

TOWN OF GREEN LEVEL EMPLOYMENT APPLICATION

An Equal Opportunity/Affirmative Action Employer

Applications may be hand delivered to 2510 Green Level Church Road, Burlington, NC 27217

Fill out all sections **COMPLETELY** and to the best of your ability. Your application will be used as part of the examination process and, therefore, should represent your best effort. **Unsigned, or incomplete applications will not be considered**. Once submitted, application materials become the property of the Town. An application must be received in Town Hall by 5 pm on the closing date posted to ensure consideration. The Town does **not** accept FAXED applications. Photocopied applications must have an original signature and current date. If a position is posted as "may close without notice," **APPLY IMMEDIATELY**.

CURRENT INFORMATION

(1) POSITION TITLE				DATE:	
(2) When will you be av	vailable for employment?	(i.e. immediately, 2 we	eks notice)		
(3) Are you seeking	[] Full-time regular	[] Part-time regular	[] Temp./prefe	r regular []Tempor	ary Only
(4) NAME:					
	Last)	(First)		(Middle)	
(5) ADDRESS:	Street & No. or P.O. Box	City		State	Zip
(6) HOME TEL # ()	BUS. TELE	PHONE # ()_		
E-MAIL ADDRESS			(if appl	icable)	
(7) Are you 18 or older	?[]Yes[]No If NO, w	vhat is your birth date?			
		·			
GENERAL IN			r the and of this appli	action	
If you need to explain any	y answer, use the space und	el EXPLANATIONS neal	r the end of this appli		
(8) Apart from absence	es for religious observance	es, check conditions th	at you are willing to	o accept.	
Occasional: Regular: Frequent	[] night work [] weel		e [] rotating shifts [] rotating shifts [] rotating shifts [] rotating shifts	s [] "on-call"	
	n employed with the Town what department an <u>d wh</u>]Yes []No		
	to the Town of Green Lev e what position and when:]Yes []No		
(11) Are you willing to	accept a salary within the	advertised normal star	rting salary range?	[]Yes []No	
	ere you previously related ame, relationship and dep				
(13) Are you able to pe	erform all of the duties of th	he job you have applie	d for?	[]Yes []No	
record will not necessa	en convicted of a felony? arily exclude you from emp e offense, and nature of th	oloyment. Factors such	n as age at time of	offense, rehabilitatio	n efforts,
(15) Are you an Americ	can citizen or do you curre	ently have authorizatior	n to work in the U.S	5.? []Yes [] No
	y of your education or em explain under EXPLANA		under another nan	ne? []Yes [] No

EDUCATION

(25)

Provide your complete history

(17) Indicate highest school year completed: (i.e. 8, 12, 16)

(18) Name of High School ______ City _____ State_____

(19) Have you received a high school diploma or equivalent? [] Yes [] No

Education Beyond	Name and Location	Ma	nded om Mo.	V.	Did You Graduate?	Credit Hours	Degree, Diploma, Certificate Earned or # of Yrs.	Major Minor
High School College(s) University(ies)				<u>тг.</u>	Yes No	nours	or # of frs.	MITO
Graduate or Professional Schools					Yes No			
Technical Institutes, Internship, Other					Yes No			

KNOWLEDGE, SKILLS & ABILITIES

(23) Please list any knowledge, skills, or abilities you have that you feel are applicable to the position for which you are applying. Include skills with equipment or machines you can operate. If you wish consideration for a secretarial/clerical position, indicate typing speed and word processing software packages known and/or used.

(a)	(e)
(b)	(f)
(c)	(g)
(d)	(h)

REGISTRATIONS, LICENSES, CERTIFICATIONS

(24) List fields of work for which you have been registered, licensed or certified:

Registration:	State:	No:	Exp. Date:
Registration:	State:	No:	Exp. Date:
Other:			
Please list your VALID DRI driver's license, please put			nich it was issued. If you do not have a State :
le vour driver's license a Co	mmoroial Drivor's Licons		

(26)	Is your driver's license a Commercial Driver's License?	[]Yes	[]No
	If YES, indicate the class		

EMPLOYMENT

Record your complete work history in the spaces below. If needed, additional sheets containing the same information and in the same format are acceptable. BEGIN with your current or most recent position. Include military and related volunteer experience. Be sure to account for gaps in your employment history. ALL SPACES MUST BE COMPLETED OR MARKED N/A (not applicable). "See attached resume" is NOT acceptable in the duties space.

