

TOWN OF SWANSBORO



EMPLOYMENT APPLICATION

An Equal Opportunity/Affirmative Action Employer
601 W. Corbett Ave. Swansboro, NC 28584
910 326-4428
www.swansboro-nc.org

Please complete all sections to the best of your ability; placing N/A in areas where needed. Once submitted, application material become property of the Town of Swansboro. Resumes may be attached but not substituted for an application. Faxed applications will not be accepted.

CURRENT INFORMATION

Position applied for: _____ Date: _____

Name: _____
(Last) (First) (Middle Initial)

Present Address: _____
(Street Number and Name/ PO Box) (City) (State) (Zip)

Telephone: (Home) _____ (Cell) _____

Email Address: _____ Date Available for Work: _____

GENERAL INFORMATION (circle YES or NO- attach additional sheets if necessary)

- Have you ever been employed by the Town of Swansboro? If yes, when and what department. _____ YES NO
- Are you now, or have you ever been related to a current Town of Swansboro employee? If yes, give name and department. _____ YES NO
- Are you able to perform all of the duties of the position in which you are applying? YES NO
- Are you an American citizen or do you currently have authorization to work in the United States? YES NO
- Have you ever been discharged or asked to resign by a former employer? YES NO
- Have you ever been disciplined for excessive absences or tardiness? YES NO
- Did you receive your education or employment experience under another name? If yes, please list prior names. _____ YES NO
- Have you ever been convicted of an offense against the law other than a minor traffic violation? If yes, explain. _____ YES NO

A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, length of time since the offense, and nature of the crime will be taken into consideration.

MILITARY HISTORY Attach DD 214

- Have you ever served active duty in the United States military service? If yes, what branch? _____ YES NO
Dates of duty: From _____ To _____
- Are you currently in the reserves or have any other obligation? If yes, explain. _____ YES NO

EDUCATION

Indicate highest school year completed: (i.e. 12, 14, 16) _____

Name of High School _____ City _____ State _____

Did you receive a diploma or equivalent? YES NO

Education beyond high school	Name and Location	Attended From: Month and Year	Did you Graduate	Credit Hours	Degree, Diploma, Certificate Earned of # of years	Major Minor
College(s)			YES NO			
University						
Graduate or Professional Schools			YES NO			
Technical Institutes, Internship, other			YES NO			

KNOWLEDGE, SKILLS & ABILITIES

Please list any knowledge, skills, or abilities you have that you feel are applicable to the position for which you are applying. Include skills with equipment or machines you can operate. If you wish consideration for a secretarial/clerical position, indicate typing speed and work processing software packages know and/or used.

REGISTRATION, LICENSES, CERTIFICATIONS

List fields of work for which you are registered, licensed or certified:

Registration: _____ State: _____ No: _____ Expiration Date: _____

Registration: _____ State: _____ No: _____ Expiration Date: _____

Other: _____

VALID DRIVERS LICENSE INFORMATION:

If you do not have a drivers' license please put 'NONE' in the blank. **NUMBER** _____ **STATE** _____

Is your drivers' license a Commercial Driver's License? YES NO

If yes, indicate class: _____

VERIFICATION

Are you over 18 years of age? YES NO

If no, please give your date of birth: _____

EMPLOYMENT

Record your complete work history below. Attach additional sheets if necessary. Explain any gaps in employment history. Related volunteer information should also be listed. "See Resume" is not acceptable in the 'list major duties' space below.

