

## EMPLOYMENT APPLICATION TOWN OF RANLO, NORTH CAROLINA

WE CONSIDER APPLICANTS FOR VACANT POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE MARITAL OR VETERAN STATUS, DISABILITY OR ANY OTHER LEGALLY PROTECTED STATUS. IT IS THE RESPONSIBILITY OF EACH APPLICANT TO NOTIFY US IF ANY REASONABLE ACCOMMODATIONS ARE NECESSARY TO ALLOW COMPLETION OF THE APPLICATION PROCESS.

*(PLEASE PRINT)*

Position Applied For		Date		
Last Name	First Name	Middle Name		
Address	Street	City	State	Zip Code
Telephone Number(s)		Driver License	Social Security Number	

*(Please Circle One)*

Are you at least 18 years of age? Yes    No  
 (If no, you must provide required proof of your eligibility to work.)

Have you ever filed an application with us before? Yes    No  
 If yes, give date \_\_\_\_\_

Have you ever been employed with us before? Yes    No  
 If yes, give date \_\_\_\_\_

Are you currently employed? Yes    No

May we contact your present employer about your qualifications and work history? Yes    No

May we contact your previous employers about your qualifications and work history? Yes    No

Are you a male between the ages of 18 and 26? Yes    No  
 If yes, have you registered for military service? (Proof is required.) Yes    No

Are you a citizen of the United States or are you legally authorized to work in the United States? Yes    No  
 (Proof of citizenship or immigration status will be required prior to employment.)

Do you have any relative(s) employed by this municipality? Yes    No

If yes, please provide relative's name and department and indicate your relationship to that person: \_\_\_\_\_

Have you been convicted of an offense other than a minor traffic violation? Yes    No  
 If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

(A conviction does not mean you cannot be hired. The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.)

Have you ever used a name other than the one shown on this application? Yes    No  
 If yes, please indicate name(s): \_\_\_\_\_

When would you be available to start work? \_\_\_\_\_

**EDUCATION**

Circle the highest level completed:

1 2 3 4 5 6 7 8 9 10 11 12 / GED / College 1 2 3 4 / Graduate School 1 2 3 4

Name & Location	Dates Attended	Graduate? Yes    No	Major & Degree (if applicable)
Elementary School		Yes    No	
High School		Yes    No	
College or University		Yes    No	
Graduate or Professional		Yes    No	
Business, Trade or Military		Yes    No	
List any apprenticeships or Vocational training:			
List any professional registrations, licenses, or certifications:			
List any other training, classes, or workshops you have attended that are related to the position applied for:			
State any additional information you feel may be helpful to us in considering your application:			

## SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience:

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Have you ever had any job related training in the United States military? Yes No  
 If yes, please describe

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## REFERENCES

Give name, address, and telephone numbers of three (3) references who are not related to you and are not former employers.

1. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## EMPLOYMENT EXPERIENCE

List below your entire work experience record. Start with your present or last position and work back in time. Include any military service assignments and any self-employment. Please account for periods of unemployment. Separate sheets with additional information may be attached. Resumes may also be attached.

1. Employer	Dates Employed (give month and year) From                      To
Address	Telephone Number
Duties Performed	
Salary: Starting	Final
Job Title	Supervisor
Reason for Leaving	

2. Employer	Dates Employed (give month and year) From                      To
Address	Telephone Number
Duties Performed	
Salary: Starting	Final
Job Title	Supervisor
Reason for Leaving	

3. Employer	Dates Employed (give month and year) From                      To
Address	Telephone Number
Duties Performed	
Salary: Starting	Final
Job Title	Supervisor
Reason for Leaving	

4. Employer	Dates Employed (give month and year) From                      To
Address	Telephone Number
Duties Performed	
Salary: Starting	Final
Job Title	Supervisor
Reason for Leaving	

## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application and release of pertinent information to the Town of Ranlo as may be necessary in arriving at an employment decision. In the event of my employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Town of Ranlo.

Signature of Applicant

Date

### FOR PERSONNEL DEPARTMENT USE ONLY

Arrange interview?

Yes    No

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employed?

Yes    No

Date of Employment \_\_\_\_\_ Salary \_\_\_\_\_

Job Title \_\_\_\_\_ Department \_\_\_\_\_

Authorized by: \_\_\_\_\_

Name and Title

Date