A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE	Starting Salary	Last Salary
Date employedD	Date SeparatedTelephone # (
Employer or company	Telephone # ()	
Employer or company address		
Name and Title of most current supervisor	rsMos# of employees supervised by you	
If you worked part-time, the number of hours wo		
DUTIES IN ORDER OF IMPORTANCE		
REASON FOR LEAVING or desiring a change		
B. NEXT MOST RECENT EMPLOYMENT	(or explain gap in employment)	
		Last Salary
		Last Salary
JOB TITLE Date employed D	Starting Salary Date Separated	Last Salary
JOB TITLE Date employed D Employer or company	Starting Salary Date SeparatedTelephone # (_)	Last Salary
JOB TITLE Date employed D Employer or company Employer or company address	Starting Salary Date SeparatedTelephone # (_)	Last Salary
JOB TITLE Date employed D Employer or company Employer or company address Name and Title of most current supervisor	Starting Salary Date Separated Telephone # (_)	
JOB TITLE Date employed D Employer or company Employer or company address Name and Title of most current supervisor Full-time for: YrsMosPart-time for: YrsMo	Starting Salary Date Separated Telephone # (_) os _# of employees supervised by you	
JOB TITLE Date employed D Employer or company Employer or company address Name and Title of most current supervisor Full-time for: YrsMosPart-time for: YrsMo If you worked part-time, the number of hours wo	Starting Salary Date SeparatedTelephone # (_) os# of employees supervised by you orked per week	
JOB TITLE Date employed D Employer or company Employer or company address Name and Title of most current supervisor Full-time for: YrsMosPart-time for: YrsMo If you worked part-time, the number of hours wo	Starting Salary Date Separated Telephone # (_) os _# of employees supervised by you	
JOB TITLE Date employed D Employer or company Employer or company address Name and Title of most current supervisor Full-time for: YrsMosPart-time for: YrsMo If you worked part-time, the number of hours wo	Starting Salary Date SeparatedTelephone # (_) os# of employees supervised by you orked per week	
JOB TITLE Date employed D Employer or company Employer or company address Name and Title of most current supervisor Full-time for: YrsMosPart-time for: YrsMo If you worked part-time, the number of hours wo	Starting Salary Date SeparatedTelephone # (_) os# of employees supervised by you orked per week	

REASON FOR LEAVING

C. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE	Starting SalaryLast Salary	
Date employed Date Separate	d	
Employer or company	Telephone # (_)	
Employer or company address		
Name and Title of most current supervisor		
Full-time for: YrsMosPart-time for: YrsMos# of emp	oyees supervised by you	
If you worked part-time, the number of hours worked per wee	k	
DUTIES IN ORDER OF IMPORTANCE		

REASON FOR LEAVING

D. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

Starting Salary	Last Salary
	-
Telephone # (_)_	
s supervised by you	
	Telephone # (_)

REASON FOR LEAVING

E. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE		Starting Salary	Last Salary	
Date employed	Date Separated			
Employer or company		Telephon	e # (_)	
Employer or company address				
Name and Title of most current supervisor				
Full-time for: YrsMosPart-time for: Yrs _				
If you worked part-time, the number of hours	worked per week			
DUTIES IN ORDER OF IMPORTANCE				
REASON FOR LEAVING				

F. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE		_Starting Salary	Last Salary
Date employed	Date Separated		
Employer or company	-	Telephone # (_)	
Employer or company address			
Name and Title of most current supervisor			
Full-time for: YrsMosPart-time for: Yrs	_Mos _# of employees sup	pervised by you	
If you worked part-time, the number of hou	rs worked per week		
DUTIES IN ORDER OF IMPORTANCI	<u> </u>		

REASON FOR LEAVING

(27) Have you had disciplinary action taken against you in the past 12 months?? []Yes []No If YES, explain under EXPLANATIONS. (A YES will not automatically disqualify you.)
 (28) a.) Have you ever been dismissed or forced to resign from any job held? [] Yes [] No b.) Were you dismissed or forced to resign for disciplinary reasons? [] Yes [] No If YES to "a" or "b", explain under EXPLANATIONS. (A YES will not automatically disqualify you.)
(29) May we contact your present employer for reference prior to an interview (if granted)? [] Yes [] No If you are not currently employed, please check here N/A (). If NO, explain under EXPLANATIONS.

