



RANGER I/WILDLAND FIREFIGHTER - 17302

GEORGIA FORESTRY COMMISSION

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Type or print clearly in ink and sign this application - if not, the application will be returned.

BIOGRAPHICAL DATA

Daytime Phone Number				Alternate Phone Number				Email Address			
-	-										
Last Name				First Name				Middle Initial			
Street 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 State citizenship or authorization to work in this country, leaving previous State employment under good circumstances, and for some jobs, not having been convicted of a felony. Please answer the following questions. **If you answer yes to a question in a shaded box, attach an explanation.**

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	3. Have you ever been dismissed from any State of GA government position? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Have you ever been convicted of a felony? <input type="checkbox"/> YES <input type="checkbox"/> NO
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SKILLS AND EXPERIENCE (Check any which apply to you.)

Driving License	Heavy Equipment	Truck Driving	Mechanic	Computer	Trade
Commercial? <input type="checkbox"/> A <input type="checkbox"/> <input type="checkbox"/> B <input type="checkbox"/> <input type="checkbox"/> C <input type="checkbox"/> License No.: _____ Issuing State: _____	<input type="checkbox"/> Crawler <input type="checkbox"/> Farm Equipment <input type="checkbox"/> Backhoe/Loader <input type="checkbox"/> Other	<input type="checkbox"/> Tractor/Trailer <input type="checkbox"/> Straight Truck Single Axle <input type="checkbox"/> Straight Truck Tandem <input type="checkbox"/> Other	<input type="checkbox"/> Preventive <input type="checkbox"/> Replace Parts <input type="checkbox"/> Rebuild Engines <input type="checkbox"/> Rebuild Transmissions <input type="checkbox"/> Other	<input type="checkbox"/> Word <input type="checkbox"/> Excel <input type="checkbox"/> Outlook <input type="checkbox"/> Internet/Intranet <input type="checkbox"/> Other	<input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Carpentry <input type="checkbox"/> Masonry <input type="checkbox"/> Welding <input type="checkbox"/> Tig <input type="checkbox"/> Mig <input type="checkbox"/> Other

VETERAN'S PREFERENCE

If you want to apply for Veteran's Preference, check the type below and attach copies (which cannot be returned) of the documents to your application.

X	Type of Veteran's Preference	Required Documents
	VETERAN	DD214 showing dates of service
	DISABLED VETERAN	Certificate of service-connected disability from V. A. dated within the last 6 months; DD214
	VETERAN'S WIDOW	DD214; marriage and death certificates
	DISABLED VETERAN'S WIFE	Disabled veteran's documents dated within last 6 months; DD214; veteran must have 100% disability

CERTIFICATION - READ CAREFULLY BEFORE SIGNING

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 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.

I authorize the Georgia Forestry Commission to run a three-year motor vehicle report on my license number and a criminal background check on me at any time during the hiring process or during any subsequent employment.

Signature _____ Date _____

DRIVER'S LICENSE INFORMATION

By completing the Driver's License information below, you authorize the Georgia Forestry Commission to obtain a 3-year Motor Vehicle Report for the purpose of examining your license status and driving history to determine your fitness for operating commercial class vehicles on behalf of the Georgia Forestry Commission.

We will only process MVRs for applicants who are invited to interview. The processing cost for the MVR is \$3.00. This fee is payable at the time of interview (cash only with exact change). If you prefer to bring your own MVR, it must be current (no more than 30 days prior to interview date). Interviews will not be granted without fee payment or current MVR.

MVR reports can be obtained at most State Patrol Posts and at any Department of Driver Services Office for a cost of \$5.00.

DRIVER'S LICENSE INFORMATION (information must be exactly as it appears on the Driver's License):

First Name	Last Name	Date of Birth	License #

INSTRUCTIONS

To qualify for the Ranger 1 job you **must** complete an ACT WorkKeys assessment in the following three categories: **"Locating Information," "Reading for Information,"** and **"Applied Mathematics."** You must score level 3 out of a possible 6 on the Locating Information assessment, level 3 out of a possible 7 on the Reading for Information assessment, and level 4 out of a possible 7 on the Applied Mathematics to be considered for interviews.

The ACT WorkKeys skills assessments can be completed at any of Georgia's many Technical Colleges. Most Technical Colleges are offering the assessments on a "walk-in" basis; please contact your local Technical College for information about the days and times that they offer the WorkKeys assessments, or visit the following website for testing locations and schedules: www.gaworkready.org. You will need to allow approximately one hour for each assessment, you will receive your scores upon completion of the assessment. The three mandatory assessments are **free**, however if you wish to take any additional assessments (not required) there is a \$15.00 charge for each additional assessment.

When you arrive at the Technical College for your assessments you must inform them that you are taking **three** assessments: **Locating Information, Reading for Information, and Applied Mathematics.**

Once you have completed the assessments and have obtained at least the minimum score for each of the three categories, you will need to forward a copy of the assessment scores along with a Ranger 1 employment application to the county Forestry unit where you are applying.

KEEP A COPY OF THIS APPLICATION. The employing agency may require a copy of pages 1 and 2 at time of interview. Do not submit originals of permanent, personal documents. They cannot be returned and this application cannot be returned. Legible photocopies of this application and attachments, if any, are acceptable.

Completed Applications Must Be Mailed To County Unit or District Office Address

EQUAL EMPLOYMENT OPPORTUNITY MONITORING INFORMATION

The information you give on this page is used by State Merit System and other state agencies for the purpose of complying with Federal guidelines for monitoring the equal employment opportunity efforts of the State of Georgia. This information is not used as part of the hiring criteria of the State. It is intended that prior to your application being reviewed by the hiring manager, this page will be separated from the rest of the application.

Please complete each block in this section.

Social Security Number	Last Name	First Name	MI						
<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>									
Race/Ethnic Background (Check One)		Gender (Check One)	Birth Date						
1. <input type="checkbox"/> Native American 4. <input type="checkbox"/> Black, not of Hispanic origin	2. <input type="checkbox"/> White, not of Hispanic origin 5. <input type="checkbox"/> Asian/Pacific Islander		3. <input type="checkbox"/> Hispanic 6. <input type="checkbox"/> Multi-racial	<input type="checkbox"/> Male <input type="checkbox"/> Female					
			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">MO</th> <th style="width: 33%;">DAY</th> <th style="width: 33%;">YR</th> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </table>	MO	DAY	YR			
MO	DAY	YR							

**GEORGIA FORESTRY
COMMISSION**



(1) Fill out application completely. (2) Print or type county unit or district office mailing address from page four and your return address in blanks below. (3) Fold on dotted line and tape closed. (4) Attach postage and mail.

Post Office
will not deliver
without proper
postage.

_____, Georgia _____

WORK HISTORY (Continued)

Employer		Job Title		
Address		From (mo./yr.)	To (mo./yr.)	Hours/week
City	State	Zip Code	Check One: <input type="checkbox"/> Paid <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern	
Supervisor's Name and Title		Supervisor's Phone #	May We Contact? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Reason for Leaving		Annual Salary	# and type of employees you supervised	

%	Describe in detail your job duties and the average percent of work time you spent on each duty.
100%	

Employer		Job Title		
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City	State	Zip Code	Check One: <input type="checkbox"/> Paid <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern	
Supervisor's Name and Title		Supervisor's Phone #	May We Contact? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Reason for Leaving		Annual Salary	# and type of employees you supervised	

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100%	

Note: For additional work history, please photocopy this page or attach the required information on a separate sheet of paper.