



APPLICATION FOR EMPLOYMENT TOWN OF KURE BEACH

117 Settlers Lane, Kure Beach, NC 28449

Position(s) applied for _____

Date _____

(Please Print)

Do not type. This application is to be completed by the individual applying for the position.

PERSONAL

Name _____
(LAST) (FIRST) (MIDDLE)

Name under which you have worked or been educated, if different from current name: _____

Current Mailing Address _____

Telephone: Home _____ Business _____ Other _____

Person to be notified in case of emergency _____

Complete Address _____ Telephone No. _____

Are you a US citizen? ☐ Yes ☐ No If no, are you authorized to work in the US? ☐ Yes ☐ No

Have you ever been convicted of a crime, excluding misdemeanors and minor traffic violations? ☐ Yes ☐ No

If yes, describe in full _____

Are you now under charges for any offense against the law? _____

Driver's License No. _____ State _____ Class _____ Exp Dt _____

If required for job, would you have access to vehicle to carry out the duties of the position? ☐ Yes ☐ No

Have you ever worked for the Town of Kure Beach before? ☐ Yes ☐ No

If yes, in what position did you work? _____ Dates worked _____

Are you related by blood or marriage to any person now employed by the Town of Kure Beach? ☐ Yes ☐ No

If yes, give name(s) & relationship(s) _____

Are you currently employed? ☐ Yes ☐ No Can we contact your current employer? _____

If needed, I am willing to work: (choose all that apply) ☐ Days ☐ Evenings ☐ Weekends ☐ Holidays

Available start date for position for which you are applying _____

EDUCATION

Give your complete educational history, below. (Verification may be required)

Name of Elementary or High School _____ City & State _____

Diploma? ☐ GED? ☐ Circle highest school year completed 1 2 3 4 5 6 7 8 9 10 11 12

Education Beyond High School	Name of School and Location	Attended		Circle # Years Complete	Major	Degree and Year Received
		From	To			
		Mo. Yr.	Mo. Yr.			
College or University				1 2 3 4		
Graduate or Professional				1 2 3 4		
Other				1 2 3 4		

List fields of work for which you are licensed, registered or certified giving date(s) and source(s) of issuance.

List typing and shorthand skills, machines you can operate, and other skills in which you are proficient.

Do you have any specific training relative to the position for which you are applying?

MILITARY

Were you in the US Armed Forces? ☐ Yes ☐ No If yes, what branch? _____

Dates of Duty: From _____ to _____ Highest Rank _____ Rank at Separation _____

List Duties in Service including Special Training _____

Are you currently a member of the military reserves or National Guard? ☐ Yes ☐ No Branch _____

Current Rank _____ Current duties and/or special training _____

Do you have any specific training or information relative to the position for which you are applying?

WORK EXPERIENCE – Provide information on any work experiences you have had including Military, Volunteer, Internships and formal employment. Begin with your current or last work experience. If more space is needed, you may attach a continuation sheet.

A. Title of present or last position _____ Starting Salary _____

Date employed		
Date separated		
Full-time	Years	Months
Part-time	Years	Months
If part-time, number of hours worked per week		

Name & title of Supervisor _____ Ending Salary _____

Employer _____

Address _____

Duties _____

Reason for leaving _____

B. Title of present or last position _____ Starting Salary _____

Date employed		
Date separated		
Full-time	Years	Months
Part-time	Years	Months
If part-time, number of hours worked per week		

Name & title of Supervisor _____ Ending Salary _____

Employer _____

Address _____

Duties _____

Reason for leaving _____

C. Title of present or last position _____ Starting Salary _____

Date employed		
Date separated		
Full-time	Years	Months
Part-time	Years	Months
If part-time, number of hours worked per week		

Name & title of Supervisor _____ Ending Salary _____

Employer _____

Address _____

Duties _____

Reason for leaving _____

D. Title of present or last position _____ Starting Salary _____

Date employed		
Date separated		
Full-time	Years	Months
Part-time	Years	Months
If part-time, number of hours worked per week		

Name & title of Supervisor _____ Ending Salary _____

Employer _____

Address _____

Duties _____

Reason for leaving _____

E. Is there any other prior employment experience information you feel is relevant to evaluating your qualifications for this position?

PERSONAL REFERENCES

Please provide three personal references of people, other than relatives or past employers, who can provide information about your character, ability, experience, personality and other qualities.

1. Name _____ Home Phone _____ Business Phone _____
Mailing Address _____
Relationship (ex.: co-worker, friend, Pastor, etc.) _____ Years Acquainted _____

 2. Name _____ Home Phone _____ Business Phone _____
Mailing Address _____
Relationship (ex.: co-worker, friend, Pastor, etc.) _____ Years Acquainted _____

 3. Name _____ Home Phone _____ Business Phone _____
Mailing Address _____
Relationship (ex.: co-worker, friend, Pastor, etc.) _____ Years Acquainted _____
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CERTIFICATE OF APPLICANT

I hereby certify that all information in this application is true and correct to the best of my knowledge, and I agree to permit the investigation of each statement made by me hereon unless otherwise indicated. I understand that my employment may be contingent upon passing a physical examination including a substance abuse screening. Employment is also subject to an initial probationary period and verification that age and citizenship/visa status meet legal requirements. I further understand that any misstatement on this application may be cause for discharge.

I do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Town of Kure Beach, whether the said records are of a public, private, or confidential nature. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information. A photocopy of this release statement will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

Full Signature (include maiden name)

Date