

Town of Pinetops APPLICATION FOR EMPLOYMENT (Please Print)

BE SURE TO GIVE ACCURATE AND COMPLETE INFORMATION. FAILURE TO DO SO MAY RESULT IN THE REJECTION OF YOUR APPLICATION. IT IS IMPORTANT THAT YOU FILL OUT ALL SECTIONS OF THIS APPLICATION COMPLETELY AND TO THE BEST OF YOUR ABILITY. YOUR APPLICATION WILL BE USED AS A PART OF THE EVALUATION PROCESS AND, THEREFORE, SHOULD REPRESENT YOUR BEST EFFORT. YOU MAY ATTACH A RESUME, BUT THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.

Current Information				
Position applied For _____			Date _____	
When will you be available for employment? _____				
Are you seeking:	Full time	Part time	Summer Work	
NAME _____	Last	First	Middle	
ADDRESS _____				
Street & No. or P. O. Box		City	State	Zip
TELEPHONE (____) _____		(____) _____		E-mail Address
Home		Business		
DRIVER LICENSE NO. _____ STATE _____ SOCIAL SECURITY NO. _____				

General Information			
a.	Have you ever been employed with the Town of Pinetops	YES	NO

b.	Are you related by blood or marriage to any Town employee? If yes, give name, and relationship	YES	NO

c.	Have you ever been convicted of a misdemeanor or felony? If yes, please explain	YES	NO

NOTE: A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, how recent the offense was, and nature of the crime will be taken into consideration			
e.	Are you willing to work overtime?	YES	NO
	Nights	YES	NO
	Week-ends	YES	NO
	Holidays	YES	NO

Town of Pinetops Post Office Drawer C Pinetops, NC 27864

Phone # 252-827-4435

EMPLOYMENT

Record your complete work history in the spaces below. Begin with your current or most recent employer first. Attach as many sheets as is necessary to account for your full record. Be sure to account for gaps in your employment history. Related volunteer experience should also be listed.

A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title _____ Starting Salary _____ Last Salary _____
Name and title of supervisor _____ No. of employees you supervise _____
Employer or company _____
Address _____
Date Employed ____/____/____ Date Separated ____/____/____ Telephone (____) _____
Main Duties: _____
Full-time Years ____ Months ____ Part-time Years ____ Months ____
Reason for leaving _____
If part-time, number of hours worked per week _____
If currently employed, may we inquire of this employer about your qualifications and character? YES No

B. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title _____ Starting Salary _____ Last Salary _____
Name and title of supervisor _____ No. of employees you supervise _____
Employer or company _____
Address _____
Date Employed ____/____/____ Date Separated ____/____/____ Telephone (____) _____
Main Duties: _____
Full-time Years ____ Months ____ Part-time Years ____ Months ____
Reason for leaving _____
If part-time, number of hours worked per week _____

C. NEXT RECENT EMPLOYMENT (or explain gap in employment)

Job Title _____ Starting Salary _____ Last Salary _____
Name and title of supervisor _____ No. of employees you supervise _____
Employer or company _____
Address _____
Date Employed ____/____/____ Date Separated ____/____/____ Telephone (____) _____
Main Duties: _____
Full-time Years ____ Months ____ Part-time Years ____ Months ____
Reason for leaving _____
If part-time, number of hours worked per week _____

REFERENCES

List three (3) persons living in the United States who are not related to you and who have a definite knowledge of your ability to perform the job for which you are applying. **DO NOT REPEAT NAMES OF SUPERVISORS**

(1) Name _____ Address _____
Telephone (____) _____

(2) Name _____ Address _____
Telephone (____) _____

(3) Name _____ Address _____
Telephone (____) _____

Pre-Employment Authorization (Read Carefully)

I certify that, to the best of my knowledge and belief. The information given truly represents my background and experience. I understand that if I have knowingly misrepresented or falsified any of the application information I may be disqualified for employment consideration or dismissed from employment with Town Of Pinetops.

I authorize my former employer to give any information regarding my employment. I have authorized them to release my records and discuss my work performance with representatives of the Town of Pinetops who are investigating the response provided herein.

I understand that proof of my eligibility for employment in the United States must be furnished before I begin work with the Town of Pinetops.

I understand that North Carolina state law requires male applicants for employment, 18 to 26, to register for military service. By signing below I certify that I am in compliance with state law.

I understand that my social security number will be kept confidential and used only in accordance with federal, state and local laws.

I understand that a pre-employment drug screening is required.

Signature _____ Date _____

FOR DEPARTMENTAL USE ONLY

APPLICANT INFORMATION FORM

The Town of Pinetops is an Equal Opportunity Affirmative Action Employer. We need this information to comply with reporting requirements of the Equal Employment Opportunity Commission. This form will be separated from your employment application and will not be used in any way in our selection process or for any personnel action following employment.

NAME: _____ DATE: _____
Last First Middle

SEX: Male Female YOUR AGE CATEGORY: 14 or older 18 or older
 40 or older 65 or older

- ETHNIC CATEGORY**
- White (Not Hispanic) Origins in Europe, North Africa, the Middle East, or the Indian Subcontinent.
 - Black (Not Hispanic) Origins in any of the Black or African-American racial groups.
 - Hispanic Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Cultures or groups, regardless of race.
 - Asian or Pacific Islanders Origins in the Far East, Southeast Asia, or the Pacific Islands.
 - American Indian or Alaskan Native Origins in the original peoples of North America.

We need the following information to help us evaluate the effectiveness of our recruitment program.
HOW DID YOU LEARN OF THIS OPENING (Please check all which apply)

- Newspaper (which one?) _____
- Professional Magazine or Newsletter (which one?) _____
- Employment Security Commission (which city) _____
- Radio (which station) _____
- TV (which station?) _____
- Internet (Which site) _____
- Career/Job Fair(specify) _____
- Other _____