



Application For Employment

1. **Position applied for:** _____ **Date** _____

2. **Name:** _____
(Last) (First) (Middle)

3. **Present Mailing Address:** _____
(Street & No. or RFD) (City) (State) (Zip)

4. **Permanent Mailing Address:** _____
(Street & No. or RFD) (City) (State) (Zip)

5. **Telephone: Home** () _____ **Bus.** () _____ **Fax** () _____

If none, where can you be reached by telephone? _____

Email address: _____

6. **Availability:** Do you now work for the State of North Carolina? Yes No

Date available for work: _____

7. **Referral Source:** Where did you hear about this position or see it advertised? Please list publication or web site by name: _____

8. **Check the types of work you will accept:**

- Full-time Part-time Work involving travel Occasional weekend work

9. **Have you ever been convicted of an offense against the law other than a minor traffic violation?** (A conviction does not mean you cannot be hired. The offense and how recently you were convicted will be evaluated in relation to the job for which you are applying.) Yes No (If "yes", explain fully in section #17.)

10. **Please list business references:**

Name _____ Address _____ Phone (____) _____
 Name _____ Address _____ Phone (____) _____
 Name _____ Address _____ Phone (____) _____

11. **May we contact your present employer?** Yes No

12. **Education:** Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4
 Graduate school 1 2 3 4

Under S/Q hrs., list the hours of credit received & whether they were semester (S) or quarter (Q) hours.

School	Name & Location	Grad?	S/Q Hrs	Maj/Min Course	Degree Received
High School					
College(s)/Universities					
Graduate or Professional					
Other Educational, Vocational Schools, Internships, etc.					

13. **Skills:** (Check the following skills, experiences, etc. which you have)

- | | |
|--|---|
| <input type="checkbox"/> Calculator | <input type="checkbox"/> Computer Software _____ |
| <input type="checkbox"/> Chauffeur's Licence (CDL) | <input type="checkbox"/> Typing (Specify WPM _____) |
| <input type="checkbox"/> Braille Skills | <input type="checkbox"/> Shorthand/Speedwriting (Specify WPM _____) |
| <input type="checkbox"/> Sign Language | <input type="checkbox"/> Other _____ |

14. **Licences & certifications** (list, giving dates & sources of issuance):

15. **Special training programs & seminars** you have completed in the last five years:

16. If the job(s) applied for call(s) for **specific courses**, indicate those courses taken & credits received:

17. Use this space to **explain an answer** (number answers to correspond to questions above; attach additional sheet, if needed.)

18. **Work history:** (Attach additional sheets if necessary)

Current or Last Employer			Address:		
Job Title:			Supervisor's Name:		No. you supervised
Date Employed (mo/yr)			Starting Salary \$ _____ per		Ending Salary \$ _____ per
Date Separated (mo/yr)			Duties:		
Full-time	Yrs.	Mos			
Reason for leaving					

Current or Last Employer			Address:		
Job Title:			Supervisor's Name:		No. you supervised
Date Employed (mo/yr)			Starting Salary \$ _____ per		Ending Salary \$ _____ per
Date Separated (mo/yr)			Duties:		
Full-time	Yrs.	Mos			
Reason for leaving					

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