

**CURRENT INFORMATION** 

## Town of River Bend EMPLOYMENT APPLICATION

An Equal Opportunity/Affirmative Action Employer

45 Shoreline Drive River Bend, NC 28562

T 252.638.3870 F 252.638.2580

www.riverbendnc.org

Applications will be accepted only for positions for which the Town is recruiting and may be hand delivered or mailed to 45 Shoreline Drive, River Bend, NC 28562

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 by 4 pm on the closing date posted to ensure consideration. Photocopied applications must have an original signature and current date. If a position is posted as "open until filled" or "may close without notice," **APPLY IMMEDIATELY**.

| (1) POSITION TITLE   |   | DATE:                              |                 |  |  |  |
|--|---|------------------------------------|-----------------|--|--|--|
| (2) When will you be available for employment? (i.e. immediately, 2 weeks' notice)                           |   |                                    |                 |  |  |  |
| Are you seeking [ ] Full-time regular [ ] Part-time regular [ ] Temp./prefer regular [ ] Temporary Only      |   |                                    |                 |  |  |  |
| (4) NAME:  |   |                                    |                 |  |  |  |
| (4) NAME:(Last)  | (First)   | (Middle)                           |                 |  |  |  |
| (5) ADDRESS:   |   |                                    |                 |  |  |  |
| (5) ADDRESS: Street & No. or P.O. Box  | Town  | State                              | Zip             |  |  |  |
| (6) HOME TEL # ()E   | RUS TELEPHONE#( )   |                                    |                 |  |  |  |
| (0)1101112111 (  | )   |                                    |                 |  |  |  |
| E-MAIL ADDRESS   |   |                                    | (if applicable) |  |  |  |
| (7) Are you 18 or older? [ ] Yes [ ] No If NO,   |   |                                    |                 |  |  |  |
|  | what is your birth date?  |                                    |                 |  |  |  |
| GENERAL INFORMATION If you need to explain any answer, use the space un                                      | nder EXPLANATIONS near the end o  | of this application.               |                 |  |  |  |
| (8) Apart from absences for religious observance   | ces, check conditions that you ar                                       | e willing to accept                |                 |  |  |  |
| Occasional: [ ] night work [ ] weekend wo  | rk []overtime []rotating shifts   | s [ ] "on-call"                    |                 |  |  |  |
| Regular: [ ] night work [ ] weekend wo Frequent [ ] night work [ ] weekend wo                                | rk [ ] overtime [ ] rotating shifts rk [ ] overtime [ ] rotating shifts | s [ ] "on-call"<br>s [ ] "on-call" |                 |  |  |  |
| (9) Have you ever been employed with the Tow   |   |                                    |                 |  |  |  |
| If VES, what department and when:  |   |                                    |                 |  |  |  |
| If YES, what department and when:  |   |                                    |                 |  |  |  |
| (10) Have you applied to the Town before? [ $$ ]   | Yes [ ] No  |                                    |                 |  |  |  |
| If YES, indicate what position and when:   |   |                                    |                 |  |  |  |
| (11) Are you willing to accept a salary within the   | e advertised normal starting sala                                       | ry range?[]Yes                     | [ ] No          |  |  |  |
| (12) Are you now or were you previously related in any way to a Town employee? [ ] Yes [ ] No                |   |                                    |                 |  |  |  |
| If YES, give name, relationship and department:  |   |                                    |                 |  |  |  |
| (13) Are you able to perform all of the duties of  | the job for which you have applie                                       | ed? []Yes                          | [ ] No          |  |  |  |
| (14) Are you an American citizen or do you currently have authorization to work in the U.S.?  [ ] Yes [ ] No |   |                                    |                 |  |  |  |
| 15) Did you receive any of your education or er  |   | other name?                        |                 |  |  |  |

If YES, please explain under EXPLANATIONS.

