BERTIE COUNTY EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Applications can be taken to 106 Dundee Street or mailed to PO Box 530, Windsor, NC 27983.

Fill out all sections **COMPLETELY** and to the best of your ability. Your application will be used as part of the examination process and, therefore, should represent your best effort. **Unsigned, or incomplete applications will not be considered**. Once submitted, application materials become the property of the County. An application must be received in County Administration by 5 pm on the closing date posted to ensure consideration. Photocopied applications must have an original signature and current date. If a position is posted as "may close without notice," **APPLY IMMEDIATELY**.

<u>CURRENT INI</u>	<u>FORMATIO</u>	<u>N</u>					
(1) POSITION TITLE_					DATI	E:	
(2) When will you be av	vailable for employ	ment? (i.e. immed	iately, 2 weeks	notice)			
(3) Are you seeking	[] Full-time regula	ar [] Part-tim	e regular [] Temp./prefer re	egular [] Tempo	rary Only
(4) NAME:		l act /	First / Middle				
		Last /	First / ivilidate				
(5) ADDRESS:							
		Street & No. or P.C). Box / Cist / State	e / Zip			
(6) Home Phone #:			Business	# / Mobile #			
				(if applica	able)		
(7) Are you 18 or older	r? Yes No If I	NO, what is your b	irth date?				
		_			_		
GENERAL INI							
If you need to explain any	answer, use the spa	ce under EXPLANA	TIONS near the	end of this applica	tion.		
(8) Apart from absence	s for religious obse	ervances, check co	onditions that y	ou are willing to	accept.		
Occasional:	night work	weekend work	overtime	rotating shifts	"on-call	"	
Regular: Frequent	night work night work	weekend work weekend work	overtime overtime	rotating shifts rotating shifts	"on-call "on-call		
•	· ·			-	UII-Cali		
(9) Have you ever beer If YES, what de	epartment and whe		Yes	No			
(10) Have you applied if YES, indicate	to the Bertie Count what position and		Yes	No			
(11) Are you willing to a	accept a salary with	nin the advertised	normal starting	salary range?	Yes	No	
(12) Are you now or we If YES, give na	ere you previously r me, relationship ar					Yes	No
(13) Are you able to pe	rform all of the duti	es of the job you h	nave applied fo	r?	Yes	No	
(14) Have you ever been A conviction record will rehabilitation efforts, less [] No	not necessarily ex	clude you from en	nployment. Fac	ctors such as age	e at time	of offens	e,
(15) Are you an Americ	an citizen or do yo	u currently have a	uthorization to	work in the U.S.	?	Yes	No
16) Did you receive any If YES, please	y of your education explain under EXP		kperience unde	er another name'	?	Yes	No

EDUCATION Provide your complete history

(17) Ind	dicate hi	ghest school year completed:	(i.e. 8, 12, 16)				
(18) Na	ame of H	ligh School	0	City		State	
(19) Ha	ave you i	received a high school diplom	na or equivalent?	Yes No			
Educat Beyond High So	ŀ	Name and Location	Attended	Did You Graduate?	Credit Hours	Degree, Diploma, Certificate Earned or # of Yrs.	Major Minor
			From	Yes			
College Universi			То	No			
			From	Yes			
Gradua Profess School	sional		То	No			
Taabai	1		From	Yes			
Technic Institut Interns Other	es,		То	No			
(23)	Please are app	list any knowledge, skills, or blying. Include skills with equarial/clerical position, indicate	abilities you have that ipment or machines yo	ou can operate. I	f you wis	n consideration for a	•
(a)				e)			
(c)			(0	g)			
REG	SISTE	RATIONS, LICENS	SES, CERTIFI	CATIONS			
(24)	List fiel	ds of work for which you have	e been registered, licer	nsed or certified:			
	Registr	ration:	State:N	No:		Exp. Date:	
	Registr	ration:	State: N	No:		Exp. Date:	
	Other:_						
(25)		list your VALID DRIVER'S L license, please put "NONE"					
(26)		driver's license a Commercia indicate the class	al Driver's License?	Yes No			

EMPLOYMENT

Record your complete work history in the spaces below. If needed, additional sheets containing the same information and in the same format are acceptable. BEGIN with your current or most recent position. Include military and related volunteer experience. Be sure to account for gaps in your employment history. ALL SPACES MUST BE COMPLETED OR MARKED N/A (not applicable). "See attached resume" is NOT acceptable in the duties space.

