

DATE

WALK-IN EMPLOYMENT INQUIRY

THIS APPLICATION SHALL REMAIN ACTIVE FOR 90 DAYS. IF YOU WISH TO RENEW YOUR APPLICATION, YOU SHOULD NOTIFY THIS OFFICE AT (706) 439-6000 PRIOR TO THE 90 DAY EXPIRATION DATE.

I understand that this is not an EMPLOYMENT APPLICATION. This inquiry, will however, be reviewed and my qualifications considered for possible job openings in the near future. If the County finds that my qualifications and employment background match a current opening, I will be contacted to complete an APPLICATION FOR EMPLOYMENT.

NAME:	<u>LAST</u>	<u>FIRST</u>	<u>MIDDLE</u>
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ADDRESS:

CITY:	STATE:	ZIP CODE:	PHONE NUMBER:
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POSITION SOUGHT:	DESIRED WAGE:
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AVAILABLE FOR:

Check ALL that apply: <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	HOURS/SHIFT AVAILABLE:
	DAYS AVAILABLE:

EMPLOYMENT EXPERIENCE

PRESENT OR MOST RECENT POSITION:	DATES EMPLOYED:	WAGES:
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DESCRIBE YOUR PRIMARY DUTIES:

PRIOR POSITION:	DATES EMPLOYED:	WAGES:
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CIRCLE THE NUMBER OF YEARS COMPLETED FOR EACH OF THE FOLLOWING:

High School

1	2	3	4
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College

1	2	3	4
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Vo-Tech School

1	2	3	4
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LIST MAJOR OR PRIMARY AREA OF STUDY:

LIST PROFESSIONAL, VOCATIONAL, OR OTHER TRAINING/SKILLS RELEVANT TO TYPE OF EMPLOYMENT SOUGHT:

HAVE YOU EVER BEEN CONVICTED OF A FELONY?

YES

NO

DO YOU HAVE ANY RELATIVES WORKING FOR UNION COUNTY?

YES

NO

IF YES, NAME OF RELATIVE AND DEPARTMENT: _____

SIGNATURE: _____ DATE: _____

All individuals considered for employment are evaluated without regard to race, color, religion, gender, national origin, age, marital or veteran status, the presence of a disability, or any other legally protected status.