

REFERRAL SOURCE _____

CERTIFICATION AND ASSENT

I hereby certify that the statements I have made are true, and if I am subsequently employed by you, I will be discharged if they are found to be false.

I hereby acknowledge that I have read and understand the above statement.

Signature of applicant _____ Date _____

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the Town of Southern Pines to perform a Criminal History Records Information Check in connection with my application for employment with the Town of Southern Pines pursuant to N.C.G.S. 114-19.3.

Please print:

Last _____ First _____ Middle _____ Maiden _____

Social Security Number _____
(release of your social security number will only be used for the purpose stated above)

Date of Birth _____

Drivers License Number & State _____

Signature of applicant _____ Date _____

I hereby authorize the Town of Southern Pines to obtain confidential information concerning my past employment, including information from my current and past employers. This information may include copies of personnel files and safety records. I acknowledge that some information may be positive or negative with respect to my performance and I agree to release the Town of Southern Pines, it's agents, and employees from any and all liability for obtaining such information and using it in the hiring process.

Signature of applicant _____ Date _____

SUBSTANCE ABUSE TESTING

I hereby agree to substance abuse testing by the provider designated by the Town of Southern Pines.

I understand that the Town of Southern Pines is a drug-free workplace and the testing is a condition of pre-employment.

Signature of applicant _____ Date _____



APPLICATION FOR EMPLOYMENT

To be considered for a position, you must complete all the questions listed. A resume may be attached for reference but the application must be completed in its entirety.

Date _____

Position applied for _____

Name _____
Last _____ First _____ Middle - if married, use maiden name _____

Mailing Address _____

Telephone: Home _____ Business _____

When will you be available for employment? _____

Are you a veteran? Yes___ No___

Date of entry into active service: _____

Date of separation from active service: _____

Type of separation: _____

Have you ever worked for the Town of Southern Pines? Yes___ No___

Have you ever been convicted of an offense against the law or forfeited bond? Yes___ No___

References: Please list the names and addresses of two personal references, **excluding** relatives and former employers. **DO NOT** repeat names of supervisors you will list in the **WORK HISTORY SECTION**.

1. _____

2. _____

EDUCATION

NAME	ADDRESS	CIRCLE LAST YEAR COMPLETED	MONTH & YR. GRADUATED	DEGREE
HIGH SCHOOL PREPARATORY		1 2 3 4		
BUSINESS SCHOOL		1 2 3 4		
COLLEGE		1 2 3 4		
GRADUATE WORK		1 2 3 4		
OTHER (DESCRIBE)		1 2 3 4		

If you did not graduate, why did leave school or college? _____

Are you planning to pursue further studies? Yes ___ No ___ Day School ___ Night School ___

If so, when and what courses? _____

MACHINE OPERATION:

List any machines or equipment you can operate proficiently.

WORK HISTORY: IT IS MANDATORY THAT YOU COMPLETE THIS SECTION.

Start with your present or most recent job. List self-employment, summer, and part-time jobs.

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COMPANY	ADDRESS	TELEPHONE
DATE EMPLOYED <i>FROM</i> <i>TO</i>	SALARY <i>STARTING</i> <i>LEAVING</i>	SUPERVISOR
YOUR DUTIES		
REASON FOR LEAVING		

2

COMPANY	ADDRESS	TELEPHONE
DATE EMPLOYED <i>FROM</i> <i>TO</i>	SALARY <i>STARTING</i> <i>LEAVING</i>	SUPERVISOR
YOUR DUTIES		
REASON FOR LEAVING		

3

COMPANY	ADDRESS	TELEPHONE
DATE EMPLOYED <i>FROM</i> <i>TO</i>	SALARY <i>STARTING</i> <i>LEAVING</i>	SUPERVISOR
YOUR DUTIES		
REASON FOR LEAVING		

I understand that if I am interviewed and considered for a position with the Town of Southern Pines, all my work history and references will be verified.

Signature of applicant

Date