A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

IOD TITLE		Ot autinous O a la ma	Land Oalama
JOB TITLE	Data Canamata d	Starting Salary	Last Salary
Employer or company	Date Separated		
Employer or company address		releptione #_	
Name and Title of most current superv			
Full-time for: Yrs Mos Part-ti	ime for: Vrs Mos # of	employees supervised by you	
If you worked part-time, the number of			
DUTIES IN ORDER OF IMPORTA			
DOTIES IN ORDER OF INITIONAL	IIIOL		
REASON FOR LEAVING or desiring a	change		
TEAGON FOR ELAVING OF GESINING &	change		
B. NEXT MOST RECENT EMPLO	YMENT (or explain gap i	in employment)	
JOB IIILE		Starting Salary	Last Salary
JOB TITLE	Date Separated		
Employer or company		l elephone #	
Employer or company address			
Name and little of most current superv	/ISOr		
Full-time for: Yrs Mos Part-ti	rne for: Yrs Mos# of	employees supervised by you	
If you worked part-time, the number of			
DUTIES IN ORDER OF IMPORTA	INCE		
REASON FOR LEAVING			
C. NEXT MOST RECENT EMPLO	YMENT (or explain gap i	in employment)	
IOR TITLE		Starting Salary	Last Salary
JOB TITLE Date employed	Date Separated	otal ting calary	East Galary
Employer or company	Bate deparated		
Employer or company address			
Name and Title of most current superv	visor		
Full-time for: Yrs Mos Part-ti	me for Yrs Mos # of	employees supervised by you	
If you worked part-time, the number of	hours worked per week	employees supervised by you	
DUTIES IN ORDER OF IMPORTA			
DOTIES IN ORDER OF INITIONAL	IIIOL		
DEAGON FOR LEWING			
REASON FOR LEAVING			
D. NEXT MOST RECENT EMPLO	VMENT (or explain can	in amployment)	
D. NEAT WIDST RECENT EMPLO	, i wi⊑ivi (or explain gap i	in employment)	
JOB TITLE		Starting Salary	Last Salary
JOB TITLE	Date Separated	otal ting odlary	Last Galary
Employer or company	Date Deparateu	Telenhone #	
Employer or company Employer or company address		releptione #_	
A. 1 ()			
Full-time for: Yrs Mos Part-ti	ime for: Vrs Mos # of	employees supervised by you	
If you worked part-time, the number of	hours worked per week	chipioyees supervised by you	
DUTIES IN ORDER OF IMPORTA	-		
DUTIES IN ORDER OF IMPORTA	UNCE		
REASON FOR LEAVING			

E. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment) __Starting Salary_____Last Salary____ Date employed _____ Date Separated _____ Employer or company _____ JOB TITLE Telephone # Employer or company address Name and Title of most current supervisor _____ Full-time for: Yrs ____ Mos ___ Part-time for: Yrs ___ Mos ___ # of employees supervised by you___ If you worked part-time, the number of hours worked per week **DUTIES IN ORDER OF IMPORTANCE** REASON FOR LEAVING F. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment) JOB TITLE ____Starting Salary_____Last Salary_____ Date employed______ Date Separated___ Employer or company Telephone #____ Employer or company address Name and Title of most current supervisor _____ Hof employees supervised by you_____ If you worked part-time, the number of hours worked per week_____ DUTIES IN ORDER OF IMPORTANCE REASON FOR LEAVING (27) Have you had disciplinary action taken against you in the past 12 months? [] Yes [] No If YES, explain under EXPLANATIONS. (A YES will not automatically disqualify you.) (28) a.) Have you ever been dismissed or forced to resign from any job held? []Yes [] No b.) Were you dismissed or forced to resign for disciplinary reasons? [Yes [] No If YES to "a" or "b", explain under EXPLANATIONS. (A YES will not automatically disqualify you.) (29) May we contact your present employer for reference prior to an interview (if granted)? 1 Yes 1 No If you are not currently employed, please check here N/A (). If NO, explain under EXPLANATIONS. **EXPLANATIONS** ITEM# ---ITEM# ITEM# ITEM# Certification and Release (MUST BE SIGNED AND DATED BELOW) To the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly or negligently misrepresented, falsified or omitted any information during the application process, or have made any changes to the format or wording of this application form, I may be disqualified for employment consideration or dismissed from employment with the County. I authorize my current and former employers to give any information regarding me or my employment, whether or not it is on their records. I hereby release them from any damage whatsoever for issuing same. I also authorize educational institutions which I attended to reveal my scholastic ratings, as well as degrees or certificates earned, to the Bertie County; and associations, registration and licensing boards and to others to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision of State or Federal law, I expressly waive any right I have to review information the County receives from an employer or educational institution under a promise of confidentiality. I also permit the Bertie County to conduct a Police, Court, Credit and/or Motor Vehicle Records Investigation of my background where related to the job for which I am applying. I understand that if I apply or have applied for certain jobs, I may be tested for drug and alcohol use to determine if I am currently using or abusing these substances. I consent to the testing and understand that the results could preclude my appointment. I understand and acknowledge that should I be employed by the Bertie County, then I serve "at will". This means that I may be terminated at any

SIGNATURE_____DATE____

approved by the County Manager

time. I further understand that this "at will" employment relationship may not be changed by any written document unless such change is specifically

SUPPLEMENT TO BERTIE COUNTY EMPLOYMENT APPLICATION

The Bertie County is an Equal Opportunity Employer. Please complete this form in order for us to comply with the reporting requirements of the Equal Employment Opportunity Commission. This form will be separated from your employment application. Other than the information you provide in Section I, the information on this form will not be used in any way in our selection process or for any personnel action following employment. It will be maintained in personnel files which must be kept confidential under State law. Public disclosure of this information without your consent would be a violation of state general statutes.

I.	POSITI	ION APPLIED FOR:		
N/	AME:			
		Last	First	Middle
D	ATE OF	APPLICATION:		_
II.	SEX:	(Please circle)	Male	Female
	(Failure applica White Black Hispar or origi Asian the Pa	ation.) - Origins in any of the - Origins in any of the nic - Mexican, Puerto in regardless of race. or Pacific Islander - cific Islands.	e original peoples of Europe, e Black racial groups of Africa o Rican, Cuban, Central, or S o Origins in the Far East, Sou	North Africa, or the Middle East. a. (Not Hispanic) outh American or other Spanish Culture theast Asia, the Indian Subcontinent or the original peoples of North America.
	OIID WC	Newspaper (specify Employment Securit Job Line Employment Interes Came to Municipal E	r): y Commission t Card	

DRUG SCREENING

All **FINAL** applicants for high risk or safety sensitive positions (HRSS) must pass a drug screening process. Further information will be provided at the appropriate time in the employment process.

OVERTIME COMPENSATION AGREEMENT

For employees subject to the overtime provisions of the Fair Labor Standards Act (FLSA), we generally allow the employee to take time off for overtime worked. However, either time or pay is subject to supervisory approval and may be affected by budgetary constraints.

No
0 days to comply if selected for a position as required by Feder
HIS FORM MUST BE SIGNED)
read and understand the information contained on this for tructions provided, and have done so truthfully to the best of r

An Equal Opportunity/Affirmative Action Employer