



# HERTFORD

C O U N T Y

*North Carolina*



## APPLICATION FOR EMPLOYMENT

The County of Hertford maintains the policy of providing equal employment opportunities for all persons regardless of race, color, religion, sex, national origin, handicap, age, political affiliation, or any other non-merit factor. An Equal Opportunity Employer.

### APPLICANT INFORMATION

Position Applied for: \_\_\_\_\_ Date Available for Work: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone # \_\_\_\_\_ Secondary Phone # \_\_\_\_\_

Are you a U.S. Citizen?      Yes      No      If no, are you authorized to work in the U.S.?      Yes      No

Have you ever been convicted of a felony?      Yes      No      If yes, explain: \_\_\_\_\_

Have you ever worked for this company?      Yes      No      If yes, when? \_\_\_\_\_

Do you have any immediate family that works for Hertford County including Elected Officials?      Yes      No

If yes, please list their name(s) and relationship to you? \_\_\_\_\_

### EDUCATION

High School: \_\_\_\_\_ Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?      Yes      No

College: \_\_\_\_\_ Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?      Yes      No      Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Location: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?      Yes      No      Degree: \_\_\_\_\_

Other training, certifications or licenses held: \_\_\_\_\_

\_\_\_\_\_

List of Knowledge, Skills, Abilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### REFERENCES

Please list three **PROFESSIONAL** references

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**EMPLOYMENT**

**Please make sure to list all full-time and part-time employment history. List any gaps in employment over 90 days and reason. Make a copy of this page as needed to make sure all employment is listed and sign each page.**

Employer: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Job Title: \_\_\_\_\_ Employment Type: Part-time \_\_\_\_\_ Full-Time \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ May we contact this employer? Yes No

Employer: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Job Title: \_\_\_\_\_ Employment Type: Part-time \_\_\_\_\_ Full-time \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ May we contact this employer? Yes No

Employer: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Job Title: \_\_\_\_\_ Employment Type: Part-time \_\_\_\_\_ Full-time \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ May we contact this employer? Yes No

**ACKNOWLEDGEMENT AND AUTHORIZATION**

**PLEASE INITIAL: (Must be original signature, not typed)**

\_\_\_\_\_ I certify that all answers given herein are true and complete to the best of my knowledge.  
\_\_\_\_\_ I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.  
\_\_\_\_\_ In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_