

EMPLOYMENT APPLICATION INSTRUCTIONS

- 1. Only original applications are accepted...... no fax or photocopies.
- 2. Applications are accepted for advertised positions only.
- 3. Candidates submitting applications with missing information will not be considered for employment.
- 4. The appropriate application for each position must be completed with all requested information including all work history, references, etc., and signed in ink.
- 5. Any lapse in employment history requires written explanation.
- 6. The job title, and department name should be completed.
- 7. Special requirements such as skills test results, transcripts, etc., must be included with the application at the time the application is submitted.
- 8. Resumes are accepted as supplemental information only and cannot be used as a substitute for employment history on the application.
- 9. Applications will not be accepted after the position announcement closing date.

APPLICATION REVIEW/INTERVIEW PROCESS

- After the closing date, applications are reviewed for pertinent qualifications. The most qualified applicants for each position are selected for further consideration.
- Interviews are conducted by department supervisors from this select group of qualified applicants.
- Note: The minimum education for all positions in Town of Stallings is a High School Diploma or GED.

	arolina 28106		Employment				
Last Name	First Name		Middle Name				
Address	City	State	Zip Code				
Social Security Number	r Home Telepho	ne	Business Telephone				
POSITION APPLIED FOR				Do Not Complete This Block) te Application Received			
Department							
Job Title							
Position Number			0	FFICIAL USE ONLY			
1. Are you currently employed by	the Town of Stallings?	If yes, which	h department?				
2. Have you ever been employed b 3. Are you related by blood or ma	by the Town of Stallings	? If yes, when	?				
If yes, give name, relationship to y							
Have you ever been convicted of a							
If yes, Please attach a certified co The offense and how recently you Please list any traffic convictions	py of your arrest record were convicted will be	l to the application. A evaluated in relations	conviction does not mea ship to the job for which	n you cannot be hired. you are applying.			
AVAILABILITY (CHECK the type)			A (1	-			
I) Full Time If you are not available for work			rary4) Season work (mo/day/yr)				
Are you available to travel if the j	position requires it?						
SKILLS (CHECK the following sk Sign Language	ills, experiences etc. which y		nd (specify wpm)				
Foreign Language (spe	cify)		transcription				
Data entry (specify spe		Medica	al transcription				
Typing (specify wpm)		Word	processing skills (specify	which software)			
EDUCATION Circle highest year completed: 1 2 3 Graduate School 1 2 3 4	3 4 5 6 7 8 9 10 11 12 GE	ED College 1 2 3 4					
Schools Name and L	ocation		Dates Attended (mo/yr) ROM: TO:	Graduate Type of Degree			
High School				Yes No			
College(s)				Yes			
University(ies) Graduate or				No Yes			
Professional				No			
Other educational, vocational schools				Yes No			

WORK HISTORY: Please list present and past employment, beginning with most recent. Attach additional pages as necessary to describe major duties.											
Current or Last Emple	oyer	pages	Address	sary to de	serie ina	joi duites.					
Job Title			Supervisor's Name Number		Telephone		May we co YES		ontact this employer?		
Date Employed	Date Separated	Full Time Part Time	Years Years	Months Months	Starting S	Salary per	125	Endir \$	ng or Current		
Reason for Leaving:					•					-	
List major duties in order of their importance in the job:											
Employer			Address								
Job Title			Supervisor's	s Name	Tele	ephone Number	May y YES	we cor	n tact this emp	oloyer?	
Date Employed	Date Separated I	Full Time Part Time	Years Years	Months Months	Starting S	Salary per	Endin \$	ig or C	Current Salary per		
Reason for Leaving:		1 41 0 1 1110	10000	monuis		I			1		
	rder of their importanc	e:									
Employer			Address								
Job Title		Supervisor's Name		Telephone		May we contact this employer?					
			Number			1	YES		N	O	-
Date Employed	Date Separated	Full time Part time	Years Years	Months Months	Starting S	Salary per	Endin &	ig or C	Current Salary per		
Reason for Leaving:				•					-		
List major duties in or	rder of their importanc	e:									
LICENSES and CEI	RTIFICATIONS List			c :							
LICENSES and CE	KTIFICATIONS LISU	, giving dates a	and sources o	i issuance.							
PROFESSIONAL/	WORK REFERENCI	ES Please do n	ot list person	al references of	r relatives.						
Name		Address									Telephone

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice. If employed by the Town of Stallings, I certify that my spouse and I have paid all current taxes owed or will pay such taxes before they become delinquent, and that we **will** also pay all such future taxes before they become delinquent. I understand that failure to comply with this provision shall be grounds for dismissal.

Signature of Applicant____

Date _____

Equal Employment Opportunities with Town of Stallings are allowed without regard to sex, race, religion, color, national origin, age, or non-disqualifying handicap.

In accordance with the 1986 Immigration Reform and Control Act (IRCA), and person hired by the Town of Stallings after Nov. 6th 1986 must either be a US citizen or possess current employment authorization from the U.S. Immigration and Naturalization Service (INS).