| (17) Name of Hi   | nest school year completed: (i.e.<br>gh School  | ,                              |         | n                    |                           | State  |              |
|---|---|--------------------------------|---------|----------------------|---------------------------|--|--------------|
| (18) Have you re  | eceived a high school diploma or  | equivalent?                    | [ ]Y    | es []No              |                           |  |              |
| Education Beyond<br>High School                             | Name and Location   | Dates Att                      | То      | Did You<br>Graduate? | Credit<br>Hours<br>Earned | Degree, Diploma,<br>Certificate Earned<br>or # of Yrs. | Majo<br>Mino |
| ollege or<br>niversity                                      |   | mm/yy                          | mm/yy   | [ ]Yes               |                           |  | Major        |
| raduate or<br>rofessional<br>chools                         |   |                                |         | [ ] Yes<br>[ ] No    |                           |  | Major        |
|   |   |                                |         |                      |                           |  | Minor        |
| echnical Institutes,<br>ternship, Other                     |   |                                |         | [ ] Yes              |                           |  | Major        |
|   |   |                                |         |                      |                           |  | Minor        |
| (23) Please list a applying. Includ you have skill. (a) (b) | SKILLS & ABILITIES  any knowledge, skills, or abilities e skills with equipment or machir | nes you can c<br>(e)<br>(f)(g) | perate. | Also, indicate       | e any soft                | ware applications v                                    | vith which   |
|   | NS, LICENSES, CERTIFICATION  work for which you have been re                              | <del></del>                    | nsed or | certified:           |                           |  |              |
| ,   |   |                                |         |                      | Ex                        | p. Date:   |              |
|   |   |                                |         |                      |                           |  |              |
| Other:  |   |                                |         |                      |                           |  |              |
| driver's l  | ist your <b>VALID DRIVER'S LICEN</b><br>icense, please put "NONE" in the<br>::            | e blank –                      |         |                      | ch it was                 | issued. If you do no                                   | ot have a    |

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

**EDUCATION** Provide your complete history

(26)

## **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.

| 30B THEE   |                                 | JOB TITLE  |                                     |                  | Last Sala  | ry      |
|--|---------------------------------|--|-------------------------------------|------------------|--|---------|
| Date employed  |                                 |  | Da                                  | _ Date Separated |  |         |
| Employer or company _  |                                 |  |                                     |                  | _Telephone (                                       | )       |
| Employer or company ac   | ddress                          |  |                                     |                  |  |         |
| Name and Title of most   | current supe                    | ervisor  |                                     |                  |  |         |
| Full-time for: Yrs   | Mos                             | Part-time for: Yrs   | Mos                                 | # of employ      | ees supervised by                                  | y you _ |
| If you worked part-time,   | the number                      | of hours worked per wee  | k                                   |                  |  |         |
| DUTIES IN ORDER OF   | IMPORTAN                        | ICE  |                                     |                  |  |         |
|  |                                 |  |                                     |                  |  |         |
|  |                                 |  |                                     |                  |  |         |
| REASON FOR LEAVING   | 3 or desirin                    | g a change   |                                     |                  |  |         |
|  |                                 |  |                                     |                  |  |         |
|  |                                 |  |                                     |                  |  |         |
|  |                                 |  |                                     |                  |  |         |
|  |                                 | MENT (or explain gap i   |                                     |                  |  |         |
| B. NEXT MOST RECEN   | T EMPLOY                        |  | n employme                          | nt)              |  |         |
| B. NEXT MOST RECEN   | T EMPLOY                        | ′MENT (or explain gap i  | n <b>employme</b><br>g Salary       | nt)              | _Last Salary                                       |         |
| B. NEXT MOST RECEN  JOB TITLE  Date employed   | T EMPLOY                        | <b>'MENT (or explain gap i</b>   | n employme<br>g Salary<br>Separated | nt)              | _Last Salary                                       |         |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company  | T EMPLOY                        | <b>'MENT (or explain gap i</b><br>Startin  | n employme<br>g Salary<br>Separated | nt)              | _Last Salary<br>Telephone # (                      | )       |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company  Employer or company ac  | T EMPLOY                        | <b>'MENT (or explain gap i</b><br>Startin  | n employme<br>g Salary<br>Separated | nt)              | _Last Salary<br>Telephone # (                      | )       |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company  Employer or company ac  Name and Title of most of   | ddress                          | <b>/MENT (or explain gap i</b><br>Startin<br>Date S                                    | n employme<br>g Salary<br>Separated | nt)              | _Last Salary<br>Telephone # (                      | )       |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company  Employer or company ac  Name and Title of most of  Full-time for: Yrs   | ddress                          | MENT (or explain gap inStartinDate S   | n employme g Salary Separated       | <b>nt)</b>       | _Last Salary<br>Telephone # (<br>ees supervised by | )       |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company accompany accompany accompany accompany accompany accompand and Title of most of the formal statements and Title of most of the formal statements accompanies and Title of most of the formal statements accompanies and Title of most of the formal statements accompanies and the formal statements accompanies accompanies accompanies and the formal statements accompanies accompan | ddress current supe             | MENT (or explain gap inStartinDate ServisorPart-time for: Yrs                          | n employme g Salary Separated  Mos  | nt)              | _Last Salary<br>Telephone # (<br>ees supervised by | )       |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company accompany accompany accompany accompany accompany accompand and Title of most of the formal statements and Title of most of the formal statements accompanies and Title of most of the formal statements accompanies and Title of most of the formal statements accompanies and the formal statements accompanies accompanies accompanies and the formal statements accompanies accompan | ddress current supe             | MENT (or explain gap inStartinDate Servisor Part-time for: Yrs of hours worked per wee | n employme g Salary Separated  Mos  | nt)              | _Last Salary<br>Telephone # (<br>ees supervised by | )       |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company accompany accompany accompany accompany accompany accompand and Title of most of the formal statements and Title of most of the formal statements accompanies and Title of most of the formal statements accompanies and Title of most of the formal statements accompanies and the formal statements accompanies accompanies accompanies and the formal statements accompanies accompan | ddress current supe             | MENT (or explain gap inStartinDate Servisor Part-time for: Yrs of hours worked per wee | n employme g Salary Separated  Mos  | nt)              | _Last Salary<br>Telephone # (<br>ees supervised by | )       |
| B. NEXT MOST RECEN  JOB TITLE  Date employed  Employer or company act  Name and Title of most of  Full-time for: Yrs  If you worked part-time,  DUTIES IN ORDER OF   | ddress current super the number | MENT (or explain gap inStartinDate Servisor Part-time for: Yrs of hours worked per wee | n employme g Salary Separated  Mos  | nt)# of employ   | _Last Salary Telephone # ( ees supervised by       | )       |

