# PLEASE NOTE

THE BRUNSWICK-GLYNN COUNTY JOINT WATER & SEWER COMMISSION REQUIRES THAT ITS EMPLOYEES OBTAIN A PASS TO WORK ON THE FEDERAL LAW ENFORCEMENT TRAINING CENTER (FLETC) CAMPUS. THIS WILL REQUIRE A CRIMINAL BACKGROUND CHECK. YOUR JOB DEPENDS ON YOU PASSING THIS BACKGROUND. IF YOU ARE HIRED AND CANNOT BE APPROVED FOR A FLETC PASS THEN, YOU WILL BE TERMINATED.



## Brunswick-Glynn County Joint Water & Sewer Commission APPLICATION FOR EMPLOYMENT

700 Gloucester Street, Suite 302 | Brunswick, GA 31520 Telephone: (912) 265-8500 | Fax: (912) 265-8501

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, marital or veteran status, disability, or any other legally protected status. We will give this application every consideration. However, in accepting it, the JWSC makes no commitment of employment to the applicant. This application applies only to the position(s) for which you apply. You may apply for multiple positions using the same application; however, you MUST specifically state the position(s) for which you are applying, and the position(s) must be posted as vacant at the time of application in order to be considered. Incomplete applications will not be considered. This application will remain active for 90 days.

## PERSONAL INFORMATION Date of Application: Position(s) Applied For: Are you 18 or older? Last Name First Middle Yes \( \Bar{\cup} \) No \( \Bar{\cup} \) How long at this address? **Home Address** City State Zip Day Time Phone Number Alternate Phone Number **Email Address** Salary/Wage Expected: \$ Date Available: Type of Employment: Full-time □ Part-time □ Temporary Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes 🗆 No 🗆 (Proof of citizenship or immigration status will be required upon employment.) Are you currently under a non-compete agreement with another organization/company? Yes \( \Bar{\cup} \) No \( \Bar{\cup} \) Have you ever filed an application with JWSC before? Yes ☐ No ☐ Have you ever been employed with JWSC before? Yes □ No □ If yes, give date(s) and position(s): Do you have any friends or relatives employed with JWSC? Yes ☐ No ☐ If yes, give name(s) and relationship(s): How did you find out about this position? JWSC Website □ Local Newspaper Ad □ Social Media □ Word of Mouth □ Other (please be specific): May we contact you current employer? Yes $\square$ No $\square$ If no, please explain: Have you ever plead "no contest", nolo, or guilty to a crime, or been convicted of a crime? (Omit non-moving traffic violations and any offense that was finally adjudicated in a Juvenile Court or under a Youth Offender Law.) Yes $\Box$ No $\Box$ Are any charges currently pending against you? Yes □ No □ Has any adjudication ever been withheld? (A withhold of adjudication is not a conviction. A withhold is a term used in sentencing in which the judge orders some sanctions, but does not formally convict the defendant of a criminal offense. Therefore, the defendant does not receive the consequences from a conviction in a criminal case.) Yes $\square$ No $\square$ If you answered yes to any of the proceeding questions, please give details: (NOTE: Answering "yes" to these questions does not constitute an automatic bar to employment).

#### Do you have a current valid driver's license? Yes □ No □ State Issued: \_\_\_\_\_\_ \_\_\_\_\_ Class Type: \_\_\_ If yes, License Number: \_\_\_ Expiration Date: \_\_\_\_\_ Has your license ever been suspended or revoked? Yes □ No □ If yes, explain: \_\_\_ Have you ever been convicted, plead guilty, or plead *nolo* to a charge of DWI or DUI? Yes $\Box$ No $\Box$ Are any such charges currently pending against you? Yes $\square$ No $\square$ If yes to either question, please explain: **EDUCATION** # OF DID YOU **SCHOOL** NAME AND LOCATION YEARS **GRADUATE?** FIELD OF STUDY **HIGH SCHOOL** COLLEGE/UNIVERSITY OTHER (SPECIFY) **RELEVANT TRAINING** List any specialized training, qualifications, apprenticeships and activities that relate to the job for which you are applying. List any professional designations, certifications, licenses, or courses that may be applicable to the position for which you are applying. **EMPLOYMENT HISTORY** List each job held starting with you most recent employer, including military service assignments and periods of unemployment. If self-employed, give company name and supply business references. DO NOT ANSWER "SEE RESUME". Fill out this form completely. Company Address Telephone Dates From (mo/yr) To (mo/yr) Starting Salary Final Salary Supervisor's Name and Title **Employed** Last Job Title and Duties Reason for Leaving Company **Address** Telephone From (mo/yr) To (mo/yr) Dates **Starting Salary Final Salary** Supervisor's Name and Title **Employed** Last Job Title and Duties Reason for Leaving Address Telephone Company From (mo/yr) To (mo/yr) Starting Salary Final Salary Supervisor's Name and Title Employed Last Job Title and Duties Reason for Leaving Address Telephone Company Dates From (mo/yr) To (mo/yr) **Starting Salary Final Salary** Supervisor's Name and Title Employed Last Job Title and Duties Reason for Leaving

