

City of Mount Airy Employment Application



Date : _____

City of Mount Airy is an Equal Employment Opportunity Employer. City of Mount Airy is dedicated to a policy of nondiscrimination including race, color, religion, age, sex, marital status, national origin, political affiliation, or disabled status. If a reasonable accommodation, help or assistance is needed, please contact the Human Resources Department at 336-786-3533.

Applications are only accepted for open positions and are active for ninety days after completion by an applicant. An applicant wishing to be considered for another position after ninety days must file a new application.

IMPORTANT

Applicants are conditionally hired based on the successful completion of a post offer physical including a drug screen test; a background investigation; a motor vehicle report (for positions requiring a driver's license); a reference check; and a physical agility demonstration (for positions requiring certain physical requirements). Job offers may be withdrawn due to the applicants failure to successfully complete any of the post offer requirements. An applicant who is otherwise qualified to perform the job applied for will not be discriminated against on the basis of disability.

Failure to provide us a complete, legible application may result in your application not being considered.

Position Applied for: _____

Personal Information

Name _____
Last First MI

SSN: _____

Address _____

Telephone: _____

City, State, Zip _____

Email Address: _____

Are you legally able to work in the United States? Yes No

Are you at least 18 years of age? Yes No

Applying for Full Time Applying for Part Time

What date would you be available for work? _____

If applying for Police Officer Position, are you at least 20 years of age? Yes No

If applying for Police Officer Position, are you currently enrolled in or have you completed Basic Law Enforcement Training? Yes No

If yes, what date did you complete BLET or will you complete BLET? _____

Have you ever been charged or convicted of a crime? Yes No If yes, please explain.

Were you previously employed by the City of Mount Airy? Yes No If yes, when? _____

If yes, what department? _____

Have you served in the U.S. Armed Forces? Yes No If yes, what branch? _____

If yes, please give dates of service. _____

If you feel your military training is relevant to the position for which you are applying, please give details of that training below:

Please list any relevant skills that you may have that you feel make you a candidate for the position you are applying for. IE: Previous law enforcement skills, trainings, certifications; previous fire training and certifications; clerical skills, computer skills, customer service skills or any additional skills that you feel may be beneficial.

Do you have any friends, relatives or acquaintances working for the City? If yes, please list name and relationship.

Education

Circle highest school grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

HS Diploma or GED: ___ Yes ___ No

Name and address (city & state) of last high school attended:

List colleges and universities attended below:

Dates attended

Name & location of college or university	From		To		Type of degree awarded:	Major/Minor or program of study
	Mo.	Yr.	Mo.	Yr.		

Personal references please provide the names and contact information for three people other than relatives or past employers.

Name	Address	Relationship	Telephone
			() -
			() -
			() -

Application Certification. Read carefully before signing.

I hereby certify that each answer to a question and all other information herein and all other information otherwise furnished is true and correct. I understand that any incorrect, incomplete, or false statements of information furnished by me on this form may subject me to discharge from employment at any time. I hereby give my permission to contact past employers and personal references. I understand that if employed, I will be in a probationary period for six months. I further understand that completion of the probationary period does not confer any expectation of continuation for any definite period, and that my employment may be terminated or I may be terminate my employment at any time for any reason or no reason.

Signature of Applicant

Date

Employment Record: List all previous employers for the past ten years. Major changes in duties or job titles with the same employer should be listed as separate jobs. Start with the present or most recent and work back. Use blank sheets if necessary. LEAVE NO GAPS AND BE SPECIFIC IN YOUR ANSWERS. "See Resume" is not acceptable. Resumes are welcome as supplement to this application but will not be accepted in lieu of application.

Employer	Address	Direct Supervisor	From (mon/yr)	To (mon/yr)
Present or most recent employer:				

Hours per wk: _____ Starting Salary \$ _____ / _____ Last Salary \$ _____ / _____ Telephone () - _____

Reason for Leaving: _____ **Position Held:** _____

Duties: _____

May we contact your current employer: Yes No

Employer	Address	Direct Supervisor	From (mon/yr)	To (mon/yr)
Present or most recent employer:				

Hours per wk: _____ Starting Salary \$ _____ / _____ Last Salary \$ _____ / _____ Telephone () - _____

Reason for Leaving: _____ **Position Held:** _____

Duties: _____

Employer	Address	Direct Supervisor	From (mon/yr)	To (mon/yr)
Present or most recent employer:				

Hours per wk: _____ Starting Salary \$ _____ / _____ Last Salary \$ _____ / _____ Telephone () - _____

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Employer	Address	Direct Supervisor	From (mon/yr)	To (mon/yr)
Present or most recent employer:				

Hours per wk: _____ Starting Salary \$ _____ / _____ Last Salary \$ _____ / _____ Telephone () - _____

Reason for Leaving: _____ **Position Held:** _____

Duties: _____

Invitation To Identify

Date: _____



The Personnel Department will ensure that this record will be used for appropriate statistical and recording purposes only. Answers to the following questions are strictly **voluntary**, and the information is destroyed after statistical information is recorded.

Position Applied for: _____ M _____ F _____ Are you a Veteran? Y or N

Ethnicity:

- Hispanic: a person of Mexican, Puerto Rican, Cuban, or South American or other Spanish culture or origin, regardless of race.
- American Indian or Alaskan Native: A person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.
- Asian: A person having origins in any of the original peoples of the Far East, Southeast, the Indian Subcontinent or the Pacific Islands. These areas include for example; China, India, Japan, Korea, the Philippine Islands and Samoa.
- Black: A person having origins in any of the black racial groups of Africa.
- White: A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.