



# Applicant Information

Please read the following information before completing your application. A separate application form is required for each position title.

## Completing the Application

**IMPORTANT:** Do you have a (1) relative(s) (see definition below) or (2) a person(s) living in the same household who is currently working in the same City department in which you are seeking employment? Yes \_\_\_ No \_\_\_ (Check the correct response). If the answer is “yes” please list the name of the relative(s) or person(s) living in the same household and his/her relationship if a relative:

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**Definition of “relative”: is defined to include spouse, parents, children, brothers, sisters, brothers-in-law and sisters-in-law, fathers-in-law and mothers-in-law, stepparents, stepbrothers, stepsisters, stepchildren, grandparents and grandchildren.**

Follow all instructions shown on the application. If you need more space attach additional sheets. All applications, including those for promotional and transfer positions, must be completed IN FULL. A resume may be attached to provide additional information but DOES NOT take the place of completing the application itself. A complete and accurate application is essential since this is the primary source used for determining your qualifications. Failure to record both month and year of previous work history will result in minimum credit.

Please be advised that resumes, letters of reference, etc., submitted with your application become the property of the City of Franklin and cannot be returned.

## Advertising Vacancies

Vacant positions are posted and/or advertised when employment availability occurs. You may also call (757) 562-8508, between the hours of 8:30 a.m. – 5:00 p.m. for information on current vacancies. Applications are accepted Monday-Friday, 8:30 a.m. – 5:00 p.m.

## Job Requirements

Please note the educational and/or experience requirements listed in the employment advertisements for the jobs that interest you. These are minimum standards, which all applicants must meet in order to be considered for employment.

## **Employment Policy**

It is our policy that employment decisions are made on the basis of merit and fitness for the position. We are an Equal Opportunity Employer. All employees are required to provide proof of identity and authorization of employability at the time of appointment.

## **Applicant Procedure**

### *Vacant Positions*

- A completed City of Franklin Application for Employment must be received by the established closing date as stated in the employment advertisement.
- If the position requires a test, you will be notified as to the date, time, and place to appear.
- Every application received by the established closing date is reviewed for minimum qualifications and completeness by City staff. Should you meet the requirements for the position, your name will be placed on a register of eligible candidates.
- Should you wish to inquire about the status of your application, you may email or call our office at the address or phone number below.
- Shortly after receipt of your application, you will be notified regarding its status. Time intervals may vary depending on the volume of applications received and the screening process involved with a particular position.

### *Interviews*

- Hiring departments hold interviews with applicants who are referred by the Human Resources Department. Persons selected for an interview will be notified by the Human Resources Department.
- After the interviews, the hiring department will make a selection and return all applications to the Human Resources Department.
- The hiring department and/or Human Resources will notify all candidates of the hiring department's decision.

Your interest in the city of franklin employment is appreciated. Should you have a change of address or phone number, or a question regarding your current status, please contact us at:

### **City of Franklin**

#### **Human Resources Department**

**207 West Second Avenue**

**Franklin, VA 23851**

**(757) 562-8508**

**[jobs@franklinva.com](mailto:jobs@franklinva.com)**



Qualified applicants are considered for all positions without regard to race, color, religion, gender, national origin, political affiliation, age, Veteran's status, marital status or a non-job-related medical condition or disability.

## City of Franklin Application for Employment

Position Applied for: \_\_\_\_\_ Date of Application: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
                    Last                      First                      Middle

Address: \_\_\_\_\_  
                    Street                      City                      State                      Zip Code

Telephone # (\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Are you legally authorized to work in the United States?                      Please Check:       Yes       No

If offered employment with the City of Franklin, can and will you provide documentation that you are legally authorized to work in the United States.                      Please Check:       Yes       No

If you have been in the armed services, please set forth which branch, how long and final rank:

\_\_\_\_\_

If you are under 18, can you furnish a work permit? \_\_\_\_\_

Have you submitted an application to the City of Franklin before?       Please Check:       Yes       No

If yes, give approximate date and position applied to. \_\_\_\_\_

Have you been employed by the City of Franklin before?                      Please Check:       Yes       No

If yes, give approximate date of hire and separation from service \_\_\_\_\_

If it is necessary to call you, where is the best place to call? \_\_\_\_\_

Will you work overtime if the position which you applied for requires it? \_\_\_\_\_

If driving is required in the position you applied for – Driver's License No. \_\_\_\_\_

**Please check**

**one:** Operator License: \_\_\_\_\_ Commercial (CDL): \_\_\_\_\_ Class: \_\_\_\_\_ Endorsements: \_\_\_\_\_

If you answer “Yes” to any of the questions below, please use the box provided to give a detailed explanation. **For questions regarding court actions**, state the charge, the date of the charge, the court action, and the address of the court involved.

