

APPLICANT INFORMATION FORM

City of Lexington, NC

APPLICATION INFORMATION AND INSTRUCTIONS

(Read Carefully Before Starting)

**Applications for employment with the City of Lexington are taken at the North Carolina Employment Security Commission, 103 W. Center Street Ext., Lexington, NC 27295.**

Applications are accepted only for jobs which are posted. Please fill out the application completely, attaching any other information you feel may be useful. Please type or print in blue or black ink and remember to sign the application.

EMPLOYMENT APPLICATION  
PROCESS

Employment applications may be completed on-line, printed from the website, or picked up at the Employment Security Commission. If completed on-line, please print, sign and return to ESC.

Employment applications are forwarded to the Department Head where the vacancy exists.

If the Department Head feels you are a valid candidate for an interview, you will be contacted.

After all interviews are completed, a background check is conducted on selected candidates.

Candidates offered employment will be asked to participate in a drug and alcohol screening.

Applicants not chosen for the particular position will be notified by letter.

Thank you for your interest in employment with the City of Lexington.

EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

The City of Lexington does not discriminate on the basis of race, color, national origin, sex, religion or non-disqualifying disability in employment or the provision of services.



# APPLICANT INFORMATION FOR EMPLOYMENT

CITY OF LEXINGTON

Date: \_\_\_\_\_

HUMAN RESOURCES DEPARTMENT

28 W. CENTER STREET LEXINGTON, NC (336) 248-3955 TDD 800-735-2962

**I. POSITION AND DEPARTMENT DESIRED:** \_\_\_\_\_

(You must complete a separate application for each job)

**II. PERSONAL DATA**

A. Name \_\_\_\_\_  
Last
First
Middle

ADDRESS \_\_\_\_\_  
Number or P.O. Box
Street
City
State
Zip Code

TELEPHONE \_\_\_\_\_ DRIVER'S LICENSE NO. \_\_\_\_\_  
area code

B. List all felony and misdemeanor convictions, including traffic violations, in the last 10 years:

\_\_\_\_\_

C. Have you worked here before? Yes \_\_\_\_ No \_\_\_\_ When \_\_\_\_\_

D. List members of your immediate family who work here: \_\_\_\_\_

**III. EDUCATIONAL EXPERIENCE:**

Circle highest school year completed: 6 7 8 9 10 11 12 13 14 15 16

Names of High School \_\_\_\_\_ Address \_\_\_\_\_

Did you graduate? Yes \_\_\_\_ No \_\_\_\_ Did you obtain a GED? Yes \_\_\_\_ No \_\_\_\_

Education beyond High School	Name Location	Years Completed	Degree/ Certificate (if any)	Major Subject
Technical School		1 2 3 4		
College or University		1 2 3 4		
Graduate or Professional		1 2 3 4		

APPLICANT INFORMATION FORM

IV. WORK EXPERIENCE (List all jobs in last five years, attach additional sheets if necessary)

Employer	Telephone	Dates	Employed:	Summarize responsibilities
_____	_____	From _____	To _____	
Address:	_____	_____	_____	
_____	_____	\$ _____ per	_____	
Immediate Supervisor and title	_____	Starting Rate/Salary	_____	
_____	_____	\$ _____ per	_____	
Reason for leaving:	_____	Final Rate/Salary	_____	
_____				
May we contact for reference? Yes _____ No _____ Later _____				
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Employer	Telephone	Dates	Employed:	Summarize responsibilities
_____	_____	From _____	To _____	
Address:	_____	_____	_____	
_____	_____	\$ _____ per	_____	
Immediate Supervisor and title	_____	Starting Rate/Salary	_____	
_____	_____	\$ _____ per	_____	
Reason for leaving:	_____	Final Rate/Salary	_____	
_____				
May we contact for reference? Yes _____ No _____ Later _____				
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Address:	_____	_____	_____	
_____	_____	\$ _____ per	_____	
Immediate Supervisor and title	_____	Starting Rate/Salary	_____	
_____	_____	\$ _____ per	_____	
Reason for leaving:	_____	Final Rate/Salary	_____	
_____				
May we contact for reference? Yes _____ No _____ Later _____				
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APPLICANT INFORMATION FORM

Employer	Telephone	Dates	Employed:	Summarize responsibilities
_____	_____	From	To	
Address:		_____	_____	
_____		\$_____per	_____	
Immediate Supervisor and title		Starting Rate/Salary		
_____		\$_____per	_____	
Reason for leaving:		Final Rate/Salary		
_____				

May we contact for reference? Yes \_\_\_ No \_\_\_ Later \_\_\_

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V. OTHER QUALIFICATIONS

- A. List all vehicles, on/off road and construction equipment (standard and automatic), and related machinery which you can operate: \_\_\_\_\_  
\_\_\_\_\_
- B. Describe your typing and clerical skills (if necessary for job): \_\_\_\_\_  
\_\_\_\_\_
- C. Can you work shifts, night and weekends if necessary to do the job? Yes \_\_\_ No \_\_\_
- D. List any certifications you have received and the dates you received them: \_\_\_\_\_  
\_\_\_\_\_
- E. Summarize special qualifications and skills acquired from other experiences, such as volunteer work, hobbies and sports, which relate to the job: \_\_\_\_\_  
\_\_\_\_\_

AGREEMENT

I certify that, to the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly misrepresented or falsified any of the application information, I may be disqualified for employment consideration or dismissed from employment with the City.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## APPLICANT INFORMATION FORM

THE CITY OF LEXINGTON IS AN EQUAL OPPORTUNITY EMPLOYER. WE ARE REQUIRED BY THE FEDERAL GOVERNMENT TO COLLECT PERSONAL INFORMATION ON ALL APPLICANTS IN ORDER TO RECORD OUR ATTEMPTS TO SEEK ALL QUALIFIED APPLICANTS WITHOUT REGARD TO RACE, CREED, SEX, NATIONAL ORIGIN, AGE, OR DISABILITY. **THIS APPLICANT INFORMATION FORM WILL BE SEPARATED FROM YOUR EMPLOYMENT APPLICATION, AND WILL NOT, IN ANY WAY, BE USED IN OUR SELECTION PROCESS OR FOR ANY PERSONNEL ACTION FOLLOWING EMPLOYMENT.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street or P.O. Box City State Zip County

Date of Birth: \_\_\_\_\_

Sex

- male  
 female

Veteran's Status:

- Yes (Vietnam)  
 Yes (Other)  
 No

Race:

- |   |   |
|---|---|
| <input type="checkbox"/> White                | <input type="checkbox"/> Native Am. Or Other          |
| <input type="checkbox"/> Black or African Am. | <input type="checkbox"/> Pacific Islander             |
| <input type="checkbox"/> Asian                | <input type="checkbox"/> Am. Indian or Alaskan Native |
| <input type="checkbox"/> Hispanic or Latino   | <input type="checkbox"/> Two or More Races            |

THIS APPLICATION IS IN RESPONSE TO: (please check block and name particular source)

- Newspaper  
 Professional magazine  
 Job Opportunity Listing (specify)  
 TV  
 Other (specify)

Position for which applied: \_\_\_\_\_

Men ages 18-25 are required to register for selective service. Pursuant to Chapter 143B-421.1 of the North Carolina General Statutes you are required to register for selective service to be employed by the City of Lexington. Have you registered? \_\_\_\_\_ yes \_\_\_\_\_ no  
If no, why not? Female \_\_\_\_\_ Other Reasons \_\_\_\_\_