



City of Roxboro  
North Carolina

## APPLICATION FOR EMPLOYMENT

This application form is designed to protect individual rights and privacy and to insure equal employment opportunity. All questions are considered important for employment and no other use is intended for the information you submit.

The City of Roxboro is an  
Equal Employment Opportunity Employer

1	Position applied for:	Date	Social Security Number	
2	Last Name	Middle, If married, use maiden	First	
3	Address: Street	City	County	State
				Zip Code
	Telephone: Home	Business	If none, where can you be reached by phone?	
4	Are you 18 years of age or older?		If no, what is your birth date?	
	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

5	A	Date available for employment?		
	B	Are you seeking:	Full-time work <input type="checkbox"/>	Part-time work <input type="checkbox"/>

6	MILITARY SERVICE			
A	Are you a veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>	B	Are you a widow, or wife of a veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>	
C	Date of entry into active service	D	Type of Separation	
E	Date of separation from active service		If you had more than one tour of duty, explain in Space 12.	

7	Have you ever worked for the City of Roxboro before? Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes give dates: From To

8	May we contact your present employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
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9	Have you ever been convicted of an offense against the law or forfeited a bond? Yes <input type="checkbox"/> No <input type="checkbox"/>	If "Yes" explain in Space 12.
	(Note: A criminal record will not necessarily exclude you from employment. Such factors as age at time of offense, rehabilitation efforts, and recency and seriousness of the crime will be taken into account. You may omit (1) traffic violations of which you paid a fine of \$30 or less, and (2) any offense committed before your 21st birthday, which was finally disposed of in a juvenile court or under a Youth Offender Law).	

<b>10</b>	Are you related to any person now employed by the City of Roxboro?      Yes <input type="checkbox"/> No <input type="checkbox"/>
If " Yes," give name, relationship and agency in Space 12	

<b>11</b>	Use this space to explain any answers (Attach additional sheet if needed).

<b>12</b>	<b>REFERENCES:</b> If you wish to list references, list persons who are not related to you 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 names of supervisors you will list under Employment Record on the reverse side of application.	
<b>A</b>	Name:	Address:
<b>B</b>	Name:	Address:
<b>C</b>	Name:	Address:

<b>13</b>	<b>EDUCATION - Give your complete educational history below:</b>	
<b>Elementary – High School</b>		
Elementary School Name:		Location:
High School Name:		Location:
Check highest school year completed 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>		
Did you either graduate from high school or pass the High School Equivalency Test?      Yes <input type="checkbox"/> No <input type="checkbox"/>		

**EDUCATION BEYOND HIGH SCHOOL**

Education Beyond High School	Name and Location	Attended From Mo. Yr.	Attended To Mo. Yr.	Check No. Years Completed	Credit Hours	Did you Graduate?	Degree or Diploma & Yr Received	Major Subject
College or University				1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>				
Graduate or Professional				1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>				
Other Education, Internship, Etc.				1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>				

14	List fields of work for which you are licensed, registered, or certified, giving date(s) and sources of issuance; list typing and shorthand skills, machines you can operate, and other skills in which you are proficient; and if the position applied for calls for specific courses, indicate courses and credits received.

15	<b>EMPLOYMENT RECORD - Answer questions for each period of employment. Include military service and previous employment with the City of Roxboro. Failure to give complete information may result in rejection of your application. Begin with your present or last position. If more space is needed, use a continuation sheet.</b>

<b>A.</b>	<b>Title of present or last position</b>	<b>Name and Title of supervisor</b>	
	<b>Employer</b>	<b>Address</b>	
	<b>Starting Salary</b>	<b>Last Salary</b>	<b>No. Employees supervised by you</b>
	<b>Date Employed</b>	<b>Date separated</b>	<b>Reason for leaving</b>
	<b>Full-time:</b>	<b>Years</b>	<b>Months Part-time: Years Months</b>

<b>B.</b>	<b>Title of present or last position</b>	<b>Name and Title of supervisor</b>	
	<b>Employer</b>	<b>Address</b>	
	<b>Starting Salary</b>	<b>Last Salary</b>	<b>No. Employees supervised by you</b>
	<b>Date Employed</b>	<b>Date separated</b>	<b>Reason for leaving</b>
	<b>Full-time:</b>	<b>Years</b>	<b>Months Part-time: Years Months</b>

<b>C.</b>	<b>Title of present or last position</b>	<b>Name and Title of supervisor</b>	
	<b>Employer</b>	<b>Address</b>	
	<b>Starting Salary</b>	<b>Last Salary</b>	<b>No. Employees supervised by you</b>
	<b>Date Employed</b>	<b>Date separated</b>	<b>Reason for leaving</b>
	<b>Full-time:</b>	<b>Years</b>	<b>Months Part-time: Years Months</b>

**CERTIFICATE OF APPLICANT**

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at will and can be terminated by either party.

Applicants Signature

Send completed applications to:

City of Roxboro  
 Human Resources Manager  
 P.O. Box 128  
 Roxboro. NC 27573