

PO Box 759
635 East Street
Pittsboro, NC 27312

Town of Pittsboro Employment Application

919-542-4621
919-542-7109 - Fax

INSTRUCTIONS: Applications must be completed, signed and dated to receive employment consideration. Applications not filled out completely will not be considered for employment. 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 part of the examination process and therefore, should represent your best effort. PLEASE TYPE OR PRINT LEGIBLY.

1. PERSONAL DATA

Today's Date _____		Social Security Number _____	
Last Name _____		First Name _____ MI _____	
Street Address _____			
City _____		State _____	Zip _____
Telephone -- Day (____) _____		Evening (____) _____	
If no phone where can you be reached? _____		Are you 18 years old or older? Yes No	If NOT, what is your birth date? _____
NC Drivers License		License Number: _____	Date Issued _____
CDL: Yes No		Restrictions: _____	Current: Yes No
<p>Citizenship: Eligibility to Work in the United States of America:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>			

2. WORK PREFERENCES

In general, what position or type of work are you applying for? _____	
Date available to start: _____	Minimum acceptable salary _____
Are you seeking: <input type="checkbox"/> Full-time permanent <input type="checkbox"/> Part-time permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	

3. EDUCATION

HIGH SCHOOL	OR	GED	COLLEGE – UNIVERSITY								
CIRCLE NO. YEARS COMPLETED 0 1 2 3 4	GRADUATED	YES	NO	RECEIVED GED CERTIFICATE	YES	NO	CIRCLE NO. YEARS COMPLETED 0 1 2 3 4	GRADUATED	YES	NO	
NAMES OF COLLEGES OR UNIV. ATTENDED UNDERGRADUATE (NAME/CITY/STATE)				MAJOR/MINOR				DATES ATTENDED FROM TO			

EDUCATION (con't)

GRADUATE (NAME/CITY/STATE)					

BUSINESS, TRADE OR CORRESPONDENCE SCHOOL NAME AND LOCATION	FROM	TO	SUBJECTS	COMPLETED?
				YES NO
				YES NO
TECHNICAL – PROFESSIONAL LICENSE	NUMBER	STATE ISSUED	DATE ISSUED	CURRENT YES NO

4. EMPLOYMENT HISTORY

List and describe your work experience separately by title. Begin with your present position and work backwards. 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.

Currently Employed By _____ Job Title _____

Address _____ Starting Salary _____ Ending Salary _____

Telephone _____ Date Employed _____ Date Separated _____

Name and Title of Supervisor _____ Number of employees supervised by you _____

Duties and Responsibilities _____

Reason for Leaving _____

Can we contact your current employer? YES NO

Previously Employed By _____ Job Title _____

Address _____ Starting Salary _____ Ending Salary _____

Telephone _____ Date Employed _____ Date Separated _____

Name and Title of Supervisor _____ Number of employees supervised by you _____

Duties and Responsibilities _____

EMPLOYMENT HISTORY (con't)

Reason for Leaving _____

Previously Employed By _____ Job Title _____

Address _____ Starting Salary _____ Ending Salary _____

Telephone _____ Date Employed _____ Date Separated _____

Name and Title of Supervisor _____ Number of employees supervised by you _____

Duties and Responsibilities _____

Reason for Leaving _____

Previously Employed By _____ Job Title _____

Address _____ Starting Salary _____ Ending Salary _____

Telephone _____ Date Employed _____ Date Separated _____

Name and Title of Supervisor _____ Number of employees supervised by you _____

Duties and Responsibilities _____

Reason for Leaving _____

5. GENERAL QUESTIONS

- a. Have you ever been employed with the Town of Pittsboro? Yes No

If yes, when and what department? _____

- b. Apart from absences for religious observations, will you accept employment requiring occasional night work or weekend work? Yes No

- c. Apart from absences for religious observations, will you accept employment requiring regular night work, weekend work, or rotating shifts? Yes No

Comments: _____

- d. Are you related by blood or marriage to any town employee? Yes No
If yes, give name, relationship and department _____

- e. Indicate equipment you operate which may be used in the type of employment you are seeking (office equipment, copiers, computer, machine tools, vehicles, cleaning equipment, construction equipment, electronic equipment). _____

- f. Indicate any information regarding your training, qualifications, and skills not covered elsewhere on this application (languages, software, special equipment etc). _____

- g. How did you learn about employment opportunities with the Town of Pittsboro? _____

If your answer to any of the following questions is "YES" please attach a detailed explanation.

- h. Have you ever been fired from a job? Yes No

- i. Have you ever pled guilty to or been found guilty of any criminal offense or been convicted of any offense other than a minor traffic violation? Yes No

****NOTE:** A conviction record will not necessarily exclude you from employment.

The nature of the offense, when it occurred, and its job-relatedness will be considered.

6. PERSONAL REFERENCES

Please do not list family relatives. We recommend listing persons such as co-workers, teachers, etc., who have knowledge of your qualifications for the position for which you are applying. Do not repeat names of supervisors listed with your employment record unless they can no longer be contacted at those addresses. Include complete addresses and telephone numbers.

a. Name _____ Telephone _____

Address _____

b. Name _____ Telephone _____

Address _____

c. Name _____ Telephone _____

Address _____

Certification and Statement of Understanding

I certify that all of the information furnished in this employment application and its addenda are true and complete to the best of my knowledge. I understand that the Town of Pittsboro may investigate the information I have furnished. I authorize any person, firm, or organization to supply any information about me concerning any past employment, military duties, convictions, or personal information to the Town of Pittsboro. I further release any such person, firm, or organization from any responsibility in disclosing such information, including from all liability for any damage that may result from furnishing such information to the Town.

I authorize the Town to obtain information regarding my record with the Bureau of Motor Vehicles if the position for which I am applying requires driving. I realize that any misrepresentation or false information included in the application materials or provided in the interview process can lead to the withdrawal of an offer of employment or to termination from employment. The Town of Pittsboro is a drug-free workplace. Individuals offered employment by the Town of Pittsboro will be required to successfully complete pre-employment drug testing. Individuals who refuse to take or who fail the drug test, after being informed, will be removed from employment consideration.

This institution is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint form found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or e-mail at program.intake@usda.gov.

Signature _____ Date _____