



CITY OF CHILICOTHE



APPLICATION FOR INFORMATION TECHNOLOGY SPECIALIST

Application Period:

A fully-completed application is required for consideration;
Resume may be submitted along with the application.

Submit application & supplements by email to HR@chillicotheoh.gov

APPLICANT INFORMATION

Full Name (First/MI/Last) _____

Email: _____ Phone: _____

Home Address: (Street Number/Name) _____

City, State, Zip Code: _____

WORK HISTORY:

Current/Most Recent Employer: _____ Position: _____

Location: (Address/City/State) _____

Dates of Employment: From _____ to _____ Reason for Leaving _____

Previous Employer: _____ Position: _____

Location (Address/City/State): _____

Dates of Employment: From _____ to _____ Reason for Leaving _____

Other Related Work Experience (Employer/Position/Dates):

1. _____

2. _____

3. _____

EDUCATION:

Degree or Certification: _____

School or University: _____

Other Certifications: _____

MILITARY CREDIT:

Do you wish to receive Military Credit Yes _____ No _____

A legible copy of DD214 showing Discharge under Honorable Conditions must be submitted with application.

PLEASE DESCRIBE HOW YOU MEET THE FOLLOWING ESSENTIAL JOB FUNCTIONS FOR THE POSITION:

1) Providing daily operations and systems training, troubleshooting and supporting employees in person, remotely and via phone and email (max 1000 characters):

2) Knowledge of databases, firewalls, routers, telecommunications, server operating systems, infrastructure design, security methodologies, access control, wireless, fiber optic network, mobile computing and server visualization (max 1000 characters):

3) Defining problems, collecting data, establishing facts, drawing valid conclusions and developing appropriate recommendations to resolve identified problems (max 1000 characters):

4) Maintaining detailed records, work-logs and preparing various reports (max 850 characters):

5) Time-management, multi-tasking and prioritizing a varied work load (max 850 characters):

6) Other related training/experience/etc. you would like to have considered (max 850 characters):

EMPLOYMENT ELIGIBILITY & RELEASE OF INFORMATION

Are you a U.S. citizen or legally authorized to work in the U.S.? Yes _____ No _____
(Verification must be provided which establishes both identity and work authorization)

Are you able to meet the physical & mental demands of the position with/without reasonable accommodation? Yes _____ No _____

Do you have a valid Driver's License and do you expect that your driving record would allow insurability under the City of Chillicothe's fleet insurance? Yes _____ No _____

Do you fully understand that for up to 90 days of your employment, beginning with the first date you perform your job responsibilities, you will be on probation, which means that your continued employment will be at the discretion of the City of Chillicothe? Yes _____ No _____

I understand:

The position of I.T. Specialist is subject to pre-employment drug & alcohol testing and random testing under the City's Drug-Free Safety Program and consent to such testing. Please initial _____

The position may require occasional evenings, overnight travel, weekends, holidays or emergency call-ins: Please initial _____

I certify that the information contained in this application and all supporting documents are correct, to the best of my knowledge, and understand that falsification of employment records is grounds for dismissal regardless of the date such falsification is discovered. I authorize the City of Chillicothe to make any investigation it considers necessary in consideration of employment.

Applicant's Signature: _____ Date: _____

The City of Chillicothe is an Equal Opportunity Employer