



Town of Enfield

P.O. Box 699, 105 S.E. Railroad Street
Enfield, NC 27823

Telephone (252) 445-3146, Fax (252) 445-1019

EMPLOYMENT APPLICATION

INSTRUCTIONS: Applications must be completed, signed and dated to receive employment consideration. Incomplete applications will not be considered for employment. Your application will be used as part of the examination process and therefore, you should complete it to the best of your abilities and 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 between the ages of 18-70? _____	If NOT, what is your birth date? _____
NC Drivers License	License Number: _____	Date Issued _____
CDL: Yes No	Restrictions: _____	Current: Yes No
Citizenship: I certify that I am <input type="checkbox"/> a U.S. citizen <input type="checkbox"/> a non-citizen with permanent work authorization <input type="checkbox"/> a non-citizen with renewable work authorization		

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

Circle highest level completed:
 1 2 3 4 5 6 7 8 9 10 11 12 GED College: 1 2 3 4 5 Graduate School: 1 2 3 4

School Name & Location	Dates Attended From To	Degree/Diploma
High School or GED		
College or University		
Others		
Others		

Describe/List specific courses, workshops, specialized training, apprenticeships or rotations you have had that are related to the position for which you are applying:

4. SKILLS

Check the following skills, experiences, etc., which you have include specifics in appropriate lines:

Word Processing _____	Short Hand _____
Spreadsheets _____	Transcription _____
Desktop Publishing/Graphics _____	Data Entry _____
Database Software _____	Typing _____ wpm
Computer Software _____	Other: _____
Computer Hardware _____	_____

List field of work for which you have been licensed, registered or certified:

License: _____ State: _____ Number: _____ Exp. Date _____

License: _____ State: _____ Number: _____ Exp. Date _____

License: _____ State: _____ Number: _____ Exp. Date _____

List machinery or equipment you operate which may be used in the type employment your are seeking (machine tools, cleaning equipment, construction equipment, vehicles, etc.):

Indicate any foreign languages you can speak, read and/or write

Language	Speak	Read	Write

5. 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 _____

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: _____

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 _____

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 _____

6. GENERAL QUESTIONS

- a. Have you ever been employed with the Town of Enfield? 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 any information regarding your training, qualifications, and skills not covered elsewhere on this application _____

- f. How did you learn about employment opportunities with the Town of Enfield? _____

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

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

- h. 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.

7. 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 are true and complete to the best of my knowledge. I understand that the Town of Enfield 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 Enfield. 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 Division 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 Enfield is a drug-free workplace. Individuals offered employment by the Town of Enfield might be required to successfully complete a pre-employment physical and drug testing. Individuals who refuse to take or who fail the drug test, after being informed, will be removed from employment consideration.

Signature _____ Date _____