



Human Resources Department
2800 King Street
Smyrna, Georgia 30080
Phone: (770) 319-5300
Fax: (770) 319-5330

APPLICATION FOR EMPLOYMENT
SMYRNA CITY GOVERNMENT

Website: www.smyrnacity.com
Email: hr@smyrnaga.gov

Please Print, Use Ink

Date:

PERSONAL INFORMATION

Name	Wiles	V'Luck	K.	v.wiles@yahoo.com
(Last)	(First)	(Middle Initial)	(City)	(Email Address)
Present Address	Union City		GA	30291
	(City)		(State)	(Zip Code)
Home Telephone	(770) 969-4602	Work Telephone	Other Telephone (404) 545-0787	
How did you learn of this job opening?	<input type="checkbox"/> Job Board <input type="checkbox"/> Job Hotline <input checked="" type="checkbox"/> Internet-Smyrna <input type="checkbox"/> Internet-Other <input type="checkbox"/> Other _____			
Position applied for:	Central Records Asst.	Closing Date:	Are you willing to work shift work (nights, holidays, weekends, etc.)?	
		4/16/2013	<input checked="" type="checkbox"/> Full Time <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Part Time <input type="checkbox"/> Temporary	
Do you meet the minimum requirements for this position as listed in the job announcement?		Date Available for employment:		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain:		4/16/2013		

EDUCATION

Are you a high school graduate? Yes No If yes, please list below:
 If no, mark highest grade completed 5 6 7 8 9 10 11 12
 If not a high school graduate, do have a GED? Yes No If yes, date received

School	Name and Location	Major Course of Study	Completed	Degree Received
High School	Benjamin E. Mays High School	College Prep/Math & Sciences	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input checked="" type="checkbox"/> 12	HS Diploma
Business/Technical School			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	
College	Morehouse College	Psychology	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4	BA
Graduate School	Ohio University	Public Health	<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	

GENERAL INFORMATION

Will you accept the approved starting pay for the position you have applied for? Yes No

Have you ever been employed with Smyrna City Government? Yes No If yes, when? _____ Department/Office _____

Are you related to anyone currently employed by Smyrna City Government? Yes No Relative's Name _____ Relationship _____ Department _____

Can you submit legal verification of your right to work in the United States? Yes No

In accordance with the Immigration Reform and Control Act of 1986, proof of authorization to be employed in the United States will be required of all prospective employees. Failure to establish such proof will prohibit or discontinue employment.

Have you ever been convicted of or plead guilty or nolo to a felony or misdemeanor, other than a minor traffic violation?
 Yes No
 If yes, when: _____ Where: _____
 For what: _____

Active Military Service, if applicable:
 From: _____ To: _____ Serial or Service Number _____ Branch of Service _____
 Is this experience relevant to job for which you are applying?
 If yes, please explain: _____

EMPLOYMENT RECORD

Describe your work history for the past ten years beginning with your current or most recent job. Include military and/or volunteer experience. Failure to give complete information regarding each job held may result in your disqualification. Complete addresses with zip codes and phone numbers for all employers are necessary. A resume may be attached only as additional information and will not be accepted in lieu of completing this section.

Most Recent/Current Employer:

Company Name		Street Address		City	State	Zip Code
Contemporary Services Corp.		285 Andrew Young Int'l Blvd.		Atlanta	GA	30313
From Mo/Yr	To Mo/Yr	Telephone	Supervisor's Name, Title and Phone Number			
03/2013	Current	404-223-8157	Greg Overstreet/Branch Manager/(404) 223-8157			
Describe Specific Job Duties						Your Job Title
Greeting guests as they enter and leave events, checking bags, answering questions						Event Staff
Starting Salary	Leaving Salary	Reason for Leaving				
7.50/hr	N/A					
Company Name		Street Address		City	State	Zip Code
Georgia Perimeter College		1975 Lakeside Pkwy		Tucker	GA	30084
From Mo/Yr	To Mo/Yr	Telephone	Supervisor's Name, Title and Phone Number			
09/2011	08/2012	678-891-2500	Felisha Shepard-White/Acting Associate Director/(678) 446-5542			
Describe Specific Job Duties						Your Job Title
Creating and editing questionnaires, generating surveys via software, analyzing data						Research & Assessment Asst
Starting Salary	Leaving Salary	Reason for Leaving				
15.40/hr	15.40/hr	Reduction in Force				
Company Name		Street Address		City	State	Zip Code
DeKalb County Board of Health		445 Winn Way		Decatur	GA	30031
From Mo/Yr	To Mo/Yr	Telephone	Supervisor's Name, Title and Phone Number			
11/2009	09/2011	404-508-7985	Alicia Cardwell-Brown/Community Liaison/(404) 508-7985			
Describe Specific Job Duties						Your Job Title
Maintaining contract database, entering survey data into server						Intern
Starting Salary	Leaving Salary	Reason for Leaving				
\$0	\$0	Found employment				
Company Name		Street Address		City	State	Zip Code
Internal Revenue Service		4800 Buford Hwy		Chamblee	GA	30341
From Mo/Yr	To Mo/Yr	Telephone	Supervisor's Name, Title and Phone Number			
03/2006	07/2006	512-477-5627	Bernice Tyler/Reject Clerical Manager/(770) 455-2574			
Describe Specific Job Duties						Your Job Title
Filing, sorting and batching tax returns						File Clerk
Starting Salary	Leaving Salary	Reason for Leaving				
11.40/hr	11.40/hr	Furlough				
Company Name		Street Address		City	State	Zip Code
Morehouse College		830 Westview Dr. SW		Atlanta	GA	30314
From Mo/Yr	To Mo/Yr	Telephone	Supervisor's Name, Title and Phone Number			
01/2005	05/2005	404-681-2800	Bryant Marks, Ph.D./Associate Professor/(404) 215-2627			
Describe Specific Job Duties						Your Job Title
Analyzing and designing research studies						Student Worker
Starting Salary	Leaving Salary	Reason for Leaving				
6.00/hr	6.00/hr	End of term (Work-study)				

