



TOWN OF WOODFIN EMPLOYMENT APPLICATION

An Equal Opportunity / Affirmative Action Employer

Applications may be mailed or delivered to 90 Elk Mountain Road, Woodfin, NC 28804

<http://www.woodfin-nc.gov>

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. Photocopied applications must have an original signature and current date. If a position is posted as "may close without notice," **APPLY IMMEDIATELY.**

Position Title: _____ **Date:** _____

CURRENT INFORMATION

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

(2) Are you seeking: Full-time Regular Part-time Regular Part-time Seasonal Part-time Temporary

(3) NAME: _____
(Last) (First) (Middle)

(4) ADDRESS: _____
Street & No. or P.O. Box City State Zip

(5) MAIN TEL #: _____ OTHER TEL #: _____

(6) EMAIL: _____

(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 basis
Regular: Night work Weekend work Overtime Rotating shifts On-call basis
Frequent: Night work Weekend work Overtime Rotating shifts On-call basis

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

If yes, what department and when: _____

(10) Are you willing to accept a salary within the advertised normal starting salary range? Yes No

(11) Are you now, or were you previously, related in any way to a current town employee? Yes No

If yes, give name, relationship, and department: _____

(12) Are you able to perform all the duties of the job for which you are applying? Yes No

(13) Have you ever been convicted of a felony? Yes No

If yes, please explain under EXPLANATIONS near the end of this application.

NOTE: A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, length of time since offense, and nature of the crime will be taken into consideration.

(14) Are you an American citizen or do you currently have authorization to work in the US? Yes No

(15) Did you receive any of your education or employment experience under another name? Yes No

If yes, please explain under EXPLANATIONS near the end of this application.

EDUCATION (provide your complete history)

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

(17) Name and location of high school: _____

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

Education beyond High School	Name and Location	Circle number of years completed	Degree or diploma received
College(s) or University(ies)		1 2 3 4	
Graduate or Professional Schools		1 2 3 4	
Technical Institutes, Internship, Other		1 2 3 4	

KNOWLEDGE, SKILLS & ABILITIES

(19) 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) _____
- (b) _____
- (c) _____
- (d) _____
- (e) _____
- (f) _____
- (g) _____
- (h) _____

REGISTRATIONS, LICENSES, CERTIFICATIONS

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

Registration: _____ State: _____ No: _____ Exp. Date: _____

Registration: _____ State: _____ No: _____ Exp. Date: _____

Other: _____

(21) 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 Number line.

Number: _____ State: _____ Exp. Date: _____ CDL class: _____

EMPLOYMENT HISTORY

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 substitution.**

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

Job title: _____ Date employed: _____ Date separated: _____

Starting salary: _____ Last salary: _____

Employer: _____ Telephone #: _____

Employer address: _____

Name and title of most recent supervisor: _____

Full-time: Yrs _____ Mos _____ Part-time: Yrs _____ Mos _____ # of employees you supervised: _____

Reason for separation: _____

Duties in order of importance:

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

Job title: _____ Date employed: _____ Date separated: _____

Starting salary: _____ Last salary: _____

Employer: _____ Telephone #: _____

Employer address: _____

Name and title of most recent supervisor: _____

Full-time: Yrs _____ Mos _____ Part-time: Yrs _____ Mos _____ # of employees you supervised: _____

Reason for separation: _____

Duties in order of importance:

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

Job title: _____ Date employed: _____ Date separated: _____

Starting salary: _____ Last salary: _____

Employer: _____ Telephone #: _____

Employer address: _____

Name and title of most recent supervisor: _____

Full-time: Yrs ____ Mos ____ Part-time: Yrs ____ Mos ____ # of employees you supervised: _____

Reason for separation: _____

Duties in order of importance:

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

Job title: _____ Date employed: _____ Date separated: _____

Starting salary: _____ Last salary: _____

Employer: _____ Telephone #: _____

Employer address: _____

Name and title of most recent supervisor: _____

Full-time: Yrs ____ Mos ____ Part-time: Yrs ____ Mos ____ # of employees you supervised: _____

Reason for separation: _____

Duties in order of importance:

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

Job title: _____ Date employed: _____ Date separated: _____

Starting salary: _____ Last salary: _____

Employer: _____ Telephone #: _____

Employer address: _____

Name and title of most recent supervisor: _____

Full-time: Yrs ____ Mos ____ Part-time: Yrs ____ Mos ____ # of employees you supervised: _____

Reason for separation: _____

Duties in order of importance:

(22) Have you had disciplinary action taken against you in the past 12 months? Yes No

If yes, explain under EXPLANATIONS near the end of this application.

NOTE: A yes answer will not automatically disqualify you.

(23) Have you ever been dismissed or forced to resign from any job held? Yes No

(24) Were you dismissed or forced to resign for disciplinary reasons? Yes No

If yes to either of these questions, explain under EXPLANATIONS near the end of this application.

NOTE: A yes answer will not automatically disqualify you.

(25) May we contact your present employer for reference prior to an offer of employment? Yes No

If you are not currently employed, please check here: ____ (N/A)

If no, please explain under EXPLANATIONS near the end of this application.

EXPLANATIONS

Item # _____	_____ _____ _____
Item # _____	_____ _____ _____
Item # _____	_____ _____ _____
Item # _____	_____ _____ _____

CERTIFICATION AND RELEASE (must sign and date 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 me or my employment, unless otherwise indicated in this application. 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 Woodfin; 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 the information the Town receives from an employer or educational institution under a promise of confidentiality.
- I also permit the Town of Woodfin 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 acknowledge that should I be employed by the Town of Woodfin, then I serve "at will". This means that I may be terminated at any time. I further understand that this "at will" employment relationship may not be changed by any written document unless such change is specifically approved by the Town Administrator.

SIGNATURE: _____ **DATE:** _____

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