



**STATE OF GEORGIA  
EMPLOYMENT APPLICATION  
An Equal Opportunity Employer**

**Complete information on searching for jobs with the State of Georgia and an on-line application procedure may be found on the Internet at <http://team.georgia.gov/careers/>. Using Team Georgia Careers is the preferred method of applying for these State jobs.**

<b>Daytime Telephone Number</b>						<b>E-mail Address</b>							
Last Name						First Name						Middle Initials	
Street or Mailing Address										Apartment No.			
City						State		Zip Code		County			

**EMPLOYMENT ELIGIBILITY:** To be employed by the State of Georgia, you must meet certain State and Federal employment eligibility requirements. These include (but are not limited to) United States citizenship or authorization to work in this country, positive rehire status if previously employed by the State, and no felony convictions (for some jobs). Please answer the following questions.

1. Are you a United States citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO	2. Are you an alien authorized to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	3. Have you ever been dismissed from any State of Georgia government position? <input type="checkbox"/> YES <input type="checkbox"/> NO <b>If YES, attach an explanation.</b>	4. Have you ever been convicted of a felony? <input type="checkbox"/> YES <input type="checkbox"/> NO <b>If YES, attach an explanation.</b>
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**TYPE OF WORK:** JOB TITLE AND JOB CODE REQUIRED. If you do not know the correct job titles, information is available at the various State of Georgia agency personnel offices, the Department of Administrative Services Office in Atlanta, the Georgia Department of Labor Career Centers, or on <http://team.georgia.gov/careers/>.

<b>Job Code</b>	<b>Specific Job Title Sought</b>

**EDUCATION:**

High School Graduate or Equivalent (GED)? <input type="checkbox"/> Yes <input type="checkbox"/> No	Vocational/Business School:	No. of Months:	Field of Study:	Completed: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: (Mo./Yr.)					
<b>PLEASE LIST EXACT COLLEGE HOURS :</b>		<b>CREDIT RECEIVED</b>		<b>FIELD/AREA OF CONCENTRATION</b>		<b>TYPE OF DEGREE</b>	<b>DATE DEGREE COMPLETED</b>		
COLLEGES/UNIVERSITIES	CITY and STATE	Qtr Hrs	Sem Hrs	Major	Hrs	Minor	Hrs	(BA/BS/MA/PhD)	(Mo. /Yr.)

**LANGUAGE SKILLS:**  Multilingual (Specify languages) \_\_\_\_\_  Sign Language

**GEORGIA LICENSES AND CERTIFICATIONS:**

Type of License/Certificate	License/Certificate Number	Expiration (Mo. /Yr.)	Specialization/Endorsements
Current Valid Driver's License <input type="checkbox"/> Yes <input type="checkbox"/> No			
Current Valid Commercial Driver's License (CDL): Class (Check One): <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/>			
Teacher Certified in Georgia: Type of Certificate Held:			
Georgia Peace Officer Standards and Training Certificate (POST)			
Other Professional License/Certificate: _____			

**CERTIFICATION: Read carefully before signing and dating. Unsigned applications will not be processed.**  
I certify that all information on this application is correct. I authorize any agent or employee of the State to verify this information and to release it to anyone who may consider me for appointment. I understand that intentionally providing false information on this form or attachments is a violation of state law. **I also understand that applications submitted electronically, via e-mail or similar media, are not valid unless I enter my name in the signature field below and such action shall constitute an electronic signature.** I further certify that either: 1) I have not been convicted of a drug-related criminal offense; or 2) if I have been convicted of a drug-related criminal offense, it has been more than three (3) months since my first conviction, or more than five (5) years since a second or subsequent conviction (O.C.G.A. 45-23 et. Seq.).

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**WORK HISTORY:** Describe your work history below beginning with your current or most recent job. Include military and volunteer experience. If you worked for the same employer but held different jobs describe each separately. Describe in detail the specific duties beginning with your primary duties. If you need more space, print out the supplemental work history page and attach to the application. Failure to give complete and detailed information regarding each job held may result in your disqualification from employment consideration. *You may submit a resume to document your work background.* However, if the resume does not contain all information requested in the Work History section, please fill in that information on the application. Include additional documents as requested.

