

**Town of Enfield** 

P.O. Box 699, 105 S.E. Railroad Street Enfield, NC 27823 Telephone (252) 445-3146, Fax (252) 445-1019

# **EMPLOYMENT APPLICATION**

**INSTRUCTIONS:** Applications must be completed, signed and dated to receive employment consideration. Incomplete applications will not be considered for employment. Your application will be used as part of the examination process and therefore, you should complete it to the best of your abilities and represent your best effort. PLEASE TYPE OR PRINT LEGIBLY.

# 1. PERSONAL DATA

Today's Date	Social Security Number		
Last Name	First Name MI		
Street Address			
City	State	Zip	
Telephone Day ()	Evening ()		
If no phone where can you be reached?	Are you between the ages of 18-70?	If NOT, what is your birth date?	
NC Drivers LicenseLicense Number:CDL:YesNoRestrictions:	Date Current: Ye	Issueds No	
Citizenship: I certify that I am         □ a U.S. citizen       □ a non-citizen with permanent work authorization         □ a non-citizen with renewable work authorization			

#### 2. WORK PREFERENCES

In general, what position or type of work are you applying for?			
Date available to start:	Minimum a	cceptable salary _	
Are you seeking:  Full-time permanent	□ Part-time permanent	□ Temporary	□ Seasonal

#### FDUCATION 1

3. EDUCATION			
Circle highest level completed:			
1 2 3 4 5 6 7 8 9 10 11 12 GED		2 3 4 5	
School Name & Location	Dates Attended From	То	Degree/Diploma
High School or GED		10	
0			
College or University			
conege of entreisity			
Others			
Others			
Others			
Describe/List specific courses, workshops, spe	cialized training, apprenti	ceships or rot	ations you have had that are related to the
position for which you are applying:			
4. SKILLS			
Check the following skills, experiences	ate which you have	, include en	pacifies in appropriate lines:
			Short Hand
Word Processing			
Spreadsheets     Dealter Problema (Compliance)			Transcription
□ Desktop Publishing/Graphics			Data Entry
□ Database Software □ 7		Typing wpm	
Computer Software			Other:
Computer Hardware			
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			
List field of work for which you have b	been licensed, register	ed or certifi	ied:
License:	State:	Number <sup>.</sup>	Exp. Date
License:	State:	Number:	Exp. Date
License:	State:		Exp. Date
	_ State		Exp. Date
List machinery or equipment you operation	ate which may be used	in the type	e employment your are seeking
(machine tools, cleaning equipment, construction equipment, vehicles, etc.):			
	1 1	, , , , ,	,

Indicate any foreign languages you can speak, read and/or write				
Language	Speak	Read	Write	

# 5. EMPLOYMENT HISTORY

List and describe your work experience separ backwards. Attach as many sheets as is nece in your employment history. Related volunte	essary to account for your full record. Be		
Currently Employed By	Job Title		
Address	Starting Salary	Ending	
Telephone	Date Employed	Date Separated	
Name and Title of Supervisor	Number of	employees by you	
Duties			
Reason for Leaving			
Can we contact your current employer? YES	S NO		
Previously Employed By	Job		
Address	Starting Salary	Ending Salary	
Telephone		Date Separated	
Name and Title of Supervisor	Number of	Number of employees	
Duties:			
Reason for Leaving			

Previously Employed By	Job Title			
Address	Starting	Ending Salary		
Telephone		Date Separated		
Name and Title of Supervisor	Number of	Number of employees		
Duties and Responsibilities				
Reason for Leaving				
Previously Employed By	Job			
Address	Starting Salary	Ending Salary		
Telephone	Date Employed	Date Separated		
Name and Title of Supervisor		Number of employees		
Duties and Responsibilities				
Reason for Leaving				
Previously Employed By	Job			
Address	Salary	Ending Salary		
Telephone	Date Employed	Date Separated		
Name and Title of Supervisor	Number of	Number of employees		
Duties and Responsibilities				
Reason for Leaving				

# 6. GENERAL QUESTIONS

a.	Have you ever been employed with the Town of Enfield?	□ Yes	□ <sub>No</sub>	
	If yes, when and what department?			
b.	Apart from absences for religious observations, will you accept employment requiring occasional night work or weekend work?	□ Yes	□ No	
c.	Apart from absences for religious observations, will you accept employment requiring regular night work, weekend work, or rotating	□ Yes g shifts?	🗆 No	
	Comments:			
d.	Are you related by blood or marriage to any town employee? If yes, give name, relationship and department	□ <sub>Yes</sub>		
e.	Indicate any information regarding your training, qualifications, and application			his —
f.	How did you learn about employment opportunities with the Town o	of Enfield?		
If you	answer to any of the following questions is "YES" please write a det	ailed explanati	on.	
g.	Have you ever been fired from a job?	□ Yes	□ <sub>No</sub>	
h.	Have you ever pled guilty to or been found guilty of any criminal offense or been convicted of any offense other than a minor traffic v **NOTE: A conviction record will not necessarily exclude you from The nature of the offense, when it occurred, and its job-relate	employment.	□ No	

# 7. PERSONAL REFERENCES

Please do not list family relatives. We recommend listing persons such as co-workers, teachers, etc., who have knowledge of your qualifications for the position for which you are applying. Do not repeat names of supervisors listed with your employment record unless they can no longer be contacted at those addresses. Include complete addresses and telephone numbers.			
a.	Name	_Telephone	
	Address		
b.	Name	_Telephone	
	Address		
c.	Name	_Telephone	
	Address		

# **Certification and Statement of Understanding**

I certify that all of the information furnished in this employment application are true and complete to the best of my knowledge. I understand that the Town of Enfield may investigate the information I have furnished. I authorize any person, firm, or organization to supply any information about me concerning any past employment, military duties, convictions, or personal information to the Town of Enfield. I further release any such person, firm, or organization from any responsibility in disclosing such information, including from all liability for any damage that may result from furnishing such information to the Town.

I authorize the Town to obtain information regarding my record with the Division of Motor Vehicles if the position for which I am applying requires driving. I realize that any misrepresentation or false information included in the application materials or provided in the interview process can lead to the withdrawal of an offer of employment or to termination from employment. The Town of Enfield is a drug-free workplace. Individuals offered employment by the Town of Enfield might be required to successfully complete a pre-employment physical and drug testing. Individuals who refuse to take or who fail the drug test, after being informed, will be removed from employment consideration.

Signature \_\_\_\_\_ Date \_\_\_\_\_