Check “Yes” or “No” to the following questions:

Have you ever been dismissed from an employment position?	Yes	No	
Have you ever been asked to resign from employment?	Yes	No	

**Education History**

School Name	City, State	Course Study	Degree/Date

If you do not have a high school education, do you have a GED? Please Check: Yes No

If yes, date obtained: \_\_\_\_\_

## Employment History

Chronologically state your occupation or employment for the past ten (10) years (use back if necessary)

<b>Company</b> (Name & Address & Telephone Number)		<b>Job Title</b>	
<b>Name of Supervisor</b>		<b>May we contact this employer?</b>	Yes                      No
<b>Responsibilities</b>			
<b>Dates of Employment</b>		<b>Reason for Leaving</b>	
<b>From</b>	<b>To</b>		
<b>Company</b> (Name & Address & Telephone Number)		<b>Job Title</b>	
<b>Name of Supervisor</b>		<b>May we contact this employer?</b>	Yes                      No
<b>Responsibilities</b>			
<b>Dates of Employment</b>		<b>Reason for Leaving</b>	
<b>From</b>	<b>To</b>		
<b>Company</b> (Name & Address & Telephone Number)		<b>Job Title</b>	
<b>Name of Supervisor</b>		<b>May we contact this employer?</b>	Yes                      No
<b>Responsibilities</b>			
<b>Dates of Employment</b>		<b>Reason for Leaving</b>	
<b>From</b>	<b>To</b>		

Explain any gaps of three (3) months or more in your employment:

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### **Skills and Qualifications**

Describe any special training, skills, licenses or certifications that may assist you in performing the position for which you are applying:

If you have computer skills, please indicate what skills you have and what software(s) you are proficient in the use of:

### **Other Job-Related Information**

Set forth below any other job-related information that you would like the City to know about you:

## References

Please provide the names and contact information of three (3) references. At least one reference must be from a current/former supervisor. Please do not list relatives as references. Your references will be contacted through email and/or by telephone.

<b>Name:</b> _____
<b>Company:</b> _____
<b>Reference's Job Title:</b> _____
<b>Telephone Number:</b> _____
<b>Email Address:</b> _____
<b>Was/is this person your supervisor?</b> <b>Yes</b> <b>No</b>

<b>Name:</b> _____
<b>Company:</b> _____
<b>Reference's Job Title:</b> _____
<b>Telephone Number:</b> _____
<b>Email Address:</b> _____
<b>Was/is this person your supervisor?</b> <b>Yes</b> <b>No</b>

<b>Name:</b> _____
<b>Company:</b> _____
<b>Reference's Job Title:</b> _____
<b>Telephone Number:</b> _____
<b>Email Address:</b> _____
<b>Was/is this person your supervisor?</b> <b>Yes</b> <b>No</b>

## CERTIFICATE OF APPLICANT

I understand that as a condition of employment with the City of Franklin, I will be required to undergo and successfully complete a test for the presence of illegal drugs and a psychological test. I hereby consent to undergo such tests. In addition, I hereby authorize the City to contact past employers, educational institutions, licensing authorities, personal and business references, etc. and to make any other investigation pertinent to my employment.

If this is an application for employment as a department head, I also consent to take a physical examination.

If this is an application for employment in the Police Department or Fire and Rescue Department, I also consent to take a physical examination and fitness test.

If this is an application for employment in the Police Department, I also authorize the City to conduct name search, social security, date of birth and fingerprint based criminal history record inquiry through the Federal Bureau of Investigation and/or the Central Criminal Records Exchange (and for sworn officers and animal control officers a driver's license check through the Division of Motor Vehicles).

**All tests, examinations, background checks and criminal history inquiries shall be at the expense of the City.**

If I am hired, I understand that I am free to resign at any time and that the City reserves the right to terminate my employment at any time. An offer of employment made to me does not constitute a contract of employment for a specified period of time and that I will be in a probationary status for a period of one (1) year, during which time I must demonstrate my suitability for continued employment with the City.

I hereby certify that all the statements made in this application are true to the best of my knowledge and belief. I agree and understand that any false statement(s) of material facts herein, regardless of time of discovery, shall be sufficient cause for refusal of employment or dismissal.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE CERTIFICATE OF APPLICANT.**

Signature \_\_\_\_\_

Date \_\_\_\_\_