Current or Last Employer:			Your Job Title:		
Address			From (mo/yr)	To (mo/yr)	Hours per Week:
City	GA	Zip Code	Check all that apply: <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern <input type="checkbox"/> Paid		Annual Salary
Your Supervisor's Name and Title			May We Contact Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		Your Supervisor's Phone Number (    )
Reason for Leaving			# and types of employees you supervised:		
Describe in detail your job duties.					
Related Computer Skills:					

Employer:			Your Job Title:		
Address			From (mo/yr)	To (mo/yr)	Hours per Week:
City	State	Zip Code	Check all that apply: <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern <input type="checkbox"/> Paid		Annual Salary
Your Supervisor's Name and Title			May We Contact Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		Your Supervisor's Phone Number (    )
Reason for Leaving			# and types of employees you supervised:		
Describe in detail your job duties.					
Related Computer Skills :					

Employer:			Your Job Title:		
Address			From (mo/yr)	To (mo/yr)	Hours per Week:
City	State	Zip Code	Check all that apply: <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern <input type="checkbox"/> Paid		Annual Salary
Your Supervisor's Name and Title			May We Contact Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO		Your Supervisor's Phone Number (    )
Reason for Leaving			# and types of employees you supervised:		
Describe in detail your job duties.					
Related Computer Skills :					

## STATE OF GEORGIA EMPLOYMENT AVAILABILITY

Where do you want to work? List up to nine (9) Communication centers in the blanks below. Use the <i>letter codes</i> of each center.									
1.	2.	3.	4.	5.	6.	7.	8.	9.	

**GSP DISPATCHER APPLICANTS PLEASE SELECT FROM THE FOLLOWING COMMUNICATION CENTERS**

**Cartersville-(A)**  
130 State Route 20 Spur  
Cartersville, GA 30120

**Statesboro-(F)**  
10723 US 301 South  
Statesboro, GA 30458

**Gainesville-(B)**  
2000 Cleveland Hwy  
Gainesville, GA 30506

**Americus-(G)**  
113 William Bowen Pointe  
Americus, GA 31709

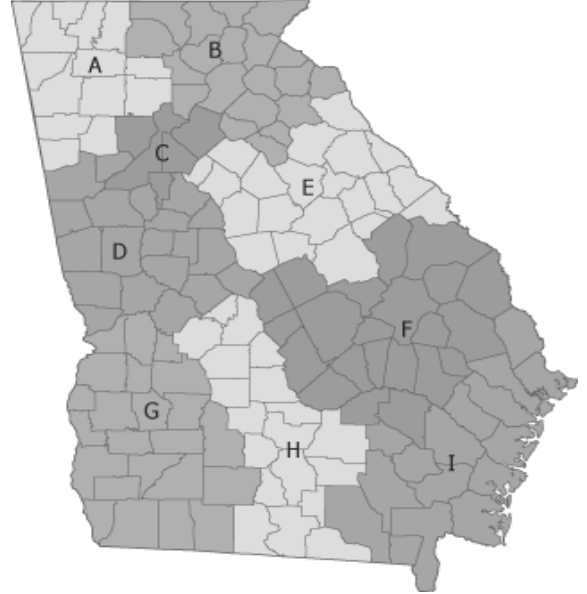
**Atlanta-(C)**  
959 East Confederate Ave  
Atlanta, GA 30316

**Tifton-(H)**  
3101 US Hwy 41 South  
Tifton, GA 31794

**Newnan-(D)**  
517 Turkey Creek Rd  
Newnan, GA 30263

**Brunswick-(I)**  
160 Public Safety Blvd  
Brunswick, GA 31525

**Grovetown-(E)**  
2000 William Few Parkway  
Grovetown, GA 30813



Where do you want to work? List up to nine (9) Regions in the blanks below. Use the <i>number codes</i> of each region.									
1.	2.	3.	4.	5.	6.	7.	8.	9.	

**MOTOR CARRIER COMPLIANCE WEIGHT INSPECTOR APPLICANTS PLEASE SELECT FROM THE FOLLOWING REGIONS**

**Region 1 Inspection Station(s)**  
Catoosa County Inspection Station  
I-75 South (Mile Marker 343)  
Ringgold, GA 30736

**Region 6 Inspection Station(s)**  
Monroe County Inspection Station  
I-75 North Mile Marker 190  
Forsyth, GA 31029

**Region 2 Inspection Station(s)**  
Franklin County Inspection Station  
I-85 South Mile Marker 169  
Lavonia, GA 30553

**Region 7 Inspection Station(s)**  
Bryan County Inspection Station  
I-16 West Mile Marker 144  
Ellabell, GA 31308

**Region 3 Inspection Station(s)**  
Douglas County Inspection Station  
I-20 East Mile Marker 43  
1786 Blairs Bridge Rd  
Lithia Springs, GA 31022

