

**EMPLOYMENT APPLICATION
TOWN OF ANSONVILLE, NORTH CAROLINA**

WE CONSIDER APPLICANTS FOR VACANT POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, DISABILITY OR ANY OTHER LEGALLY PROTECTED STATUS. IT IS THE RESPONSIBILITY OF EACH APPLICANT TO NOTIFY US IF ANY REASONABLE ACCOMODATIONS ARE NECESSARY TO ALLOW COMPLETION OF THE APPLICATION PROCESS.

(PLEASE PRINT)

Position Applied For		Date		
Last Name	First Name	Middle Name		
Address	Street	City	State	Zip Code
Telephone Number	Drivers License	Social Security Number		
Home	No.	No.		
Work	State			

(Please Circle One)

- Are you at least 18 years of age?
(If no, you must provide required proof of your eligibility to work) Yes No
- Have you ever filled an application with us before?
If yes, give date _____ Yes No
- Are you currently employed? Yes No
- May we contact your present employer about your qualifications and work history? Yes No
- May we contact your previous employers about your qualifications and work history? Yes No
- Are you a male between the ages of 18 and 26?
If yes, have you registered for military service? (Proof is required.) Yes No
- Are you a citizen of the United States or are you legally authorized to work in the United States?
(Proof of citizenship/immigration status will be required prior to employment.) Yes No
- Do you have any relative(s) employed by this municipality?
If yes, please provide relative's name and department and indicate your relationship to that person: Yes No

Have you been convicted of an offense other than a minor traffic violation?

If yes, please explain:

Yes

No

(A conviction does not mean you cannot be hired. The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.)

Have you ever used a name other than the one shown on this application?

Yes

No

If yes, please indicate name(s):

When would you be available to start work?

EDUCATION

Circle highest level completed:

1 2 3 4 5 6 7 8 9 10 11 12 / GED / College 1 2 3 4 / Graduate School 1 2 3 4

Name & Location	Dates Attended	Graduate?	Major & Degree
High School		Yes No	
College or University		Yes No	
Graduate or Professional		Yes No	
Business, Trade Or Military		Yes No	

List and apprenticeships Or vocational training:
List any professional Registrations, licenses Or certifications:
List any other training, Classes or workshops you Have attended that are related To the position Applied for:

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience:

Have you ever had any job related training in the United States Military?

Yes

No

If yes, please describe:

REFERENCES

Give name, address and telephone number of three (3) references who are not related to you and are not former employers.

1. _____

2. _____

3. _____

EMPLOYMENT EXPERIENCE

List below your entire work experience record. Start with your present or last position and work back in time. Include any military service assignments and any self-employment. Please account for periods of unemployment. Separate sheets with additional information may be attached. Resumes may also be attached.

1. Employer	Dates employed (give month and year)	
	From	To
Address	Telephone Number	
Duties Performed		
Salary:	Starting	Final
Job Title	Supervisor	
Reason for leaving		

2. Employer	Dates employed (give month and year)	
	From	To
Address	Telephone Number	
Duties Performed		
Salary:	Starting	Final
Job Title	Supervisor	
Reason for leaving		

3. Employer	Dates employed (give month and year)	
	From	To
Address	Telephone Number	
Duties Performed		
Salary:	Starting	Final
Job Title		
Reason for leaving		

4. Employer	Dates employed (give month and year)	
	From	To
Address	Telephone Number	
Duties Performed		
Salary:	Starting	Final
Job Title		
Reason for leaving		

Please provide any additional information that you fee may be helpful to us in considering your application.

APPLICANT'S STATEMENT

I certify that information provided herein is true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application and release of pertinent information to the Town of Ansonville as may be necessary in arriving at an employment decision. In the event of my employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Town of Ansonville.	
Signature of Applicant	Date

FOR PERSONNEL DEPARTMENT ONLY

Arrange interview:

Yes No

Remarks: _____

Employed:

Yes No

Date of employment _____ Salary _____

Job Title _____ Department _____

Authorized by _____

Name and Title _____

Date _____