May we contact your current employer? Yes No

DRIVING HISTORY

Please complete this section if applying for a position that requires operating a vehicle or equipment.

Do you have a valid Driver's License? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Which state? Georgia	Driver's License No. 057840951	Date of Expiration 01/08/2017
Do you have a commercial Driver's License? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Which state?	Which type?	Driver's License No.

Have you incurred any traffic charges within the last three (3) years? Do not include any parking tickets.

Yes No

If yes, Give Date(s) and Type of Charges: **Expired Tag - December 2012**

I hereby direct the Department of Public Safety of Georgia, or any other authorized agency to whom this authorization may be presented, to release to the Smyrna City Government an abstract of my driving record for the past three-year period to be reviewed by the City for use in processing my employment application and determining my suitability for various job assignments.

Signature _____

Date _____

SKILLS AND TRAINING

Please complete this section if applying for a position that requires the following skills:

Keyboarding Speed: _____ Data Entry Speed: _____ Shorthand Speed Writing

COMPUTER SKILLS:

<u>Word Processing</u>	<u>Spreadsheet</u>	<u>Database</u>	<u>Graphics</u>	<u>Electronic Mail</u>
<input checked="" type="checkbox"/> Microsoft Word	<input checked="" type="checkbox"/> Excel	<input type="checkbox"/> Microsoft Access	<input checked="" type="checkbox"/> Power Point	<input type="checkbox"/> iNotes
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> PageMaker	<input checked="" type="checkbox"/> Outlook
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Are you able to perform all the duties listed in the job description? Yes No

If you answered no to the above, please explain what can be done to provide you with reasonable accommodation.

What special skills, qualifications or certifications have you gained from former employers or other experiences which relate to the type of work you are applying for?

If you are able to communicate in languages other than English, please provide information regarding other languages spoken and your skill level.

PUBLIC SAFETY ONLY

Please answer the following questions when applying for a public safety position:

Police Officer, Detention & Communication Officer, Park Ranger	If yes, please attach COPIES of the following: <ul style="list-style-type: none">• High School Diploma or GED Certificate• Birth Certificate• Current Driver's License• DD214 (Military Separation Papers), if applicable• GA POST Certification or acceptable GA POST entrance scores are required *See job announcement for acceptable exams scores
Are you a citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you reached your 21 st birthday? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Firefighter	If yes, please attach COPIES of the following: <ul style="list-style-type: none">• High School Diploma or GED Certificate• Birth Certificate• Current Driver's License• DD214 (Military Separation Papers), if applicable
Have you reached your 21 st birthday? <input type="checkbox"/> Yes <input type="checkbox"/> No	

APPLICANT'S STATEMENT

I certify that the information given in this application is true and complete to the best of my knowledge. I also understand that this application is not a contract of employment.

I understand and agree that, as a condition of employment if hired, I will undergo a designated working test period and will be eligible to become a regular status employee only after successfully completing this working test period. I also understand that working test employees do not have a property interest in their jobs, may be terminated at any time, and are not eligible for appeal rights.

I understand that any untrue statement(s) in this application may result in my dismissal at any time during any employment with Smyrna City Government. I authorize the City to investigate any information contained in this application.

I authorize the release of high school and college transcripts, information concerning my previous employment, and any information my former employers may have pertinent to this application and the employment procedures of Smyrna City Government. I release all parties from all liability for any damage that my result from requesting, providing, processing, retaining, or releasing any information about me. A photographic copy of this authorization shall be as valid as the original.

I understand that, if I should become a driver of a Smyrna City Government vehicle, the City has my permission and release to check my driving record at any time prior to or during my employment with Smyrna City Government.

I voluntarily consent to undergo an employment physical (if hired and if required due to the nature of the particular position for which I am applying) as arranged for by Smyrna City Government at City expense.

I understand that Smyrna City Government maintains a drug-free workplace and complies with the requirements of the Drug-Free Workplace Act of 1988. I also understand that, upon offer of employment to a CDL or other "Safety Sensitive Position" (as defined by Smyrna Personnel Policies and Procedures), post-offer drug testing will be required and that failure to successfully pass such testing will be grounds for withdrawing any offer of employment.

I understand that resumes, letters of reference, and other documents submitted with the application become property of Smyrna City Government and cannot be returned. I also understand that the information I have provided on the applications may be subject to public disclosure under the Georgia Open Records Act.

I understand that my submission of this application in no way assures me a position and that no City representative has the authority to enter into any employment agreement with the contrary to the foregoing.

By signing this application, I hereby acknowledge that I understand and agree to all provisions outlined herein.

Signature _____ Date _____

Smyrna City Government does not discriminate on the basis of race, color, religion, sex, national origin, age, handicap or disability.