

CITY OF AMERICUS

INSTRUCTIONS FOR COMPLETING AN APPLICATION PACKET FOR EMPLOYMENT

1. Fill out and return the entire application packet including names of supervisors, telephone numbers, addresses, duties, etc. A notation " See Resume" or "See Attached" is not acceptable.
2. You should apply for an exact job title (only one job title per application packet) (i.e. Secretary, Equipment Operator I, Administrative Secretary, etc.). A job description for the job title for which you are applying is enclosed.
3. You should provide documentation of employment eligibility and all minimum job requirements such as driver's license, high school diploma, P. O. S. T. certification, etc. at the time of application. Documentation submitted with application packet becomes the property of the City of Americus and can not be returned to you. Application packets without proper documentation shall be considered as not meeting minimum job requirements and may result in your being disqualified from further consideration.
4. No application packet will be reviewed by City personnel prior to the closing date for each job advertisement. Any application packet received after the closing date will not be considered for that advertised vacancy. It will, however, be kept on file for 60 days for that next available job title vacancy.
5. You will be notified by phone or mail for a scheduled personal interview or you will receive notification that the position is filled.
6. Application packets remain active for a period of 60 days. After the 60 day period, you must complete a new application packet. We are not able to update or renew inactive application packets. We are not responsible for notifying you of the inactive status of your application packet.
7. We do not accept resumes in lieu of application packet; however, we encourage you to submit a resume with your completed application packet.
8. An incomplete application packet or misleading information may disqualify you from consideration at any time during our selection process.
9. Successful completion of a post-offer, pre-employment medical examination and drug screening will be required of every finalist for employment. Any person convicted for the first time of any criminal offense involving the manufacture, distribution, sale, or possession of a controlled substance, marijuana or a dangerous drug shall be ineligible for employment for a period of three months from the date of conviction. Any person convicted two or more times shall be ineligible for employment for a period of five years from the date of the most recent conviction.

Revised 11/22/02

THE FOLLOWING DOCUMENTATION MUST BE PROVIDED AT TIME OF APPLYING FOR ANY POSITION WITH THE CITY OF AMERICUS:

EDUCATION REQUIREMENT – based on the job description you are applying for

VALID GEORGIA DRIVER’S LICENSE – if required by the job description you are applying for

BIRTH CERTIFICATE – required for positions in Fire Department, Police Department and Correctional Officer Positions - see job description

DRUG SCREENING



AS A CONDITION OF EMPLOYMENT, YOU MUST
SUCCESSFULLY PASS A
DRUG SCREENING TEST.

**City of Americus
Human Resources Department
101 W. Lamar St.
Americus, GA 31709
(229)924-4411
Fax (229)924-2012**

**NOTICE TO JOB APPLICANTS
CITY OF AMERICUS DRUG SCREENING POLICY**

The City of Americus has a strong commitment to its employees to provide a safe work environment and to promote high standards of employee health. The city also has a strong commitment to provide high quality public service. Consistent with the spirit and intent of these commitments, the City of Americus has determined that there is a compelling need for a City policy on drug use which includes chemical testing for recent use of controlled substances.

Upon an offer of employment by the City and prior to final appointment, all job applicants will be asked to consent to a controlled substance screening test. If the initial screening test indicates that the applicant has recently used a controlled substance, the applicant will be notified of the test results.

Before a test is administered, applicants will be asked to sign a consent form authorizing the test and permitting release of test results to the City's Human Resources Department.

If an applicant refuses to consent to a test, or if testing indicates use of controlled substance, the offer of employment will be retracted, and the applicant will be denied employment with the City. Applicants will be informed if they are rejected on the basis of the test results.

All information from an applicant's drug evaluation is confidential and only those with a need to know are to be informed of these results. Disclosure of such information to any other person, agency, or organization is prohibited unless written authorization is obtained from the applicant.

City of Americus

Request for Motor Vehicle Record

Requestor Information:

Requester Name <p style="text-align: center;">Human Resources Department</p>	Firm Name <p style="text-align: center;">City of Americus</p>
Street Address <p style="text-align: center;">101 West Lamar Street</p>	City, State, Zip Code <p style="text-align: center;">Americus, GA 31709</p>

Please provide a motor vehicle record (MVR) for the following driver:

Full Name (First Middle Maiden Last)	Date of Birth:	License Number:
Street Address		City, State, Zip Code

Notice — You must certify below that the purpose for this record request is for Credit, Employment or Other Stated Purposes.

Credit, Employment or Other Use Certification

This record is requested for the following purpose(s)? Credit Employment Other Purpose

In accordance with OCGA §40-5-2, I do hereby authorize the requester named above to procure a copy of my driver's license history.

Licensee Signature (Must be notarized)	Date	Notary Signature and Seal Here
Requestor Signature	Date	

Emily Nobles
Human Resources Administrator

AUTHORIZATION TO RELEASE INFORMATION

I have applied to the Mayor and City Council of Americus (hereinafter "City") for employment. Part of the employment process is an investigation and verification of information I provide or will provide on my application for employment and in occasional reports during my employment with the City.

I do hereby authorize a review of and full disclosure of all records concerning me to the City. The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; employment records; financial statements and records wherever filed; medical and psychiatric treatment and/or consultation including hospitals, clinics and private practitioners, and employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me whether representing me or another person in any case either criminal or civil, in which I presently have or have not had an interest; motor vehicle record; criminal history record information which may be in the files of any state or local criminal justice agency and/or any other information contained in your files relevant to my employment with the City.

I hereby fully and finally release and discharge the City and its officials, employees and agents from any and all liability for acts and omissions taken pursuant to this authorization, including any and all liability which arises out of or in connection with the release or dissemination of such information. I similarly release and discharge all persons, corporations, and other entities who release any information or documents pursuant to this authorization from any and all liability therefor which arises out of or in connection with the release or dissemination of such information. I represent and warrant that I will not, directly or indirectly, seek disclosure of information obtained pursuant to this authorization either to me or to anyone else.

I have carefully read and fully understand the contents of this authorization and I execute it voluntarily as my own free act and deed.

Full Name (printed) _____ Date _____

Address _____

Signature _____

Notary Public

<p>FOR OFFICIAL USE ONLY:</p> <p>OPERATORS BADGE NUMBER _____</p> <p>_____ HAS CRIMINAL HISTORY</p> <p>_____ NO CRIMINAL HISTORY</p>

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Have you been convicted of a felony? Yes _____ No _____

A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.

Date

Signature