

**EMPLOYMENT APPLICATION  
TOWN OF HOLLY RIDGE  
212 N. DYSON STREET  
HOLLY RIDGE, NC 28445  
Telephone: (910) 329-7081  
Fax: (910) 329-1593**

Qualified applicants are considered for openings without regard to race, color, sex, national origin, age, marital status, religion, or handicap unrelated to job requirements. This application is designed to protect individual rights and privacy and to ensure equal employment opportunity. All questions are considered important for employment and other use of this information is intended.

Position(s) applied for \_\_\_\_\_ Date \_\_\_\_\_

Referral Source:  Advertisement  Town Website  Town Employees  ESC  Other  
Name \_\_\_\_\_

Address \_\_\_\_\_  
Last First Middle  
City State Zip Code

Telephone: Home \_\_\_\_\_ Business \_\_\_\_\_ If none, other phone \_\_\_\_\_

Type work seeking:  Full-time  Part-time  
Have you ever been employed by the Town before?  Yes  No If "Yes", dates: \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ Type \_\_\_\_\_ State \_\_\_\_\_ Number \_\_\_\_\_

Do you have a dependable means of transportation to work? \_\_\_\_\_

Please answer the following questions and explain any "Yes" answers below:

- Are you on lay-off and subject to recall? Yes / No
  - Are you a veteran, widow of a veteran, or wife of a disable veteran? Yes / No
  - Are you related by blood or marriage to any other town employee? Yes / No
  - Do you object to working on weekends or overtime if necessary? Yes / No
  - Do you object to reference inquiries to your present employer? Yes / No
  - Have you ever been convicted of an offense against the law or forfeited a bond? Yes / No
- (A record or conviction will not necessarily exclude you from employment. Factors such as age at time of offense, seriousness of offense, and rehabilitation efforts, will be considered)

Explanations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Educational History (Give your complete educational history below)**

	Name of School & Location	Attended		Number of Years Completed	Credit Hours	Did You Graduate?	Degree or Diploma & Yr. Received	Major Subject Areas(s)
		From	To					
		Mo./Yr.	Mo./Yr.					
High School or Highest Grade								
College or University								
Graduate or Professional								
Other Education or Internships								

List fields of work, for which you are licensed, registered, or certified, giving dates and sources of issuance: \_\_\_\_\_

List special skills and qualifications, including areas of knowledge and machine operation skills: \_\_\_\_\_

List professional or career memberships and achievements: \_\_\_\_\_  
\_\_\_\_\_

**COMPLETE OTHER SIDE**

Employment Experience: Beginning with your present or last position, list each job held. Include military service and previous town employment. If you need additional space, please continue of an additional sheet of paper. You may also attach a personal resume if you desire, but please complete this application in full.

Employer	Dates		Work Performed
	From	To	
Address			
Telephone	Salary or Wage Rate		
	Starting	Final	
Job Title			
Supervisor			Reason for Leaving
Employer	Dates		Work Performed
	From	To	
Address			
Telephone	Salary or Wage Rate		
	Starting	Final	
Job Title			
Supervisor			Reason for Leaving
Employer	Dates		Work Performed
	From	To	
Address			
Telephone	Salary or Wage Rate		
	Starting	Final	
Job Title			
Supervisor			Reason for Leaving
Employer	Dates		Work Performed
	From	To	
Address			
Telephone	Salary or Wage Rate		
	Starting	Final	
Job Title			
Supervisor			Reason for Leaving

Other information related to your qualifications for this position: \_\_\_\_\_

References. You may list as references persons who are not related to you and who have knowledge of your qualifications for the position(s) for which you are applying, such as former co-workers, teachers, etc. Do not repeat the names of supervisors you have listed under your employment experience.

1. Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_
2. Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_
3. Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Certificate of Applicant. I certify that the information given herein is true and complete to the best of my knowledge. I authorize investigation of any statements given on this application as may be necessary in considering me for employment. I understand that any false or misleading information given may result in disqualification or, if employed, discharge. I agree, if employed, to abide by all work rules and requirements of the Town.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date