

Town of Stantonsburg

108 East Commercial Ave Stantonsburg, NC 27883 (252) 238-3608

Employment Application

Applicant Information									
Full Name:	Last	First			<i>M.I.</i>	Date:			
Address:									
Address.	Street Address					Apartment/Unit #			
	City				State	ZIP Code			
Phone:			Email						
Date Availa	ble:	Social Security No.:			Desired	d Salary: <u>\$</u>			
Position App	plied for:								
Are you a ci	itizen of the United States	YES NO	lf no, a	are you a	authorized to w	YES rork in the U.S.? □	NO □		
YES NO Have you ever worked for the Town? If yes, when?									
Have you e	ver been convicted of a fe	YES NO elony?							
lf yes, expla	in:								
		Educ	ation						
High Schoo	l:	Address							
From:	To:		YES	NO □	Diploma:				
College:		Address							
From:	To:	Did you graduate?	YES	NO □	Degree:				
Other:		Address	:						
From:	To:	Did vou graduate?	YES	NO □	Dearee:				

References

Please list t	three professional references.	
Full Name:		Relationship:
Company:		Phone:
Address:		
Full Name:		Relationship:
Company:		Phone:
Address:		
Full Name:		Relationship:
Company:		Phone:
Address:		
	Previous Employment	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary: \$
Responsibili	ities:	
From:	To: Reason for Leaving:	
May we con	YES NO tact your previous supervisor for a reference?	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary: <u>\$</u>	
Responsibili	ities:	
From:	To: Reason for Leaving:	
May we con	YES NO tact your previous supervisor for a reference?	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary: <u>\$</u>	
	0	

Responsibilities:							
From:	То:	Reason for Leaving:					
May we contact	your previous supervisor for a reference?	YES	NO □				
Military Service							
Branch:			From:	То:			
Rank at Dischar	ge:	Type of Discharge:					
If other than hone	orable, explain:						
	Disclaimer a	nd Signat	ure				
NOTICE! All applicants who are selected for a permanent position with the Town will be required to have a drug screening test prior to employment.							
THIS APPLICATION MUST BE SIGNED. Unsigned applications will not be processed. **Submitting an electronic version of this application: If selected to continue in the selection process a signature will be required at that time.							
I certify that, to the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly misrepresented or falsified any of the application information, 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 my employment, together with any information regarding me whether or not it is in their records. I hereby release them from any damage whatsoever for issuing same. I also permit the Town to conduct a police and courts records investigation of my background.							
I also authorize schools and other educational institutions which I may have attended to reveal my scholastic ratings to Town representatives who are investigating my educational background.							

Signature: _____ Date:_____