

**CLAYTON COUNTY COMMUNITY SERVICES AUTHORITY, INC.**  
**1000 MAIN STREET/P. O. BOX 1808**  
**FOREST PARK, GEORGIA 30298-1808**  
**PHONE (404) 363-0575**  
**FAX (404) 361-8395**

CHARLES W. GRANT  
*EXECUTIVE DIRECTOR*

BEECHIE YATES  
*COMPTROLLER*

This company is an Equal Employment Opportunity Employer. We do not use personal information in our hiring process and are dedicated to hiring the person who is best suited for our jobs without any knowledge or consideration to any individual's membership in any protected class.

Any personal information found on this application or any supporting documentation will be removed as soon as it is discovered.

All applications received by this agency will only remain active until the end of each calendar quarter. On January 1st, April 1st, July 1st, and September 1st, all applications will be destroyed. If you still wish to be considered for employment after these dates, you will need to come in and fill out a new application.

DATE: \_\_\_\_\_

POSITION APPLIED FOR: \_\_\_\_\_

DATE YOU CAN START: \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT**

Name \_\_\_\_\_

Last

First

Middle

Other Names Used \_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

Zip

Telephone # \_\_\_\_\_ Message # \_\_\_\_\_

Are you legally able to work in the United States? YES \_\_\_\_\_ NO \_\_\_\_\_  
(Proof will be required upon hire)

Have you ever applied with this agency before? NO \_\_\_\_\_ YES \_\_\_\_\_ WHEN? \_\_\_\_\_

Have you ever worked for this agency before? NO \_\_\_\_\_ YES \_\_\_\_\_ WHEN? \_\_\_\_\_

**PREVIOUS WORK EXPERIENCE**

**List below your last four employers, starting with your most recent.  
(Ten year work history needed)**

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

Street City State Zip  
Date Hired \_\_\_\_\_ To \_\_\_\_\_ Length of Employment \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Phone # \_\_\_\_\_

Position Held \_\_\_\_\_ Wages \_\_\_\_\_

Length of Time at Position \_\_\_\_\_

Previous Positions Held With This Employer \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving? \_\_\_\_\_

**May We Contact This Employer? ( ) YES ( ) NO**

\_\_\_\_\_

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

Street City State Zip  
Date Hired \_\_\_\_\_ To \_\_\_\_\_ Length of Employment \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Phone # \_\_\_\_\_

Position Held \_\_\_\_\_ Wages \_\_\_\_\_

Length of Time at Position \_\_\_\_\_

Previous Positions Held With This Employer \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving? \_\_\_\_\_

**May We Contact This Employer? ( ) YES ( ) NO**

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

Street City State Zip  
Date Hired \_\_\_\_\_ To \_\_\_\_\_ Length of Employment \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Phone # \_\_\_\_\_

Position Held \_\_\_\_\_ Wages \_\_\_\_\_

Length of Time at Position  
\_\_\_\_\_

Previous Positions Held With This Employer \_\_\_\_\_

Duties \_\_\_\_\_

Reason for Leaving? \_\_\_\_\_

**May We Contact This Employer? ( ) YES ( ) NO**

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

Street City State Zip  
Date Hired \_\_\_\_\_ To \_\_\_\_\_ Length of Employment \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Phone # \_\_\_\_\_

Position Held \_\_\_\_\_ Wages \_\_\_\_\_

Length of Time at Position  
\_\_\_\_\_

Previous Positions Held With This Employer \_\_\_\_\_

Duties \_\_\_\_\_

Reason for Leaving?  
\_\_\_\_\_

**May We Contact This Employer? ( ) YES ( ) NO**

**EDUCATION**

High School Attended \_\_\_\_\_

Address (Complete) \_\_\_\_\_  
Street City State Zip

Highest Grade Completed \_\_\_\_\_ Dates Attended \_\_\_\_\_ To \_\_\_\_\_

College Attended \_\_\_\_\_

Address (Complete) \_\_\_\_\_  
Street City State Zip

Degree Received \_\_\_\_\_ Dates Attended \_\_\_\_\_ To \_\_\_\_\_

College Attended \_\_\_\_\_

Address (Complete) \_\_\_\_\_  
Street City State Zip

Degree Received \_\_\_\_\_ Dates Attended \_\_\_\_\_ To \_\_\_\_\_

**OTHER SKILLS, EDUCATION, AND/OR TRAINING THAT IS DIRECTLY RELATED TO THE POSITION YOU ARE APPLYING FOR (I.E. TRADE SCHOOL, ON-THE-JOB TRAINING PROGRAMS, VOLUNTEER EXPERIENCE, CERTIFICATES, LICENSES, COMPUTER COURSES, ETC.)**

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**IF YOU ARE APPLYING FOR ANY POSITION THAT REQUIRES DRIVING  
PLEASE FILL OUT THIS SECTION**

Do you have a valid Georgia Drivers License? Yes ( ) No ( ) If yes, give license # \_\_\_\_\_

How many reportable accidents have you had in the past 5 years? \_\_\_\_\_

How many moving violations have you had in the past 5 years? \_\_\_\_\_

**NOTE: IF YOU ARE SELECTED FOR AN INTERVIEW, YOU WILL NEED TO BRING A COPY OF YOUR MOTOR VEHICLE REPORT THAT IS NO MORE THAN TWO WEEKS OLD.**

I certify all information given on this application and any supporting information is true and complete and I authorize a complete investigation. I agree that, if hired, I may be discharged if

