

PERSONAL DATA

Are you legally authorized to work in the United States? Yes No

Have you ever been convicted of any offense against the law (including minor traffic violations)? Yes No

(Note: The City of Asheboro does **not** consider a conviction to be an automatic bar to employment. State law allows the applicant to not refer to any arrest, charge, or conviction that has been expunged.)

If yes, please explain the nature of the conviction and the final disposition of the case. _____

Do you have any relatives currently employed by the City of Asheboro? Yes No

If yes, who, in what position and in what department are they employed? What is the relationship? _____

Please indicate any special skills, accomplishments, special training or published works you have which are relevant to the position for which you are applying. _____

REFERENCE DATA

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 Data section.

Name _____ Preferred Phone: _____

(Street & No.) (City) (State) (Zip)

Name _____ Preferred Phone: _____

(Street & No.) (City) (State) (Zip)

Name _____ Preferred Phone: _____

DECLARATION OF APPLICANT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all information and statements contained in this application. I further authorize the release by 3rd parties of any and all information requested by the City of Asheboro for the evaluation of my application for employment. In the event of my employment, I understand that false or misleading information given in my application or interview(s) as well as a failure to abide by all rules and regulations of the City of Asheboro may result in the termination of my employment.

If I receive a conditional offer of employment, I understand that I must consent to and cooperate with a physical examination, drug screening and a more thorough background investigation in order to complete the hiring process. I also understand and agree that employment with the City of Asheboro is contingent on the successful completion of any and all items listed in the conditional offer of employment.

I understand and agree that if an offer of employment is made to me, such employment will be considered employment at will, which means that I will not be offered a contract and that employment with the city may be terminated at any time by either me or the City without cause.

Signature _____ Date _____



APPLICATION FOR EMPLOYMENT

City of Asheboro
Human Resources Department 225
East Academy Street
Asheboro, NC 27203

Please be sure that you complete all sections of this application completely and accurately to the best of your ability. Your application will be used as a part of the evaluation process and, therefore, should accurately represent your best effort. (For some positions you may be asked to complete a supplemental application.) Indicate one position only on application.

ANSWER ALL QUESTIONS—PLEASE PRINT OR TYPE YOUR NAME

POSITION APPLIED FOR _____ DATE _____

NAME _____
(Last) (First) (Middle)

PRESENT MAILING ADDRESS:

(Street & No.) (City) (State) (Zip)

PERMANENT MAILING ADDRESS (IF DIFFERENT):

(Street & No.) (City) (State) (Zip)

TELEPHONE _____

(Home) (Business) (Other—indicate whose number) (Mobile)

EMAIL ADDRESS _____

DO YOU HAVE A VALID DRIVER'S LICENSE? YES NO STATE _____ NUMBER _____

TYPE: REGULAR COMMERCIAL CLASS: A B C ENDORSEMENTS: _____

It is the policy of the City of Asheboro to foster, maintain and promote equal employment opportunity. Offers of employment are made on the basis of an applicant's qualifications for the job and without regard to age, sex, race, color, national origin, disability, genetic information, religion, veteran status or political affiliation.

SKILLS DATA

Data Entry WPM: _____
 Kind of office equipment operated: _____

 Kind of computer software used: _____

MILITARY DATA

Are you a veteran? Yes No
 Branch of service: _____
 Dates of active duty: _____
 Service number: _____
 Rank upon separation: _____
 Were you honorably discharged? Yes No

EDUCATION (Give Complete Educational History Below)

	Name and Location	# Years Completed	Did you graduate?	Degree/Certificate	Major Subject
High School			<input type="checkbox"/> Diploma <input type="checkbox"/> Equivalency <input type="checkbox"/> No		
College or University					
Graduate or Professional School					
Other Education					

EMPLOYMENT DATA

Please provide your employment history beginning with your present or most recent employer and list all positions held, including military, part-time, summer and significant volunteer work for the last 10 years. If additional space is needed to list your 10-year work history, or if you would like for experience beyond the requested 10-year time period to be considered, please place this information on additional sheets and attach these sheets to the end of this application.

Job title _____ Starting Salary _____ Present/Final Salary _____

Date Employed:
Date Separated:
Full Time: Yrs. Mos.
Part Time: Yrs. Mos.
If Part Time, number of hours worked per week

Name and address of employer: _____

 Description of duties, responsibilities and accomplishments: _____

 Number of employees supervised by you: _____
 Name of immediate supervisor: _____
 Phone number of supervisor: _____
 Reason for leaving: _____
 May we contact your present employer? Yes No
 If no, please list the name and phone number of someone knowledgeable of your work who we may contact: _____

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