



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.**

CURRENT INFORMATION

(1) POSITION TITLE _____ DATE: _____

(2) When will you be available for employment? (i.e. immediately, 2 weeks' notice) _____

(3) Are you seeking Full-time regular Part-time regular Temp./prefer regular Temporary Only

(4) NAME: _____

(Last)

(First)

(Middle)

(5) ADDRESS: _____

Street & No. or P.O. Box

Town

State

Zip

(6) HOME TEL # (_____) _____ BUS. TELEPHONE # (_____) _____

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 under EXPLANATIONS near the end of this application.

(8) Apart from absences for religious observances, check conditions that you are willing to accept.

Occasional: night work weekend work overtime rotating shifts "on-call"

Regular: night work weekend work overtime rotating shifts "on-call"

Frequent: night work weekend work overtime rotating shifts "on-call"

(9) Have you ever been employed with the Town of River Bend? Yes No

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 advertised normal starting salary 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 applied? 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 employment experience under another name?

Yes No

If YES, please explain under EXPLANATIONS.

EDUCATION Provide your complete history

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

(17) Name of High School _____ Town _____ State _____

(18) Have you received a high school diploma or equivalent? Yes No

Education Beyond High School	Name and Location	Attended From				Did You Graduate?	Credit Hours	Degree, Diploma, Certificate Earned or # of Yrs.	Major Minor
		Mo.	Yr.	Mo.	Yr.				
College or University						<input type="checkbox"/> Yes <input type="checkbox"/> No			
Graduate or Professional Schools						<input type="checkbox"/> Yes <input type="checkbox"/> No			
Technical Institutes, Internship, Other						<input type="checkbox"/> Yes <input type="checkbox"/> 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. Also, indicate any software applications with which you have skill.

- (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: _____

(25) Please list your **VALID DRIVER'S LICENSE NUMBER** and the state in which it was issued. If you do not have a driver's license, please put "NONE" in the blank –
Number: _____ **State:** _____

(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 employed _____ Date Separated _____

Employer or company _____ Telephone # (____) _____

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 _____

B. 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: 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 _____

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 _____

Employer or company _____ Telephone # (____) _____

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 _____

D. 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: 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) 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 (). If NO, explain under EXPLANATIONS.

EXPLANATIONS- If necessary, you may attach additional sheets for explanations.

ITEM #

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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.
- I authorize my current and former employers to give any information regarding my employment, or me whether or not it is on their records. I hereby release them from any damage whatsoever for issuing it.
- I also authorize educational institutions which I attended to reveal my scholastic ratings, as well as degrees or certificates earned, to the Town; 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 to conduct a Police, Court, Credit and/or Motor Vehicle Records Investigation of my background where related to the job for which I am applying.
- 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 using or abusing these substances. I consent to the testing and understand that the results could preclude my appointment.
- I understand and agree that if hired, either the Town Manager or I has the right to terminate my employment at any time, with or without cause and with or without notice. I understand that no manger or representative of the Town other than the Town Manager has any authority to enter into any agreement contrary to the forgoing either now, in the past or in the future. I further understand that such an agreement must be in writing and signed by the Town Manager for it to be binding on either the Town or me. I further understand that this statement supersedes any prior oral or written understanding and bars any future oral understanding to the contrary.

SIGNATURE _____ **DATE** _____