TOWN OF WHITEVILLE

Employment Application

| APPLIC | CANT IN | IFORM | OITAN | I | | | | | | | | | | | | | |
|--------------------------|-------------|----------|------------|----------------|-----------|------------|------------|-----------------|---------|----------|--------|--------------|----------|-----|------|-------|--------------|
| Last Nam | ne | | | | | First | 1 1000 | | | | | M.I. | D | ate | | | |
| Street Ac | ddress | | | | | | | | | | | Apartm | ent/Unit | t # | 1 | | A PRODUCTION |
| City | | | | | | State | е | | | 98 T. K. | PE N | ZIP | | | | | |
| Phone | | | | | | E-ma | ail Addres | SS | | | | | | | | | |
| Date Ava | ilable | | | | Social S | ecurity No | о. | | | | Desire | ed Sala | ry | | | de | |
| Position A | Applied fo | r | | | | | | | | | | - | | | | | |
| Are you a | a citizen o | f the U | nited Sta | tes? | YES 🗌 | NO 🗆 | If no | , are y | ou autl | norized | to wor | rk in th | e U.S.? | YES | | NO | |
| Have you ever worke | | ked for | r this con | s company? YES | | | If so, | If so, when? | | | | | | | - 5 | -1919 | 01,45 |
| Have you ever been convi | | | icted of a | felony? | YES | NO 🗆 | If yes | If yes, explain | | | Alegia | | | - | | | 140 |
| | | | | | | | | | | | | Production . | | | | | / |
| EDUCA" | TION | | | | | | | | | | | | | | | | |
| High Scho | ool | | | | | Address | 3 | | | | | | | | | | |
| From | | То | | Did you | graduate? | YES [|] NO | | Degree | : | | | | | | | |
| College | | | V 63.5 | | 1 | Address | 14352 | grie z ji | | | | | | | | | |
| From | | То | | Did you | graduate? | YES | NO [| | Degree | | | | | | 15-1 | | |
| Other | | | | | | Address | ; | | | | | | | | | | |
| From | | То | | Did you g | graduate? | YES [| NO [| | Degree | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| REFERE | NCES | | | | | | | | | | | | | | | | |
| Please list | t three pro | ofessiol | nal refere | ences. | | | | | | | | | | | | | |
| Full Name | e | | | | | | | Relat | ionship | 0 | | | | | | | |
| Company | | | | | | | | Phon | е | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | |
| Full Name | 2 | | | | | | | Relat | ionship | 0 | | | | | | | |
| Company | | | | | | | | Phon | e | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | |
| Full Name | 2 | | | | | | | Relat | ionship |) | | | | | | | |
| Company | | | | | | | | Phon | е | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | |

| PREVIOUS | EMPLOYME | NT | | | | | | | | | | |
|------------------|-----------------------|-----------------------------|-------------------|---------|------------------|--|--|--|--|--|--|--|
| Company | | Phone | | | | | | | | | | |
| Address | | | | | | Supervisor | | | | | | |
| Job Title | | Starting Salary | \$ | | Ending Salary \$ | | | | | | | |
| Responsibilitie | es | | | | | 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | |
| From | To Reason for Leaving | | | | | | | | | | | |
| May we conta | ct your previous | supervisor for a reference? | YES 🗌 | NO 🗌 | | 1 Appen | | | | | | |
| Company | | a Maser | Phone | | | | | | | | | |
| Address | Address | | | | | Supervisor | | | | | | |
| Job Title | | | Starting Salary | \$ | Za k | Ending Salary \$ | | | | | | |
| Responsibilities | S | | 16/9 .5 | | | Partiern and in the con- | | | | | | |
| From | То | Reason for Leaving | | , qu | | Control testing black risks of the state | | | | | | |
| May we contact | t your previous | supervisor for a reference? | YES | NO 🗌 | | | | | | | | |
| Company | | | Phone | | | | | | | | | |
| Address | | | Supervisor | | | | | | | | | |
| Job Title | | | Starting Salary | \$ | | Ending Salary \$ | | | | | | |
| Responsibilities | 3 | | . 2 | | | क्षान्त्रवं - अर्थ - ५४ | | | | | | |
| From | To Reason for Leaving | | | | | | | | | | | |
| May we contac | t your previous s | supervisor for a reference? | YES | NO 🔲 | 60 JG | e.542 tif . 1 | | | | | | |
| | | | | | | | | | | | | |
| MILITARY S | ERVICE | | | | | | | | | | | |
| Branch | | | | From To | | | | | | | | |
| Rank at Dischar | | | Type of Discharge | | | | | | | | | |
| If other than ho | norable, explain | 1 | | | | | | | | | | |
| DISCLAIME | R AND SIGNA | ATURE | Mark of Party | | | | | | | | | |
| | | ue and complete to the best | t of my knowledge | e. | | | | | | | | |
| | n leads to emplo | oyment, I understand that f | | | in my a | pplication or interview | | | | | | |
| Signature | | | | | | Date | | | | | | |
| | | | | | | | | | | | | |