EXPLANATIONS

ITEM #	
ITEM #	
ITEM #	
ITEM #	

Certification and Release (MUST BE SIGNED AND DATED BELOW)

- To the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly or negligently misrepresented, falsified or omitted any information during the application process, or have made any changes to the format or wording of this application form, I may be disqualified for employment consideration or dismissed from employment with the Town of Green Level.
- I authorize my current and former employers to give any information regarding me or my employment, whether or not it is on their records. I hereby release them from any damage whatsoever for issuing same.
- I also authorize educational institutions which I attended to reveal my scholastic ratings, as well as degrees or certificates earned, to the Town of Green Level; and associations, registration and licensing boards and to others to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision of State or Federal law, I expressly waive any right I have to review information the Town receives from an employer or educational institution under a promise of confidentiality.
- I also permit the Town of Green Level to conduct a Police, Court, Credit and/or Motor Vehicle Records Investigation of my background.
- I understand that if I apply or have applied for certain jobs, I may be tested for drug and alcohol use to determine if I am currently abusing these substances. I consent to the testing and understand that the results could preclude my appointment.
- I understand and acknowledge that should I be employed by the Town of Green Level, then I serve "at will". This means that I may be terminated at any time with or without cause. I further understand that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically approved by the Town Administrator

SIGNATURE

DATE

SUPPLEMENT TO TOWN OF Green Level EMPLOYMENT APPLICATION

The Town of Green Level is an Equal Opportunity Employer. Please complete this form in order for us to comply with the reporting requirements of the Equal Employment Opportunity Commission. <u>This form will be separate from your employment application</u>. Other than the information you provide in Section I, the information on this form will not be used in any way in our selection process or for any personnel action following employment. It will be maintained in personnel files which must be kept confidential under State law. Public disclosure of this information without your consent would be a violation of state general statutes.

	ION APPLIED FOR:		
1. FUSH	ION APPLIED FOR.		
II. NAME			
	Last	First	Middle
III. SEX:	(Please circle)	Male	Female
IV. ETH	NIC CATEGORY: (Plea	se circle)	
White - (Drigins in any of the origi	nal peoples of Europe, N	orth Africa, or the Middle East.
Black - (Drigins in any of the Blac	k racial groups of Africa.	(Not Hispanic)
Hispanio	- Mexican, Puerto Rica	n, Cuban, Central, or Sou	th American or other Spanish Culture or origin regardless of race.
Asian or	Pacific Islander - Origi	ns in the Far East, South	east Asia, the Indian Subcontinent or the Pacific Islands.
America	n Indian or Alaskan Na	tive - Origins in any of the	e original peoples of North America.
HOW DI	D YOU LEARN OF THIS	OPENING: (Indicate below	w by placing a check beside the source)
	Job Line	ard Come to Municipal Pu	ilding
		ard Came to Municipal Bu ity List (where posted):	•
	Internet		

Other (specify):

SOCIAL SECURITY NUMBER (SSN): Providing this information as an applicant is voluntary and is only used as a personal identifier for internal record keeping. If you are applying for an HRSS position, you must provide your SSN for drug testing. It will be used in place of your name. Should you be employed, your social security number will be required for wage reporting, internal records and as a personal identifier for the Town's use.

SS#:

DRUG SCREENING

All FINAL applicants for high risk or safety sensitive positions (HRSS) must pass a drug screening process. Further information will be provided at the appropriate time in the employment process. OVERTIME COMPENSATION AGREEMENT

For employees subject to the overtime provisions of the Fair Labor Standards Act (FLSA), we generally allow the employee to choose between compensatory time or pay for overtime worked. However, either is subject to supervisory approval and may be affected by budgetary constraints.

SELECTIVE SERVICE REGISTRATION

If male and age 18 to 26, have you registered for Selective Service? (Please circle) Yes No If not, you will have 30 days to comply if selected for a position as required by Federal law.

CERTIFICATION (THIS FORM MUST BE SIGNED)

I certify that I have read and understand the information contained on this form, complied with the instructions provided, and have done so truthfully to the best of my knowledge.

Signature:

Date:

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