## Jones County Emergency Operations Center 22 Mason Street – Laurel, MS 39440 Paul Sheffield, Executive Director

		A	pplication for E	mploym	ient			
Name:	Date:							
Address:	ress: Phone:							
City:	State: Zip:							
Are you a citizen of the United States of America? [] Yes [] No								
Have you applied here before? [] Yes [] No When? Position applied for?								
Available start date: [] Full time [] Part Time								
Employment experience: Start with your present or last job. Include military assignments.								
Employer Name	Address	Phone #	Supervisor	Pay Rate	Reason for Leaving	Employed from	Employed to	Title

Education and/or Training: List any programs or studies you have attended.

Schools/Colleges/Training Programs Attended	# of Years	Year Graduated	Degree Obtained

Describe any special qualifications you may possess that will benefit you in this position:

## References: References may be called prior to interview and/or testing.

Name	Address	Phone #	Position/Title	Years Known	Relation

Are you a veteran of the U.S. Military Services? [] Yes [] No

Personal Information:

Driver's License #		State:	Expiration:	
Social Security #:	Date of Birth:		Sex:	Race:

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given on my application or interview may result in termination.

Signature of Applicant		Date
	For Personnel Department Use only	
Remarks:		
Critical Testing Date:	Interview Date:	Hire Date: