

# Application for Employment



Central Mississippi Planning & Development District Inc.  
 Post Office Box 4935 • Jackson, Mississippi 39296-4935  
 (601) 981-1511

Name \_\_\_\_\_  
LAST FIRST M.I.

Address \_\_\_\_\_  
CITY STATE ZIP CODE

Social Security Number \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Position Applied For \_\_\_\_\_

Expected Pay Level Desired \_\_\_\_\_

Expected Start Date \_\_\_\_\_

## ATTACHMENT(S)

- Resume'
- Recommendation(s)
- Applicant Interview
- License(s)
- Certification(s)

Are you of legal age to work? Y N

Are you legally eligible to work in the U.S.? Y N (If yes, proof is required)

Special skills of benefit for the position applied for:  
 (Computer, machines, etc.) (Special study or research work)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Educational Background

	Name & Location of School	Did you Graduate?	Degree Attained or Diploma	Course of Study
Grammar School	_____	_____	_____	_____
High School	_____	_____	_____	_____
College or University	_____	_____	_____	_____
Vocational or Training School	_____	_____	_____	_____
Continuing Education	_____	_____	_____	_____

List Field(s) of work for which you are licensed, registered, or certified giving dates and sources of issuance.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Previous Employment History

Place an X by the employer(s) you do not want us to contact. Please list most recent employer first.

1. Company Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_  
 Address \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Supervisor Name \_\_\_\_\_  
 Position Held \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.  
 Reason for Leaving \_\_\_\_\_ Last Wage Rate \_\_\_\_\_

2. Company Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_  
 Address \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Supervisor Name \_\_\_\_\_  
 Position Held \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.  
 Reason for Leaving \_\_\_\_\_ Last Wage Rate \_\_\_\_\_

3. Company Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_  
 Address \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Supervisor Name \_\_\_\_\_  
 Position Held \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.  
 Reason for Leaving \_\_\_\_\_ Last Wage Rate \_\_\_\_\_

4. Company Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_  
 Address \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Supervisor Name \_\_\_\_\_  
 Position Held \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.  
 Reason for Leaving \_\_\_\_\_ Last Wage Rate \_\_\_\_\_

Reference: Give below three persons not related to you, whom you have known at least one (1) year, who would speak to your qualifications.

<u>Name</u>	<u>Address</u>	<u>Business</u>	<u>Years Acquainted</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Certification

I hereby certify this application contains no willful misrepresentation(s), omissions, or falsifications, and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any misrepresentation, omission, or falsification, my eligibility for the position I am seeking may be revoked and/or my employment terminated at any time.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**INVESTIGATIVE/CONSUMER  
AUTHORIZATION REPORT RELEASE**

CENTRAL MISSISSIPPI PLANNING AND DEVELOPMENT DISTRICT, INC.

To Whom It May Concern:

I hereby authorize and request any present or former employer, school, credit agency, financial institution, law enforcement agency, city, state, county and federal court and agency, military service or other persons having personal knowledge about me to furnish bearer with any and all information in their possession regarding me in connection with an application for employment. I am willing that a photocopy of this authorization be accepted with the same authority as the original and I specifically waive any written notice from any present or former employer who may provide information based upon this authorized request. I understand this authorization is to be part of the written employment application, which I sign.

I have been given a stand-alone consumer notification that a report will be requested and used for the purpose of evaluating me for employment, promotion, reassignment or retention as an employee.

Date \_\_\_\_\_

Print Applicant's Name \_\_\_\_\_

Maiden or Former Name \_\_\_\_\_

Signature \_\_\_\_\_

*For Identification Purposes Only:*

Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

Driver's License Number \_\_\_\_\_

Professional License State \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

Current Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

Employer: Certifies that the secured report(s) is/are for valid job related inquiry only.  
The information will be kept confidential.

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

Authorized Signature: \_\_\_\_\_

Title

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you - such as if you pay your bills on time or have filed for bankruptcy - to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681 - 1681u, at the Federal Trade Commission’s web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

**\* You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you - such as denying an application for credit, insurance, or employment - must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.

**\* You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently.** There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.

**\* You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs to which it has provided the data - of any error). The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA’s investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement filed, you may ask that anyone who has recently received your report be notified of the change.

**\* Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, a CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address, and phone number of the information source.

**\* You can dispute inaccurate information with the source of the information.** If you tell anyone - such as a creditor who reports to a CRA - that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

**\* Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.

**\* Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA - usually to consider an application with a creditor, insurer, employer, landlord, or other business.

**\* Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.

**\* You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.

**\* You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

For Questions or Concerns regarding:	Please contact:
CRAs, creditors, and others not listed below	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580 202-326-3761
National banks, federal branches/ agencies of foreign banks	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks	Office of Thrift Supervision Consumer Programs Washington, DC 20552 800-842-6929
Federal credit unions	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051