

PO Box 1459 Winterville, NC 28590 humanresources@wintervillenc.com

Town of Winterville Employment Application

PERSONAL INFORMATION			Date					
Name LAST	FIRST	MID	DLE					
Present Address								
	TREET	CITY	STATE	ZIP				
How long at present address?	Home Phone No _		Office Phone No					
Former Address								
	TREET	CITY	STATE	ZIP				
Do you have a valid driver's license	? Yes No Driver'	s License No	ClassState					
Is this a Commercial Driver's Licens	se (CDL)? Yes No)						
Since turning 18 years of age, have	you been convicted of a m	isdemeanor or felo	ny, other than minor traffic vi Yes	olations? No				
**(NOTE: Each conviction will be judge	d in relation to time, seriousr	ess and circumstanc		-				
If yes, please list the conviction(s) a	and date(s)							
Are you legally authorized to work	in the U.S.? Yes N	lo						
EMPLOYMENT DESIRED								
Would you work full-time par	t-time Specify days	and hours if part-t	ime					
Would you accept a position involv	ing shift work? Yes	No OR stand-by?	Yes No					
Job(s) applied for 1			Rate of pay expected \$					
2			Rate of pay expected \$					
How did you learn of this opening?								
Are you employed now? Yes N	o If yes, may we contact y	our employer rega	arding your record of employn	nent? Yes No				
Have you worked for us before?	Yes No If yes, when	?						
Have you ever been dismissed or for automatically disqualify you)								
List any relatives working for us and their relationship to you		(Nar	nes)					

REFERENCES: List four persons who are not related to you and who have definite knowledge of your qualifications and fitness for the positions for which you are applying. Do not list names of supervisors you will list under employment record.

	NAME	ADDRESS	TELEPHONE
1.			
2.			
3.			
4.			

MILITARY INFORMATION

If you are	a male	Yes	No			
Veteran	Yes	No Branch of Service				
Date of		Date of	Rank at			
Induction		Discharge	Discharge			

Duties while in service

EDUCATION: Give your complete history below

Last High School Attended

Circle highest school year completed 2 3 4 5 6 7 8 9 10 11 12

Name and Address

Did you either graduate	from high school	l or pass the	e High Schoo	ol Equivalency Test?	Yes	No
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Education Beyond High School	Name and Address	Circle Years Completed	Credit Hours & Major	Did You Graduate	Degree or Diploma & Year Received
College or University		1234			
Graduate or Professional		1234			
Other Education Training, etc.		1234			

Do you have keyboarding experience? Yes No

EMPLOYMENT RECORD: List below all present employment, *beginning* with your most recent. Include military service in proper time sequence and temporary or part-time jobs. ("See attached resume" is **NOT** acceptable in the duties space)

				Starting	Last
-			Address	-	-
			Address		
Date employ					
Date separa		M (1	-		
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	Years	Months			
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KNOWLEDGE, **SKILLS** & **ABILITIES**: List any knowledge, skills, or abilities you have that you feel are applicable to the position for which you are applying.

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3.	 6			_	9	 		
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REGISTRATIONS, LICENSES, CERTIFICATIONS: List fields of work for which you have been registered, licensed or certified.

Registration: _____ State: _____ No: ____ Exp. Date: _____

Other:

CERTIFICATION AND RELEASE: (*Must be signed and dated below*)

- To the best of my knowledge and belief, the information given truly represents my background and experience. I 0 understand that if I have knowingly or negligently misrepresented, falsified or omitted any information during the application process, or have made any changes to the format or wording of this application form, I may be disqualified for employment consideration or dismissed from employment with the Town.
- I authorize my current and former employers to give any information regarding me or my employment, whether or 0 not it is on their records. I hereby release them from any damage whatsoever for issuing same.
- I also authorize educational institutions which I attended to reveal my scholastic ratings, as well as degrees or 0 certificates earned, to the Town of Winterville; and associations, registration and licensing boards and to others to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision of State or Federal law, I expressly waive any right I have to review information the Town receives from an employer or educational institution under a promise of confidentiality.
- I also permit the Town of Winterville to conduct a Police, Court, Credit and/or Motor Vehicle Records investigation of 0 my background.
- I understand that if I apply or have applied for certain jobs, I may be tested for drug and alcohol use to determine if I 0 am currently abusing these substances. I consent to the testing and understand that the results could preclude my appointment.
- I understand and acknowledge that should I be employed by the Town of Winterville, then I serve "at will". This 0 means that I may be terminated at any time with or without cause. I further understand that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically approved by the Town Manager.

SIGNATURE ______ DATE _____

The Town of Winterville is an Equal Employment Opportunity (EEO)/Affirmative Action (AA) Employer. *Town of Winterville participates in E-Verify*