

TOWN OF BADIN

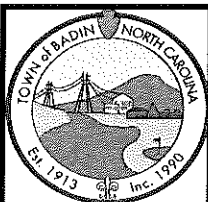
APPLICATION FOR EMPLOYMENT

(Please Print)

BE SURE TO GIVE ACCURATE AND COMPLETE INFORMATION. FAILURE TO DO SO MAY RESULT IN THE REJECTION OF YOUR APPLICATION. IT IS IMPORTANT THAT YOU FILL OUT ALL SECTIONS OF THIS APPLICATION COMPLETELY AND TO THE BEST OF YOUR ABILITY. YOUR APPLICATION WILL BE USED AS A PART OF THE EVALUATION PROCESS AND, THEREFORE, SHOULD REPRESENT YOUR BEST EFFORT. YOU MAY ATTACH A RESUME, BUT THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.

Current Information			
Position Applied For _____		Date _____	
When will you be available for employment? _____			
Are you seeking:	Full time	Part time	Summer Work
NAME _____	Last	First	Middle
ADDRESS _____			
	Street Number or P. O. Box	City	State Zip
TELEPHONE (____) _____		(____) _____	
	Home	Business	E-mail Address
DRIVER LICENSE NO. _____		STATE _____	

General Information			
a. Have you ever been employed with the Town of Badin? If yes, what dept. & when? _____	YES	NO	
b. Are you related by blood or marriage to any Town employee? If yes, give name, relationship, and department _____	YES	NO	
c. Have you ever been convicted of a misdemeanor or felony? If yes, please explain _____	YES	NO	
<p>NOTE: A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, how recent the offense was, and nature of the crime will be taken into consideration</p>			
e. Are you willing to work overtime?	YES	NO	Week-ends
	Nights	YES	NO
			Holidays
			YES
			NO



The Town of Badin is an Equal Opportunity Employer. Applicants are considered for all positions without regard to race, creed, color, religion, national origin, age, sex, handicap, marital or veteran status.

P.O. Box 707 • Badin, NC 28009 • Office (707) 422-3470 • Fax (704) 422-5344

EMPLOYMENT

Record your complete work history in the spaces below. Begin with your current or most recent employer first. Attach as many sheets as is necessary to account for your full record. Be sure to account for gaps in your employment history. Related volunteer experience should also be listed.

A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title _____ Starting Salary _____ Last Salary _____

Name and title of supervisor _____ No. of employees you supervise _____

Employer or company _____

Address _____

Date Employed ____/____/____ Date Separated ____/____/____ Telephone (____) _____

Main Duties: _____

Full-time: Years _____ Months _____ Part-time: Years _____ Months _____

Reason for leaving _____

If part-time, number of hours worked per week _____

If currently employed, may we inquire of this employer about your qualifications and character? YES No

B. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title _____ Starting Salary _____ Last Salary _____

Name and title of supervisor _____ No. of employees you supervise _____

Employer or company _____

Address _____

Date Employed ____/____/____ Date Separated ____/____/____ Telephone (____) _____

Main Duties: _____

Full-time: Years _____ Months _____ Part-time: Years _____ Months _____

Reason for leaving _____

If part-time, number of hours worked per week _____

C. NEXT RECENT EMPLOYMENT (or explain gap in employment)

Job Title _____ Starting Salary _____ Last Salary _____

Name and title of supervisor _____ No. of employees you supervise _____

Employer or company _____

Address _____

Date Employed ____/____/____ Date Separated ____/____/____ Telephone (____) _____

Main Duties: _____

Full-time: Years _____ Months _____ Part-time: Years _____ Months _____

Reason for leaving _____

If part-time, number of hours worked per week _____

REFERENCES

List three (3) persons living in the United States who are **not related to you and who have a definite knowledge** of your ability to perform the job for which you are applying. **DO NOT REPEAT NAMES OF SUPERVISORS**

- 1. Name _____ Address _____
Telephone (_____) _____ Relationship: _____

- 2. Name _____ Address _____
Telephone (_____) _____ Relationship: _____

- 3. Name _____ Address _____
Telephone (_____) _____ Relationship: _____

Pre-Employment Authorization (Read Carefully)

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 Town of Badin.

I authorize my former employer to give any information regarding my employment. I have authorized them to release my records and discuss my work performance with representatives of the Town of Badin who are investigating the response provided herein.

I understand that proof of my eligibility for employment in the United States must be furnished before I begin work with the Town of Badin.

I understand that North Carolina state law requires male applicants for employment, 18 to 26, to register for military service. By signing below I certify that I am in compliance with state law.

I understand that my social security number will be kept confidential and used only in accordance with federal, state and local laws.

I understand that a pre-employment drug screening is required.

Signature _____ Date _____

FOR DEPARTMENTAL USE ONLY

PRE-EMPLOYMENT AUTHORIZATION FORM

I authorize the Town of Badin to perform a Police and Records Check of my background and a Credit Check, if necessary.

Name (please print)

Social Security Number

Date

Date of Birth

Signature