

# TOWN OF MOREHEAD CITY



## EMPLOYMENT APPLICATION

1100 Bridges Street - Morehead City, NC 28557  
252-726-6848  
www.moreheadcitync.org

*We welcome you as a prospective employee of the Town of Morehead City. In order to be fairly considered, answer all questions completely and accurately. No information in this application is intended to be used for discriminatory purposes. A resume may be attached, but not substituted for requested information.*

### CURRENT INFORMATION

Position Applied For \_\_\_\_\_ Date \_\_\_\_\_

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

Present Address \_\_\_\_\_  
Street Number & Name/PO Box City State Zip

Telephone \_\_\_\_\_  
Home Cell

Email Address \_\_\_\_\_ Date available for work \_\_\_\_\_

### GENERAL INFORMATION (Circle YES or NO and attach additional sheets if needed.)

NOTE: Your responses to these questions will not necessarily exclude you from employment. The specific facts of the situation will be taken into consideration.

- ◆ Have you ever been employed with the Town of Morehead City? If yes, when and what department? \_\_\_\_\_ YES NO
- ◆ Are you related by blood or marriage to any Town of Morehead City employee? If yes, give name, relationship and department. \_\_\_\_\_ YES NO
- ◆ Have you ever been convicted of an offense against the law other than a minor traffic violation? If yes, explain. \_\_\_\_\_ YES NO
- ◆ If you are subject to Military Selective Service registration, certify compliance by initialing on dotted line .....
- ◆ Have you ever been disciplined by an employer for absenteeism or tardiness? YES NO
- ◆ Have you ever been discharged or asked to resign by a former employer? If so, for what reason? \_\_\_\_\_ YES NO
- ◆ Driver's license number/State/Expiration date \_\_\_\_\_

### MILITARY HISTORY

- ◆ Have you ever served active duty in the United States military service? If yes, what branch? \_\_\_\_\_ YES NO  
Dates of duty: From \_\_\_\_\_ To \_\_\_\_\_
- ◆ Are you presently in the reserves or have any other obligation? If yes, explain. \_\_\_\_\_ YES NO

**EDUCATION**

Choose highest grade completed:

GED

College:

SCHOOLS	NAME & LOCATION	GRAD?	MAJOR/MINOR	TYPE OF DEGREE
High School		YES NO		
College(s) University(s)		YES NO		
Graduate or Professional		YES NO		
Other vocational, educational, technical, etc		YES NO		

Special training programs and seminars completed in the last five (5) years (list):

Licenses and certifications, especially those specific to job applied for (list with dates and sources):

Membership in professional, honorary, or technical organizations (list):

**SKILLS**

CHECK the following skills, experience, etc., which you have:

- CDL License : Type \_\_\_\_\_
- Sign Language \_\_\_\_\_
- Foreign Language (specify) \_\_\_\_\_
- Adding Machine/Calculator \_\_\_\_\_
- Typing (specify WPM) \_\_\_\_\_
- Microsoft Word \_\_\_\_\_

- Microsoft Excel \_\_\_\_\_
- Microsoft Access \_\_\_\_\_
- Microsoft Powerpoint \_\_\_\_\_
- MS Works \_\_\_\_\_
- Other Computer Skills (specify)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**EMPLOYMENT**

Record your complete work history. Begin with your current or most recent employer. Attach additional information as necessary to account for your full record. Be sure to account for gaps in your employment history. Related volunteer experience should also be listed.

<b>1) Current or Last Employer and Address:</b>			
Job Title:	Supervisor's Name:	Telephone Number:	# Supervised by You:
Date Employed (mo/yr)	Date Separated (mo/yr)	Full Time (yr(s)/mo)	Part Time (yr(s)/mo)
Starting Salary \$ per	Ending/Current Salary \$ per	Reason for Leaving	
List major duties in order of their importance in the job:			
MAY WE CONTACT EMPLOYER? .....Yes .....No			

<b>2) Employer and Address:</b>			
Job Title:	Supervisor's Name:	Telephone Number:	# Supervised by You:
Date Employed (mo/yr)	Date Separated (mo/yr)	Full Time (yr(s)/mo)	Part Time (yr(s)/mo)
Starting Salary \$ per	Ending/Current Salary \$ per	Reason for Leaving	
List major duties in order of their importance in the job:			
A 5MK 9`7CBH57H`9A D@CMØF 3` .....Mg` ..... Bc`			

<b>3) Employer and Address:</b>			
Job Title:	Supervisor's Name:	Telephone Number:	# Supervised by You:
Date Employed (mo/yr)	Date Separated (mo/yr)	Full Time (yr(s)/mo)	Part Time (yr(s)/mo)
Starting Salary \$ per	Ending/Current Salary \$ per	Reason for Leaving	
List major duties in order of their importance in the job:			
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**EMPLOYMENT (continued)**

<b>4) Employer and Address:</b>			
Job Title:	Supervisor's Name:	Telephone Number:	# Supervised by You:
Date Employed (mo/yr)	Date Separated (mo/yr)	Full Time (yr(s)/mo)	Part Time (yr(s)/mo)
Starting Salary \$ per	Ending/Current Salary \$ per	Reason for Leaving	
List major duties in order of their importance in the job:			
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**REFERENCES**

Please list people such as co-workers, teachers, friends, etc., who have knowledge of your qualifications for the position for which you are applying. Do not list family relatives. Unless they can no longer be reached at the addresses listed, do not list names of the supervisors noted on your employment record.

Name	Address	Telephone #	Relationship to You
Name	Address	Telephone #	Relationship to You
Name	Address	Telephone #	Relationship to You

I certify that I have given true, accurate and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registration and licensing boards and others to furnish whatever detail is available relating to my qualifications. I authorize investigation of all statements made in this application and understand that false information or documentation, or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action or dismissal if I am employed. In addition, I authorize the Town of Morehead City to 1) require a pre-employment drug test as a condition of my employment, and 2) conduct a Court and Motor Vehicle Records investigation of my background, should this be necessary. I understand that the information I have disclosed in my application, or which I have given to a representative of the Town of Morehead City in any other form, is very important to the Town of Morehead City and that it will rely heavily upon this information in making a decision of whether to hire me or not. 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 neglectfully misrepresented, omitted or falsified any information on this application, or have made any changes to the format or wording of this form, I may be disqualified for employment consideration or dismissed from employment with the Town of Morehead City.

Signature of Applicant (unsigned applications will not be processed)

Date

*Thank you for your interest in a position with the Town of Morehead City. Although everyone who applies cannot be hired, your application will be given every consideration.*

