



VILLAGE OF CLEMMONS

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYEMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

- Administration
- Public Works

PERSONAL INFORMATION

DATE _____

NAME

LAST FIRST MIDDLE

SOCIAL SECURITY NUMBER _____

PRESENT ADDRESS

STREET CITY STATE ZIP

PERMAMENT ADDRESS

STREET CITY STATE ZIP

PHONE NO. _____ ARE YOU 18 OR OLDER? YES NO

ARE YOU EITHER A U.S. CITIZEN OR ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

EMPLOYEMENT DESIRED

POSITION DATE YOU CAN START SALARY DESIRED

ARE YOU EMPLOYED NOW? IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

PRESENT SUPERVISOR _____ PHONE NO. _____ ADDRESS _____

EVER APPLIED TO THIS COMPANY BEFORE? YES NO WHERE? _____ WHEN? _____

REFERRED BY _____

EDUCATION	NAME AND LOCATION OF SCHOOL	'NO. OF YEARS ATTENDED	'DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK _____

SPECIAL SKILLS _____

ACTIVITIES (CIVIC, ATHLETIC, ETC.) _____

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARTIAL STATUS, COLOR OR NATION OF ITS MEMBERS.

U.S. MILITARY OR NAVAL SERVICE RANK PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

IF APPLYING FOR WORKS POSTION- DO YOU HAVE:

CDL _____ OSHA TRAINING _____ (ANY TICKETS & WHEN) _____

* The Village of Clemmons does not discriminate on the basis of race, sex, age, national origin, religion, or disability in its employment opportunities.

LAST
FIRST
MIDDLE

FORMER EMPLOYERS(LIST BELOW THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER PHONE NUMBER	SALARY	POSITION	REASON FOR LEAVING
FROM TO				
FROM TO				
FROM TO				
FROM TO				

REFERENCES:GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1			
2			
3			

**IN CASE OF
EMERGENCY NOTIFY**

NAME ADDRESS PHONE NO.

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED , FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERNCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYEMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I HEREBY AUTHORIZE THE PERSONNEL OFFICER TO RELEASE MY WORK RECORDS TO MY NEW EMPLOYER AT ANY TIME FOLLOWING MY EMPLOYMENT WITH THE VILLAGE OF CLEMMONS.

I UNDERSTAND THAT A PRE-EMPLOYEMENT DRUG SCREENING AND POLICE CHECK WILL BE REQUIRED PRIOR TO EMPLOYMENT AND I GRANT THE VILLAGE OF CLEMMONS PERMISSION TO PERFORM A DRUG TEST AT ANY TIME DURING MY TERM OF EMPLOYMENT.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYEMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND CAUSE."

DATE SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY DATE

REMARKS:

HIRED: YES NO POSITION DEPT.

SALARY/WAGE DATE REPORTING TO WORK

APPROVED: 1. EMPLOYMENT MANAGER 2. DEPT. HEAD 3. GENERAL MANAGER