NOTE: If more than two more sections are necessary to provide employment history, make copies of this page prior to populating the spaces.

## C. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment) JOB TITLE Starting Salary Last Salary Date employed \_Date Separated Telephone # ( ) Employer or company \_\_\_\_ Employer or company address Name and Title of most current supervisor Full-time for: Yrs \_\_\_\_\_ Mos \_\_\_\_ Part-time for: Yrs \_\_\_\_\_ # of employees supervised by you \_\_\_\_\_ If you worked part-time, the number of hours worked per week DUTIES IN ORDER OF IMPORTANCE REASON FOR LEAVING or desiring a change D. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment) JOB TITLE \_\_\_\_\_\_\_Last Salary \_\_\_\_\_Last Salary Date employed\_\_\_\_\_\_Date Separated \_\_\_\_\_ Employer or company address Name and Title of most current supervisor \_\_\_\_\_ Full-time for: Yrs \_\_\_\_\_ Mos \_\_\_\_ Part-time for: Yrs \_\_\_\_ Mos \_\_\_ # of employees supervised by you \_\_\_\_ If you worked part-time, the number of hours worked per week \_\_\_\_\_ DUTIES IN ORDER OF IMPORTANCE REASON FOR LEAVING or desiring a change (27) Have you had disciplinary action taken against you in the past 24 months? [ ] Yes [ ] No (If YES, explain under EXPLANATIONS. (A YES will not automatically disqualify you.) (28)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 (\_\_\_\_). If NOT, explain under EXPLANATIONS.

| <u>EXPLANATIONS-</u> If necessary, you may attach additional sheets for explanations. ITEM #   |   |
|--|---|
| ITEM#  |   |
| ITEM#  |   |
| ITEM#  |   |
| <ul> <li>Certification and Release (MUST BE SIGNED AND DATED BELOW)</li> <li>To the best of my knowledge and belief, the information given truly represents my background experience. I understand that if I have knowingly or negligently misrepresented, falsified or on information during the application process, or have made any changes to the format or wording application form, I may be disqualified for employment consideration or dismissed from employment the Town.</li> <li>I authorize my current and former employers to give any information regarding my employment whether or not it is on their records. I hereby release them from any damage whatsoever for it also authorize educational institutions which I attended to reveal my scholastic ratings, as we or certificates earned, to the Town; and associations, registration and licensing boards and to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision Federal law, I expressly waive any right I have to review information the Town receives from a or educational institution under a promise of confidentiality.</li> <li>I also permit the Town to conduct a Police, Court, Credit and/or Motor Vehicle Records Invest background where related to the job for which I am applying.</li> <li>I understand that if I apply or have applied for certain jobs, I may be tested for drug and alcohal determine if I am currently using or abusing these substances. I consent to the testing and unthe results could preclude my appointment.</li> <li>I understand and agree that if hired, I will be an at-will employee and subject to the Town's Huresources Policies and Procedure Manual. I understand that no employee or representative other than the Town Manager has any authority to enter into any agreement contrary to the fother only in writing. I further understand that this statement supersedes any prior oral or written understanding and bars any future oral understanding to the contrary.</li> </ul> | nitted any ng of this byment with  nt, or me ssuing it. ell as degrees others to on of State or an employer  tigation of my  nol use to aderstand that  uman of the Town oregoing and |

DATE\_\_\_\_\_

TRB Form #137 (10/25)

SIGNATURE\_\_\_\_