



# TOWN OF CALABASH, NORTH CAROLINA

Post Office Box 4967 • 882 Persimmon Road • Calabash, NC 28467

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## **TOWN OF CALABASH**

# **Employment Application**

**PERSONAL INFORMATION**

Date:	Telephone Number:
Name:	Social Security Number:
Present Address:	
Permanent Address:	
Position applying for:	
Are you related by blood or marriage to any person employed by the Town ? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you are under 18 years of age, can you provide required proof of you eligibility to work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever filed an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If employed presently, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you prevented from lawfully becoming employed in this country because of a Visa or Immigration Status? <i>(Proof of citizenship of immigration status will be required upon employment)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
On what date would you be available to work?	
Are you available to work: <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Shift Work <input type="checkbox"/> Temporary	
Are you currently on "lay-off" status and subject to recall? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Can you travel if a job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you been convicted of a felony within the last 7 years? <i>(Conviction will not necessarily disqualify an applicant from employment.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please explain:	

**EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number (s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	

Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number (s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	

Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number (s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	

Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number (s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	

List professional, trade, business or civic activities and offices held.

You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

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List special skills you may have or equipment you can operate:

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Additional Comments:

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**EDUCATIONAL INFORMATION**

	Name & Location of School	Courses Studied	Years Completed	Did You Graduate?	List Type of Degree
Grammar					
High School					
College					
Graduate					
Other					

If you did not graduate high school, what was the highest grade completed?  
 Have you passed the high school equivalency?

List any special courses you have taken related to the position you are applying for.

**REFERENCE INFORMATION**

List three individuals including addresses and phone numbers, who have know you for at least one (1) year. These individuals cannot be related to you.

Name	Address	Phone Number

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any tie without any previous notice.

\_\_\_\_\_ Signature

\_\_\_\_\_ Date