

City of King

Employment Application

An Equal Opportunity/Drug Free Employer

229 South Main Street, PO Box 1132, King, NC 27021

336.944.6888 www.ci.king.nc.us

Fill our 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 and incomplete applications may not be considered. Once submitted, application materials become property of the City. All applications must be returned to the City Personnel Office by 5:00pm on the closing date posted to ensure consideration. The City only accepts originally signed applications for employment. The City does not accept applications by fax or e-mail. Applications must be completed in ink or typed.

CURRENT INFORMATION

Position applied for	_____	Date:	_____
When will you be available for employment	_____		
Name:	_____	_____	_____
	Last	First	Middle
Address	_____	_____	_____
	Street and Number or PO Box	City	State Zip
Telephone	_____	_____	_____
	Home	Business	Mobile
Are you 18 or older	<input type="checkbox"/> Yes <input type="checkbox"/> No		

GENERAL INFORMATION

Have you ever been employed with the City of King? If Yes, what department and when? Yes No

Have you ever applied to the City of King before. If Yes, indicate what position and when? Yes No

Will you accept employment requiring occasional or regular night work or weekend work or rotation shifts? Yes No

Are you now or were you previously related to any City Employee? If yes, give name and relationship. Yes No

Are you able to perform all the duties of the job for which you have applied for with reasonable accommodations? Please refer to the job description. Yes No

Have you ever been charged or convicted of a crime? If yes, explain. Yes No

Note: An arrest or conviction record is not an absolute bar to employment. The City will consider the nature and gravity of the offense, the time that has passed since arrest and conviction, and the nature of the job for which you have applied.

Are you an American citizen or do you currently have authorization to work in the United States? Yes No

EDUCATION

High School and Highest school year completed _____

High School

Grade Completed

Have you received a high school diploma or equivalent?

() Yes () No

Education Beyond High School	Name and Location	Did you Graduate?	Credit Hours	Degree, Diploma or Certificate Earned or Number of Years Completed	Major or Minor
College or University		Yes No			
College or University		Yes No			
Graduate or Professional School		Yes No			
Graduate or Professional School		Yes No			
Technical Institutes, Internship, Other		Yes No			
Technical Institutes, Internship, Other		Yes No			

SKILLS, KNOWLEDGE & ABILITIES

Please list any skills, knowledge, or abilities you have that you feel are applicable to the position(s) for which you are applying. Include skills with equipment or machines you operate including computer equipment and software packages you are familiar with.

REGISTRATIONS, LICENSES, CERTIFICATIONS

List fields of work for which you have been registered, licenses or certified.

Registration: _____ State: _____ Expiration Date _____

Registration: _____ State: _____ Expiration Date _____

Other: _____

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 _____

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. Begin with your current or most recent position. Include military and related volunteer experience. Attach sheets as necessary to account for your complete record. Be sure to account for gaps in your employment history.

Job Title	_____	Starting Salary	_____	Ending Salary	_____
Name and Title of Supervisor	_____				
Employer or company	_____				
Full time or part-time	_____	Number of employees supervised	_____		
Date Employed	_____	Date Separated	_____		
Duties	_____				
Reason for leaving					

Job Title	_____	Starting Salary	_____	Ending Salary	_____
Name and Title of Supervisor	_____				
Employer or company and address	_____				
Full time or part-time	_____	Number of employees supervised	_____		
Date Employed	_____	Date Separated	_____		
Duties	_____				
Reason for leaving					

Job Title	_____	Starting Salary	_____	Ending Salary	_____
Name and Title of Supervisor	_____				
Employer or company	_____				
Full time or part-time	_____	Number of employees supervised	_____		
Date Employed	_____	Date Separated	_____		
Duties	_____				
Reason for leaving					

OTHER INFORMATION

Have you had disciplinary action taken against you in the past 12 months of employment?

Yes No

If yes, please explain _____

Have you ever been dismissed or forced to resign from any job?

Yes No

If yes, please explain _____

May we contact your present employer or any employer identified in the EMPLOYMENT section for reference?

Yes No

If yes, please list the employers we may contact. If no, please explain.

PERSONAL REFERENCES

Name	Phone Number	Address	Relationship

I authorize the City of King to conduct a personal background investigation in connection with my application. This investigation may include information from educational institutions, police and/or court records, Department of Motor Vehicle records, listed personal references, previous employers and other appropriate sources.

I authorize the release of any information the City of King may request from the above sources. I further waive all rights to inspection or review of any information compiled.

I fully understand all information gained from such investigation is confidential.

I agree to provide any further information which may be requested and hereby certify that there are no willful or negligent misrepresentations, omissions, or falsifications in any of the applications or documents furnished or answers to questions. I am aware should any investigation disclose any willful misrepresentations, omissions, or falsifications that my application may be rejected. Additionally, I am aware that willful misrepresentations, omissions, or falsifications in any of the applications or documents furnished or answers to questions are grounds for termination should I be employed by the City of King.

I hereby release the City of King, its agents and representatives and any person(s) so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such document, records, and other information for the investigation made by the City of King.

Furthermore, I understand that employment with the City of King is contingent upon the successful completion of a drug screening test to be administered after an offer of employment is made. (Successful completion of the test means that the person tested negative for illegal drugs and substance abuse.)

SIGNATURE _____

DATE _____

SUPPLEMENT TO CITY OF KING
EMPLOYMENT APPLICATION

The City of King 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. This form will be separate from your employment application. This 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 violation of state general statutes. Should you be made an offer of employment, you social security number will be required for wage reporting and drug screen.

Position Applied for _____

Name _____
Last First Middle

Date of Application _____

Sex () Male () Female

Ethnic Category

- () White - Origins in any of the peoples of Europe, North America, the Middle East
- () Black - Origins in any of the Black racial groups of Africa
- () Hispanic - Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture or origin regardless of race
- () Asian/Pacific Islander - Origins in the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands
- () American Indian/Alaskan/Native - Origins in any of the original peoples of North America

How did you learn of this opening?

- () Newspaper _____
- () City Website () Job posting at City Hall
- () From a current employee of the City
- () Other _____

OVERTIME COMPENSATION AGREEMENT

For employees subject to the overtime provisions of the Fair Labor Standards Act (FLSA), we generally require the employee to accrue compensatory time. However, if the board approves and the budget permits, employees may be paid overtime.

SELECTIVE SERVICE REGISTRATION

If male and age 18 to 28, have you registered for Selective Service? () Yes () No

If not, you will have 30 days to comply if selected for a position as required by Federal Law.