



APPLICATION FOR EMPLOYMENT

TO BE CONSIDERED FOR A POSITION, YOU MUST COMPLETE ALL THE QUESTIONS LISTED. A RESUME MAY BE ATTACHED FOR REFERENCE BUT THE APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.

Date _____ Position applied for _____

N.C. Driver's License No _____

Name _____
(Last) (First) (Middle, if married, use maiden name)

Mailing Address _____
(Street) (City) (County) (State) (Zip Code)

Telephone: Home _____ Cell _____ Business _____

When will you be available for employment? _____

Are you a veteran? Yes _____ No _____

Date of entry into active service _____

Date of separation from active service _____

Type of separation _____

Have you ever worked for the Town of Vass? Yes _____ No _____

Have you ever been convicted of an offense against the law or forfeited bond? Yes _____ No _____

NOTE: You may omit traffic violations of which you paid a fine of \$30.00 or less.

References: Please list the name, address, and phone number of two personal references, excluding relatives and former employers. Do not repeat names of supervisors you will list in the Work History Section.

1. _____

2. _____

EDUCATION

Name	Address	Major Course/ Subject	Circle Last Year Complete	Month and Year Graduated	Degree
High School/Preparatory			1 2 3 4		
Business School			1 2 3 4		
College			1 2 3 4		
Graduate Work			1 2 3 4		
Other (Describe)					

If you did not graduate, why did you leave school or college? _____

Are you planning to pursue further studies? Yes _____ No _____ Day School _____ Night School _____

If so, when, and what courses? _____

MACHINE OPERATION: Check the following machines which you can operate.

Computer _____ Calculator _____ Copy Machine _____ Typewriter _____
 Mower _____ Tractor _____ Dump Truck _____ Chipper _____ Backhoe _____ Other _____

List fields of work for which you are licensed, registered, or certified, giving date(s) and sources of issuance.

If position applied for calls for specific courses, indicate courses and credits received. _____

WORK HISTORY: Start with your present or most recent job. List self-employment, summer and part-time jobs.

Company			Address		Telephone
Date Employed:	From	To	Starting Salary	Leaving	Supervisor
Your Duties					
Reason for Leaving					

Company			Address		Telephone
Date Employed:	From	To	Starting Salary	Leaving	Supervisor
Your Duties					
Reason for Leaving					

Company			Address		Telephone
Date Employed:	From	To	Starting Salary	Leaving	Supervisor
Your Duties					
Reason for Leaving					

I UNDERSTAND THAT IF I AM INTERVIEWED AND CONSIDERED FOR A POSITION WITH THE TOWN OF VASS, ALL MY WORK HISTORY WILL BE VERIFIED.

CERTIFICATION AND ASSENT

I hereby certify that the statements I have made are true, and if I am subsequently employed by you, that I am subject to discharge if they are found to be false.

I hereby acknowledge that I have read the above statement and understand the same.

Signature of Applicant

Date

SUBSTANCE ABUSE TESTING

I hereby agree to substance abuse testing by the provider designated by the Town of Vass.

I understand that the Town of Vass is a drug-free workplace and the testing is a condition of pre-employment.

Signature of Applicant

Date

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the Town of Vass to perform a Criminal History Records Information Check in connection with my application for employment with the Town of Vass pursuant to N.C.G.S. 114-19.3

Last Name **First Name** **Middle** **Maiden**

Social Security Number _____

Date of Birth _____

Driver's License Number & State _____

Signature of Applicant

Date

This is an Equal Opportunity Facility. Federal law prohibits discrimination. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S., Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 or call (800) 795-3272 or 202-720-5964(voice) or 202-720-6382 (TDD).