

14. EDUCATION - Give your complete educational history below:

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

Did you either graduate from high school or pass the High School Equivalency Test? Yes _____ No _____

High School Name: _____ Location _____ Ending Date: _____

Education Beyond High School Name & Location	Attended		Circle Number of Years Completed	Did You Graduate	Degree/ Diploma Year Rec'd	Major Subject
	From Month/Yr.	To Month/Yr				
College or University			1 2 3 4			
Technical College			1 2			

15. List fields of work for which you are licensed, registered, or certified, give date(s) and sources or issuance:

16. List typing and shorthand skills, machines you can operate, and other skills in which you are proficient:

17. If the position applied calls for specific courses, indicate courses and credits received.

18. EMPLOYMENT RECORD - Answer questions for each period of employment. Failure to give complete information may result in rejection of your application. Begin with your present or last position.

(a) Title of present or last position _____ Starting Salary _____ Ending Salary _____

Date Employed _____ Date Separated _____

Full Time: Years _____ Months _____ Part-Time: Years _____ Months _____ Number of hours/week: _____

Name and Title of Supervisor: _____ Number of employees supervised by you _____

Employer: _____ Phone No. _____

Address _____

Duties: _____

Reason for leaving:

(b) Title of present or last position _____ Starting Salary _____ Ending Salary _____
 Date Employed _____ Date Separated _____
 Full -Time: Years _____ Months _____ Part-Time: Years _____ Months _____ Number of hours/week: _____
 Name and Title of Supervisor: _____ Number of employees supervised by you _____
 Employer: _____ Phone No. _____
 Address _____
 Duties: _____
 Reason for leaving: _____

(c) Title of present or last position _____ Starting Salary _____ Ending Salary _____
 Date Employed _____ Date Separated _____
 Full Time: Years _____ Months _____ Part-Time: Years _____ Months _____ Number of hours/week: _____
 Name and Title of Supervisor: _____ Number of employees supervised by you _____
 Employer: _____ Phone No. _____
 Address _____
 Duties: _____
 Reason for leaving: _____

Certificate of Applicant

Did you personally prepare this application yourself? Yes _____ No _____

I certify to the best of my knowledge and belief, the statements given truly represent my background and experience. I understand that false information may be grounds for rejection of my application or dismissal if I am employed. I hereby acknowledge that all documentation submitted as a part of my application for employment with Duplin County shall become the property of Duplin County and will not be returned to the job applicant.

 Applicant's Signature

 Date

FOR EQUAL EMPLOYMENT STATISTICAL INFORMATION ONLY

Name: _____ Date of Application _____

Social Security Number: _____

Are you a U.S. Citizen? Yes _____ No _____ Date of Birth _____ Male _____ Female _____

American _____ Black _____ Asian American _____ White _____ Spanish Surnamed American _____ Other _____

Application No. _____

AUTHORIZATION FOR REFERENCE RELEASE

TO WHOM IT MAY CONCERN:

I have applied for employment with Duplin County and hereby authorize any present or past employer of mine, any school, or personal reference to release information to the Duplin County Personnel Office regarding my work experience, character, etc. I hereby grant Duplin County authorization to conduct a driver's license check and criminal background check. I release all such persons/institutions from damages or liability as a result of inquiry or the furnishing of the information requested.

Signature of Applicant

Date

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DUPLIN COUNTY PERSONNEL OFFICE

I understand that my county application is only valid for the particular position for which I have applied.

Applications shall be valid until the position which was advertised and applied for by the applicant has been filled.

Signature of Applicant

Date