



**TOWN OF MOCKSVILLE
EMPLOYMENT APPLICATION**

Human Resources
171 S. Clement Street
Mocksville, NC 27028

Phone: 336-753-6700 Fax: 336-751-9187

Please complete all sections of this application to the best of your ability. Your application will be used as part of the examination process and, therefore should represent your best efforts. Unsigned and incomplete applications may not be considered. Once submitted, application materials become the property of the Town. Applications must be returned by 5:00pm of the "Position Closing Date" to ensure consideration. If a position is posted as "Open Until Filled," apply as soon as possible, because the position may close without notice. The Town only accepts officially signed applications for employment. Applications must be completed in ink or typed.

PERSONAL DATA:

Name _____

Last

First

Middle

Mailing Address _____

Street

City

State

Zip

Phone/other number where you can be reached _____

Email address _____

AVAILABILITY:

When are you available to begin employment? _____

Type of Employment Desired: Full-Time _____ Part-Time _____ Temporary _____ Seasonal _____

Position Applied For _____ Date of Application _____

EDUCATIONAL BACKGROUND:

Name and Location	Years Completed	Did you graduate?	Course of Study
High School			
College			
Other			

If you did not graduate from high school, have you passed the High School Equivalency Test? Yes No

TRAINING:

List fields of work for which you are licensed, registered, or certified. Include date of issuance, state where license was issued, and license/registration/certificate number if applicable:

If position applied for calls for specific courses, indicate courses and credit received.

SKILLS:

Indicate skills, knowledge, and abilities in areas which relate to the position you are applying for.

REFERENCES:

List three people who are not related to you who have definite knowledge of your qualifications for the position for which you are applying, such as past supervisors or co-workers.

Name, Occupation, and Address	Telephone	Years Known
	()	
	()	
	()	

GENERAL INFORMATION:

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

Have you ever been convicted of a misdemeanor or a felony? (In North Carolina, a minor traffic offense not punishable by imprisonment is identified as an "infraction" and is not included in the question.)

Yes No

If yes, please explain: _____

NOTE: A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, how recent the offense was nature of the crime and type of job for which you are applying will be considered.

Do you have a valid driver's license? Yes No

Are you a former employee of the Town of Mocksville? Yes No

If yes, please indicate dates of employment and position _____

Are you subject to call for active military duty or training? Yes No

If yes, what form and when _____

EMPLOYMENT HISTORY: Use a separate section for each position. Describe in detail all work experience beginning with your present or most recent position.

Employer	Address	Telephone ()
Job Title	Name of Supervisor	No. Supervised by You
Job Duties (be specific)		
Date Employed (mo/yr)	Full-time or part-time?	Full-time Part-time
Date Separated (mo/yr)	If part-time, no. of hours per week	
Starting Salary: \$ per	Reason for leaving:	
Ending Salary: \$ per		

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Date Separated (mo/yr)	If part-time, no. of hours per week	
Starting Salary: \$ per	Reason for leaving:	
Ending Salary: \$ per		

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Date Employed (mo/yr)	Full-time or part-time?	Full-time Part-time
Date Separated (mo/yr)	If part-time, no. of hours per week	
Starting Salary: \$ per	Reason for leaving:	
Ending Salary: \$ per		

CERTIFICATE OF APPLICANT

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. I further understand that this is an application for employment and that no employment contract is being offered. I understand that if I am employed, such employment is for no definite period of time and that the Town of Mocksville can change wages, benefits and conditions at any time.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information. I have read and understand the above.

I certify that if I am a male between the ages of 18 and 26, I am aware of and in compliance with all applicable registration requirements of the Military Selective Service Act. (NC GS 143B-421.1)

Signature of applicant _____ Date _____