**DRIVING INFORMATION** 

Please fully explain any gaps in your employment history:					
Do you have any commitments, including but not limited to, a non-compete or non-solicitation or current or former employer that may affect or restrict your employment or ability to perform the company of the company					
Yes  No If yes, explain:					
PERSONAL REFERENCES  Do not list relatives or former supervisors					
Do not list relatives or former supervisors.  NAME & RELATIONSHIP and/or OCCUPATION	TELEPHONE NUMBER				
AGREEMENT AND CERTIFICATION  I certify that the information given by me in this application is true in all respects, and I agree that if the					
misleading, incomplete, or unsatisfactory in any respect (as determined by Joint Water and Sewer Commission in its sole judgment) it shall be considered sufficient cause for denial of employment or discharge.					
I authorize former and present employers, work and personal references listed in the application, and any other individuals I may name, to give the Joint Water and Sewer Commission or its agent any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release such parties from all liability for any damages that may result from furnishing same to the JWSC. I also authorize the JWSC or its agent to provide truthful information concerning my employment with it to future employers and I agree to hold it harmless for providing such information.					
I understand that nothing contained in this employment application, or in the granting of an interview contract between the JWSC and myself for either employment or for the providing of any benefit. No made to me. If an employment relationship is established, I understand that my employment is termin probationary regular employee; that my employment is not for a definite period; and that any comper stated amount.	promises regarding employment have been nable at will until I become a non-				
I understand that prior to being offered employment with the JWSC, I may be requested to take an exact that will affect my ability to take the test, I will so inform the JWSC or its agent prior to the administrat accommodation can be made. Requested accommodations may include accessible testing sites, modified testing formats. The JWSC reserves the right to require medical documentation concerning the need for the standard process.	tion of the test so that a reasonable fied testing conditions, and accessible				
I understand and agree that JWSC may require that I consent to a Consumer Credit and/or Criminal His If an adverse employment decision is made due totally or partially to the information on a report, JWS source of the report so that I may contact them if I wish. I release the JWSC and its agent from any and or arise from any provision of information in connection to such a report.	C will give a copy of the report and the				
I understand that the JWSC reserves the right, to the extent permitted by law, to require drug and/or a employee either prior to employment or any time during employment (as permitted by law) and I here consent to the release of the results of any such tests to the JWSC or its agent. I release the JWSC and damages that may result or arise from any drug test or the provision of information in connection to so	eby give my consent to any such tests. I lits agent from any and all liability and				
I understand that I may be required, to the extent permitted by law, to undergo a post-offer, pre-empligive my consent to such an examination.	loyment physical examination, and I hereby				
I understand that if employed, policies and rules, which are issued, are not conditions of employment or procedures, in whole or in part, at any time.	and that the employer may revise policies				
ALL APPLICATIONS, RESUMES, LETTERS OF REFERENCE, ETC. SUBMITTED BECOME THE PROPERTY OF T ALL INFORMATION PROVIDED ON THE APPLICATION MAY BE SUBJECT TO PUBLIC DISCLOSURE UNDER					
Date: Applicant's Signature:					



## Brunswick-Glynn County Joint Water & Sewer Commission PRE-EMPLOYMENT REFERENCES

700 Gloucester Street, Suite 302 | Brunswick, GA 31520 Telephone: (912) 265-8500 | Fax: (912) 265-8501

### APPLICANT: Please complete the top portion of this form and turn it in with your application.

Tea	mwork Services, Inc.	To:					
for Brunswick-Glynn County Joint Water			(Name of Former Supervisor)				
& S	ewer Commission						
700	Gloucester Street, Suite 302	_					
	nswick, GA 31520			(Company Name)			
	ne: (912) 265-8500						
Fax: (912) 265-8501		_		(Address)			
		_		(City, State, Zip)			
		_		(Dhono Nivekon)			
		_	um cubmitting a	(Phone Number)	n to the Drungwick		
۱,			_	in employment applicatio			
Glyı	nn County Joint Water & Sewer Commission fo	r the position(s) of	:				
Lca	nnot he considered for employment until my r	eferences are on fi	le Please comp	lete the items listed helo	w and return this form		
	I cannot be considered for employment until my references are on file. Please complete the items listed below and return this form to Teamwork Services, Inc. I hereby authorize you to release all records of employment, including assessments of my job						
performance, ability and fitness. I hereby authorize release you from all liability of any type as a result of providing the following							
-	rmation to the above-mentioned Company.	,	,	, ,,			
Dat	e:	plicant's Signature	:				
	FOR	MER EMPLOYER R	EFERENCE FOR	M			
	(Applicant: Do not wri	te below this line. To	be completed b	y former employer.)			
1.	Dates of employment with your organization	:					
2.	Positions held with your organization:						
3.	Was the employee's overall performance: A	bove Average 🗆	Average $\square$	Below Average □	Poor 🗆		
4.	Was the employee absent: Never ☐ Occa	asionally 🗆 Repe	eatedly $\square$				
5.	Was the employee's quality of work: Excelle	ent □ Good □	] Fair □	Poor 🗆			
6.	Did the employee accept supervision: W	'ell □ Average □	] Fair □	Poor 🗆			
7.	Why did the employee leave your Company?	Resigned	Discharged $\square$	Laid Off □ Other			
8.	8. If your policy permitted and if you had a vacancy, would you rehire this person?						
	If No, please explain:						
9.	Remarks:						
1							
Sigr	nature of person completing this form:			Date:			