



# TOWN OF PLYMOUTH

## Application for Employment

We consider applicants for all positions without regard to race, color, religious creed, sex, age, national origin, age, ancestry, marital status, sexual orientation, mental retardation and past/present history of mental disorder, learning disability and physical disability. All positions for the Town of Plymouth are subject to drug testing, and a pre-employment drug test. Resumes are not accepted in lieu of applications, but may be attached to application

|   |  |   |
|---|--|---|
| Position(s) applying for: _____   |  |   |
| Date: _____<br>Mm/dd/year   | Name (Last/First/Middle):<br>_____                         |   |
| Street Address: _____<br>_____  | Social Security Number:<br>_____                           |   |
| City/State/Zip: _____   | Telephone Number:<br>_____                                 |   |
| Are you available to work:<br><input type="checkbox"/> Full Time <input type="checkbox"/> Part-Time | On what date would you be available to work:<br>_____      |   |
| <b>EMPLOYMENT HISTORY</b>   |  |   |
| 1.  | Employer Name, Address & Phone:<br>_____<br>_____<br>_____ | Job Title: _____<br>Full <input type="checkbox"/> Part Time <input type="checkbox"/><br>From/To: _____<br>Reason for Leaving: _____ |
| 2.  | Employer Name, Address & Phone:<br>_____<br>_____<br>_____ | Job Title: _____<br>Full <input type="checkbox"/> Part Time <input type="checkbox"/><br>From/To: _____<br>Reason for Leaving: _____ |
| 3.  | Employer Name, Address & Phone:<br>_____<br>_____<br>_____ | Job Title: _____<br>Full <input type="checkbox"/> Part Time <input type="checkbox"/><br>From/To: _____<br>Reason for Leaving: _____ |
| 4.  | Employer Name, Address & Phone:<br>_____<br>_____          | Job Title: _____<br>Full <input type="checkbox"/> Part Time <input type="checkbox"/><br>From/To: _____                              |



## REFERENCES

(Please provide names, addresses and telephone numbers of three references who are not related to you and are not previous employers.)

| Name  | Address | Telephone |
|-------|---------|-----------|
| _____ | _____   | _____     |
| _____ | _____   | _____     |
| _____ | _____   | _____     |

1. Have you ever been convicted of a felony or any other criminal offense either within or outside of the State of North Carolina? Yes  No

If yes, please identify the approximate date, location and nature of each such conviction on a separate sheet of paper and attach it to this application.

2. Are any criminal charges currently pending against you either within or outside of the State of North Carolina? Yes  No

If yes, please identify the jurisdiction in which such charges are pending, the nature of the charges and an explanation on a separate sheet of paper and attach it to this application.

### Veterans Status

Are you a veteran of the United States Military Yes  No

If yes: Branch of Service: \_\_\_\_\_ Year of Discharge: \_\_\_\_\_

Type of Discharge: \_\_\_\_\_

### Citizen Status

Are you authorized to work within the United States? Yes  No

### CERTIFICATION

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge an Employee at any time with or without cause. It is further understood that this "at will" employment relationship may

not be changed by any written document or conduct unless such change is specifically acknowledged in writing by an authorized representative of the Town.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the Town of Plymouth.

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Signature

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Date

Please return this application to: Town of Plymouth  
Town Hall  
124 east Water St  
Plymouth, NC 27962