Chatham County Inspection Station  
I-95 Mile Marker 111  
Pt. Wentworth, GA 31407

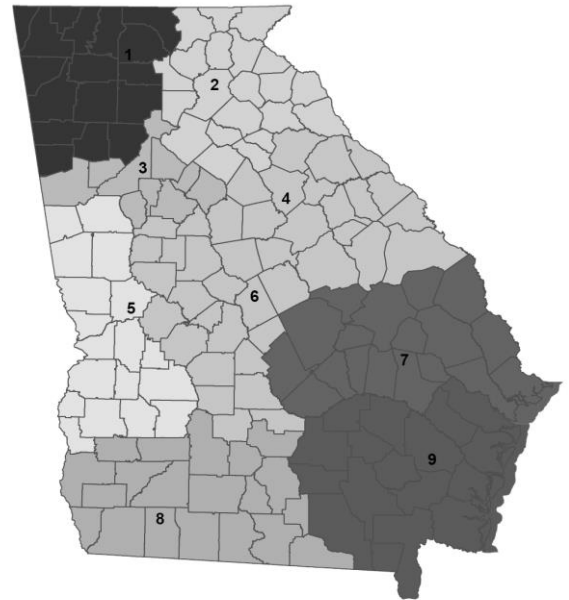
Carroll County Inspection Station  
I-20 West Mile Marker 15  
Temple, GA 30179

**Region 8 Inspection Station(s)**  
Lowndes County Inspection Station  
I-75 South Mile Marker 23  
Tifton, GA 31793

**Region 4 Inspection Station(s)**  
Columbia County Inspection Station  
I-20 East Mile Marker 187  
Harlem, GA 30614

**Region 9 Inspection Station(s)**  
McIntosh County Inspection Station  
I-95 North Mile Marker 55  
Darien, GA 31305

**Region 5 Inspection Station(s)**  
Troup County Inspection Station  
I-85 South Mile Marker 23  
Lagrange GA 30240



**Please Note:** Applicants for Motor Carrier Compliance Officer, a location will be decided based on need. For all other applicants, please refer to specific job posting for position location information.

**Please answer the following questions:**

Are you at least 18 years of age?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you used/smoked/possessed marijuana within two (2) years of application date?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you used any prescription drugs or legally obtainable substance in the manner for which it was not intended in within two (2) years of application date?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any tattoos/brands that depict or support criminal behavior, drug usage, nudity, profanity, promiscuity, subversive groups, bigotry, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have tattoos/brands above the neckline and fingers that are visible while on duty and/or in a long sleeve uniform shirt? Tattoos on the arm must not be below the crease of the wrist. Exceptions include tattoos/brands that are covered by one ring per hand, or by a watch band on either the left <b>or</b> right wrist.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you used any illegal drugs or combination of illegal drugs (including anabolic steroids after February 27, 1991) other than marijuana within the past five (5) years of application date?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have personal delinquent state or federal tax liability, or delinquent student or government loans? If yes, are you on an approved payment plan for the delinquent tax liability or loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Do you have any conviction or plea of nolo contender within the last three (3) years of application date for Driving Under the Influence of Drugs or Alcohol (DUI) or for any serious traffic offense, including: Fleeing or Attempting to Allude a Police Officer, Vehicular Homicide, Failure to Stop, Render Aid or Leave Information, and Racing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been disqualified from the Department of Public Safety's background process in the past year?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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<b>Date:</b>		<b>Requisition Number (for announced jobs only):</b>	
<b>EQUAL EMPLOYMENT OPPORTUNITY INFORMATION</b>			
The information you give in this section is optional. It is used by the Georgia Merit System and other state agencies to comply with Federal guidelines for monitoring the equal employment opportunity efforts of the State of Georgia.			
<b>Last Name</b>	<b>First Name</b>	<b>MI</b>	
<b>Ethnic Background (Check One):</b>		<b>Gender</b>	<b>Birth Date</b>
1. <input type="checkbox"/> American Indian	2. <input type="checkbox"/> White, not of Hispanic origin	(Check One):	MO DAY YR

3.  Hispanic

4.  Black, not of Hispanic origin

Male

5.  Asian/Pacific Islander

6.  Multi-racial

Female

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*Birth Date - Required for  
some law enforcement  
jobs.*

For Agency Use