CURRENT OR MOST RECENT EMPLOYER

Employer Name and Address _____

Position Title _____ Starting Salary _____ Current/Ending Salary _____

Supervisors Name _____ Phone Number _____ # Supervised by you _____

Date Employed _____ Date Separated _____ Full-Time (yr(s)/mo) _____ Part-time (yr(s)/mo) _____

Reason for leaving _____

List **Major** Duties in order of importance _____

May we contact employer: YES NO

NEXT MOST RECENT EMPLOYER

Employer Name and Address _____

Position Title _____ Starting Salary _____ Current/Ending Salary _____

Supervisors Name _____ Phone Number _____ # Supervised by you _____

Date Employed _____ Date Separated _____ Full-Time (yr(s)/mo) _____ Part-time (yr(s)/mo) _____

Reason for leaving _____

List **Major** Duties in order of importance _____

May we contact employer: YES NO

NEXT MOST RECENT EMPLOYER

Employer Name and Address _____

Position Title _____ Starting Salary _____ Current/Ending Salary _____

Supervisors Name _____ Phone Number _____ # Supervised by you _____

Date Employed _____ Date Separated _____ Full-Time (yr(s)/mo) _____ Part-time (yr(s)/mo) _____

Reason for leaving _____

List **Major** Duties in order of importance _____

May we contact employer: YES NO

NEXT MOST RECENT EMPLOYER

Employer Name and Address _____
Position Title _____ Starting Salary _____ Current/Ending Salary _____
Supervisors Name _____ Phone Number _____ # Supervised by you _____
Date Employed _____ Date Separated _____ Full-Time (yr(s)/mo) _____ Part-time (yr(s)/mo) _____
Reason for leaving _____
List **Major** Duties in order of importance _____

May we contact employer: YES NO

NEXT MOST RECENT EMPLOYER

Employer Name and Address _____
Position Title _____ Starting Salary _____ Current/Ending Salary _____
Supervisors Name _____ Phone Number _____ # Supervised by you _____
Date Employed _____ Date Separated _____ Full-Time (yr(s)/mo) _____ Part-time (yr(s)/mo) _____
Reason for leaving _____
List **Major** Duties in order of importance _____

May we contact employer: YES NO

NEXT MOST RECENT EMPLOYER

Employer Name and Address _____
Position Title _____ Starting Salary _____ Current/Ending Salary _____
Supervisors Name _____ Phone Number _____ # Supervised by you _____
Date Employed _____ Date Separated _____ Full-Time (yr(s)/mo) _____ Part-time (yr(s)/mo) _____
Reason for leaving _____
List **Major** Duties in order of importance _____

May we contact employer: YES NO

NEXT MOST RECENT EMPLOYER

Employer Name and Address _____
Position Title _____ Starting Salary _____ Current/Ending Salary _____
Supervisors Name _____ Phone Number _____ # Supervised by you _____
Date Employed _____ Date Separated _____ Full-Time (yr(s)/mo) _____ Part-time (yr(s)/mo) _____
Reason for leaving _____
List **Major** Duties in order of importance _____

May we contact employer: YES NO

REFERENCES

Please list people such as co-workers, teachers, friends, etc., who have knowledge of your qualifications for the position of which you are applying. Do not list family relatives. Do not list names of supervisors noted on your employment record unless they can no longer be reached at the addresses listed.

Name _____ Address _____

Phone _____ Relationship to you _____

Name _____ Address _____

Phone _____ Relationship to you _____

Name _____ Address _____

Phone _____ Relationship to you _____

Certification and Release (must be signed and dated below)

- To the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly or negligently misrepresented, falsified or omitted any information during the application process, or have made any changes to the format or working of the application form, 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 me or my employment, whether or not it is on their records, I hereby release them from any damage whatsoever for issuing same.
- I also authorize educational institutions which I attended to reveal my scholastic ratings, as well as degrees or certificates earned, to the Town of Swansboro; and associations, registration and licensing boards and to others to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision of State or Federal law, I expressly waive any right I have to review information the Town receives from an employer or educational institution under a promise of confidentiality.
- I also permit the Town of Swansboro to conduct a Police, Court, Credit and/or Motor Vehicle Records Investigation of my background.
- I understand that if I apply or have applied for certain jobs, I may be tested for drug and alcohol use to determine if I am currently abusing these substances, I consent to the testing and understand that the results could preclude my appointment.
- I understand and acknowledge that should I be employed by the Town of Swansboro, 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 Town Manager.

Signature: _____ **Date:** _____