B. <u>RESIDENCES</u> – List all addresses where you have lived during the past five (5) years, beginning with your current address. List dates by month and year. Attach extra pages if necessary.

FROM	ТО	ADDRESS (include City/State/Zip)
2017	2020	Brunswick GA 31525
2020	2022	Brunswick GA 31525
2022	2023	Brunswick GA 31525
2000		

C. WORK HISTORY – Beginning with your present or most recent job, <u>list all employment since the age of 16, including part-time, temporary, or seasonal employment</u>. Include all periods of unemployment and explain any gaps in your employment history. Attach extra pages if necessary.

FROM: 2019 TO: Present				
EMPLOYER: Dynamic Land Scape				
ADDRESS (include City/State/Zip): 3731 Cypress Mill Rd Brunswick GA 31525				
PHONE NUMBER:	EXTENTION:			
JOB TITLE: twnex				
DUTIES: Oversee operations, oversee	financials			
NAME OF A CO-WORKER: Jacob Boat right				
SUPERVISOR'S NAME: Brace Susser				
PHONE NUMBER: ()	EXTENTION:			
DID YOU VOLUNTARILY RESIGN OR WERE YOUR TERMINATED? INCLUDE EXACT DETAILS				

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FROM: 6/2018 TO: 7/2018			
EMPLOYER: Brunswick Police dert.			
ADDRESS (include City/State/Zip):			
206 Mansfield St. Brunswick GA 31525			
PHONE NUMBER: (
JOB TITLE: POI			
DUTIES:			
NAME OF A CO-WORKER:			
SUPERVISOR'S NAME:			
PHONE NUMBER: () EXTENTION:			
DID YOU VOLUNTARILY RESIGN OR WERE YOUR TERMINATED? INCLUDE EXACT DETAILS			
Terminated - was terminated while on new hire Probation due to an arrest, Uno conviction			
resulted from arrest)			

(3)

FROM: ZOLL TO: ZOLZ
EMPLOYER: Glynn County Sherrifs Office
ADDRESS (include City/State/Zip):
100 Sulphur Springs Brunswick GA 31525
PHONE NUMBER: EXTENTION:
JOB TITLE: Detention officer
DUTIES: Daily Jail operations, Professionally handling Immates,
NAME OF A CO-WORKER:
SUPERVISOR'S NAME: Judy Louse
PHONE NUMBER: EXTENTION:
DID YOU VOLUNTARILY RESIGN OR WERE YOUR TERMINATED? INCLUDE EXACT DETAILS
Voluntarily Resign to attend police academy

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FROM: 7:013	TO: 7014				
EMPLOYER: Capt. Joes Seafood					
ADDRESS (include City/State/Zip):					
No longer opened					
PHONE NUMBER: ()	EXTENTION:				
JOB TITLE:	·				
DUTIES:					
NAME OF A CO-WORKER:					
SUPERVISOR'S NAME:					
PHONE NUMBER: ()	EXTENTION:				
DID YOU VOLUNTARILY RESIGN OR WERE YOUR TERMINATED? INCLUDE EXACT DETAILS					
No longer opend					

(5)

FROM:	TO:				
EMPLOYER:					
ADDRESS (include C/S/Z):					
PHONE NUMBER: ()	EXTENTION:				
JOB TITLE:					
DUTIES:					
NAME OF A CO-WORKER:					
SUPERVISOR'S NAME:					
PHONE NUMBER: ()	EXTENTION:				
DID YOU VOLUNTARILY RESIGN OR WERE YOUR TERMINATED? INCLUDE EXACT DETAILS					