

# BARNETT SOUTHERN CORPORATION

P.O. Box 704, Washington, Georgia 30673 Phone: 706-678-1507 Fax: 706-678-1697

## APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, gender, religion, national origin, age, marital or veteran status, mental or physical disability unrelated to job performance or any other legally protected status.

POSITION APPLYING FOR: \_\_\_\_\_ DATE: \_\_\_\_\_

<b>PERSONAL INFORMATION</b>	
Legal Name: First _____ Last _____ Middle Initial _____	
Address: Street _____	
City _____ State _____ Zip _____	
Phone: Home _____ Other _____	
E-mail _____ Social Security No. _____	
Driver's License No. _____ State _____ <small>(If position requires operation of a company vehicle)</small>	
Are you legally eligible for employment in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If hired, can you furnish proof that you are eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain circumstances: _____ _____	
Are you at least 18 years old?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<small>Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.</small>	

<b>POSITION INFORMATION</b>	
Position(s) applying for: _____ Salary desired: \$ _____	
Employment status desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	
If hired, when could you start? _____	
How did you hear about this job? _____	

## EMPLOYMENT HISTORY *(Most recent first)*

<b>1. Job Title:</b>		<b>Duties:</b>	
Employer:			
Dates of Employment (month/year)			
From:	To:		
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp	
Employer's Address:			
Supervisor:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:
Reason for Leaving:			
<b>2. Job Title:</b>		<b>Duties:</b>	
Employer:			
Dates of Employment (month/year)			
From:	To:		
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp	
Employer's Address:			
Supervisor:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:
Reason for Leaving:			
<b>3. Job Title:</b>		<b>Duties:</b>	
Employer:			
Dates of Employment (month/year)			
From:	To:		
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp	
Employer's Address:			
Supervisor:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:
Reason for Leaving:			
<b>4. Job Title:</b>		<b>Duties:</b>	
Employer:			
Dates of Employment (month/year)			
From:	To:		
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp	
Employer's Address:			
Supervisor:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:
Reason for Leaving:			

## EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION	DATES ATTENDED	DEGREE RECEIVED	SUBJECTS STUDIED	DID YOU GRADUATE?
High School					
College / University					
Graduate School					
Tech School					
Other					

Special courses, training or experience acquired, including military experience: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## SKILLS

Clerical / Office Skills			
Computer Skills	Name of software:	<input type="checkbox"/> PC	<input type="checkbox"/> MAC <input type="checkbox"/> WPM
Languages			
Other Special Knowledge or Skills			

Please describe any other experience, abilities or skills that might be helpful in considering your application: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*Please list 3 references, not relatives or former employers.*

## REFERENCES

NAME	ADDRESS	PHONE

**PLEASE READ AND SIGN THE BACK OF THIS APPLICATION BEFORE SUBMITTING.**

## CERTIFICATION & AUTHORIZATION

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or omissions of facts in this application (whether intentional or un-intentional) are grounds for disqualification from further consideration or, if hired, immediate termination.

I authorize Barnett Southern Corporation to check all references from current and previous employers and any person listed as a reference on this application that may be relevant to my employment or my ability to perform the job for which I applied. I authorize the company to verify any of the information furnished in this application including, but not limited to, criminal history and driving records. I authorize all persons, schools, companies and law enforcement authorities to release any information concerning my background that may be relevant to evaluation of this application and I hereby release any such persons, schools, companies and law enforcement authorities from any liability for damages whatsoever for issuing this information to this company and/or its agents.

If employed, I agree to conform to the rules, regulations and policies of the company. I understand that I will be an employee "at-will" and either the company or I may terminate my employment relationship at any time for any reason not in violation of law. At no time shall any oral statement by the management of Barnett Southern Corporation be construed as giving rise to or creating a contract of employment between Barnett Southern Corporation and me or any other employee, or otherwise alter or modify the "at-will" nature of the employment relationship.

I understand that Barnett Southern Corporation prohibits the use and possession of controlled substances and/or alcohol on its premises. As required by the company's policies, I am willing to submit to drug and alcohol testing to detect the use of illegal drugs or alcohol prior to and during employment.

I hereby acknowledge that I have read and fully understand the forgoing and seek employment under these conditions.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

## OFFICE USE ONLY

**Date of Review:** \_\_\_\_\_

**Reviewed by:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Accepted**     **Rejected**     **Deferred**