or housing decision is made
compliance with the disclosure provisions of OCGA 35-3-34 / 35-3-35 is required. Unauthorized
dissemination of this record or information herein violates Georgia Law.