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|  | **APPLICATION FOR EMPLOYMENT** |
|  | **TOWN OF PINK HILL****NORTH CAROLINA** |

 303 S. Central Ave.

 P O Box 530

 Pink Hill, NC 28572

 (252) 568-3181

 (252) 568-2435 fax

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| Applicant Information |
| Last Name |  | First |  | M.I. | Date |  |
| Street Address |  | Apartment/Unit # |  |
| City |  | State |  | ZIP |  Date Of Birth |
| Phone |  | E-mail Address |   |
| Date Available |  | Social Security No. |  | Desired Salary |  |
| Position Applied for |  |
| Have you ever worked for this company? | YES [ ]  | NO [ ]  | If so, when? |  |
| Have you ever been convicted of a felony? | YES [ ]  | NO [ ]  | If yes, explain |  |
| Driver’s License Number  |
| Education |
| High School |  | Address |  |
| From |  | To |  | Did you graduate? | YES [ ]  | NO [ ]  | Degree |  |
| College |  | Address |  |
| From |  | To |  | Did you graduate? | YES [ ]  | NO [ ]  | Degree |  |
| Other |  | Address |  |
| From |  | To |  | Did you graduate? | YES [ ]  | NO [ ]  | Degree |  |
| Provide proof of High School Diploma or GED  |
| References |
| Please list three professional references. |
| Full Name |  | Relationship |  |
| Company |  | Phone |  |
| Address |  |
| Full Name |  | Relationship |  |
| Company |  | Phone |  |
| Address |  |
| Full Name |  | Relationship |  |
| Company |  | Phone |  |
| Address |  |

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| --- |
| Previous Employment |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary | $ |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary | $ |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary | $ |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
|  |
| Military Service |
| Branch |  | From |  | To |  |
| Rank at Discharge |  | Type of Discharge |  |
| If other than honorable, explain |  |
|  |
| Disclaimer and Signature |
| * I certify that my answers are true and complete to the best of my knowledge.
* I authorize my current and former employers to give any information regarding me or my employment, whether or not it is on their records. I hereby release them from any damage whatsoever for issuing same.
* I permit the Town of Pink Hill Police Department to conduct police, court, credit and/or motor vehicle records investigation of my background.
* I understand that I may be tested for drug and alcohol use. I consent to the testing and understand that the results could preclude my appointment.
* If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.
* I understand and acknowledge that should I be employed by the Town of Pink Hill, then I serve “at will”. This 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 Mayor/Town Board.
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| Signature |  | Date |  |