APPLICATION FOR EMPLOYMENT Town of Ramseur, North Carolina P.O. Box 545 724 Liberty Street Ramseur, NC 27316

The Town of Ramseur is an Equal Opportunity Employer. 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.

Applications may be mailed to the above address, faxed to 336-824-6624, or hand-delivered to the Ramseur Municipal Building at 724 Liberty Street.

INSTRUCTIONS: This application will be used as part of the examination process, so it is important that you complete all sections of this application completely, accurately, and legibly. **Unsigned or incomplete applications will not be considered.** Applications must be postmarked by the posted closing date in order to ensure consideration.

GENERAL INFORMATION 1) Position applied for: _____ 2) Name: ___ First Middle 3) Address: _ Street and Number or PO Box City State Zip 4) Telephone: _____ Home Business 5) Driver's License State: _____ 7) Is your driver's license a Commercial Driver's License (CDL)? If Yes No yes, indicate class: 8) Are you at least 18 years of age? Yes No If no, please provide proof of eligibility to work. 9) Have you ever been employed with the Town of Ramseur? If Yes No yes, give date _____ 10) Have you ever filed an application with the Town of Ramseur? If Yes No yes, give date 11) Are you currently employed? Yes No 12) May we contact your present employer about your qualifications and work Yes No history? 13) 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 14) Are you a citizen of the United States or legally authorized to work in the Yes No United States? (Proof of citizenship or immigration status is required prior to employment.)

Yes

No

15) Do you have any relatives presently employed by the Town of Ramseur?

	of a criminal record does										
	Factors such as type of of ob for which you are appl		and le	ngtr	i ot tin	ne sinc	e con	viction v	vIII be	evalua	ated ir
	used a name other than t			this	applic	ation?	Yes	No	If ye	es, ple	ase
18) When would yo	u be available to start wo	rk?						-			
EDUCATION 19) Circle highest s	chool year completed: 1	2	3	4	5	6	7 8	3 9	10	11	12
20) High school: Na	ame		L	oca	tion _						
•	ved a high school diploma	a or eq	uivale	ncyʻ	?			Yes	No		
Education beyond High School	Name and Location	Y	cle No ears oplete			ar of uation		gree/ ificate	Maj	or Suk	oject
22) College or University		1 2	2 3	4							
23) Graduate or Professional		1 2	2 3	4							
24) Other Education		1 2	2 3	4							
25) List any profess	AND QUALIFICATIONS:	es or o				a the pe	anition man	formbi	ah yay		
applying:	aining classes or worksh	ops att				——————————————————————————————————————		TOT WITH		e	
27) Summarize spe experience.	cial job-related skills and	qualifi	cation	s ac	quired	d from e	emplo	yment o	or othe	r	

<i>MPLOYMENT EXPERI</i> at below vour entire wo		ord starting with your prese	nt or most recent position. Include
y military service assig	nments and any s	self-employment. Please ac	count for periods of unemploymer
eparate sheets with add It be a substitute for co		•	es may also be attached, but shall
1. Current or most re	cent employment		
Job Title:		Starting Salary:	Present or Final Salary:
Date Employed:		Date Separat	ted
Name, address, t	elephone of empl	oyer:	
Full time for:	Yrs Mo	os. Part time for:	Yrs Mos.
No. of employees			
140. Of Chiployees	you supervised:	Name of imr	nediate supervisor:
			mediate supervisor:
		Name of imres and accomplishments:	nediate supervisor:
			mediate supervisor:
			nediate supervisor:
			nediate supervisor:
Description of du	ties, responsibilitie		
Description of du	ties, responsibilitie	es and accomplishments:	
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Reason for leaving 2. Next most recent of Job Title:	ties, responsibilitie	es and accomplishments:	
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Description of du Reason for leavir 2. Next most recent e Job Title: Date Employed: Name, address, t Full time for:	employment:	Starting Salary: Date Separat oyer: os. Part time for:^	Final Salary:

Reason for leaving:

Job Title:			_ Starting Salary: _	 	Final Salary:
Date Employed:			Date Sep		
Name, address, t	elephone of	f employer	. :		
Full time for:	Yrs	Mos.	Part time for:	Yrs	Mos.
No. of employees	you super	vised:	Name of	f immediate	e supervisor:
Description of dut	ties, respon	sibilities aı	nd accomplishment	s:	
Reason for leavin	ıg:				
Reason for leavin	g:				
ext most recent e	employment	:			
ext most recent e	mployment	:	_ Starting Salary: _		Final Salary:
ext most recent e Job Title: Date Employed: _	employment	:	_ Starting Salary: _ Date Sep	parated	Final Salary:
ext most recent e Job Title: Date Employed: _	employment	:	_ Starting Salary: _	parated	Final Salary:
ext most recent e Job Title: Date Employed: _ Name, address, to	employment	: f employer	_ Starting Salary: _ Date Sep	parated	Final Salary:
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ext most recent e Job Title: Date Employed: _ Name, address, to Full time for: No. of employees	elephone ofYrs	: f employer Mos. vised:	_ Starting Salary: Date Sep :: Part time for: Name of	parated Yrs f immediate	Final Salary:

REFERENCE INFORMATION

Please list three persons who are not related to you and who have a definite knowledge of your work. Do not repeat the names of supervisors listed in the Employment Information section of the application.

1.	Name:	
	Street or Business Address:	
	City, State, Zip:	
	Home phone:	Business phone:
2.	Name:	
	Street or Business Address:	
	City, State, Zip:	
	Home phone:	Business phone:
3.	Name:	
	Street or Business Address:	
	City, State, Zip:	
	Home phone:	Business phone:
	ARATION OF APPLICANT	
		I complete to the best of my knowledge. I authorize sapplication and release of pertinent information to the
		iving at an employment decision. In the event of my
		ding information given in my application and/or interview(s)
•	suit in discnarge. I understand, also, th of Ramseur.	at I am required to abide by all rules and regulations of the
	Signature of Applican	t Date