

APPLICATION FOR EMPLOYMENT

Orange County ABC Board

601 Valley Forge Rd Hillsborough, NC 27278

919-732-3432 ocabc@mindspring.com

An Equal Opportunity Employer

Last Name		First Name		Middle Name		Date	
Street Address		City/State		Zip Code		Applying for Part Time Yes No Date Available	
Have you worked for Orange County ABC in the past Yes No			Are you 21 years of age or older? Yes No			Applying for Full Time Yes No Date Available	
Position Desired:			Wage/Salary Desired:			Last 4 Digits in Social Security #	
Home #		Cell#		Email			
Education							
High School attended:			City & State		Graduated Yes No	If not a Graduate; highest year completed is 9 10 11	
College or technical school:			City & State		Graduated Yes No	Degree	Major:
Graduate School			City & State		Graduated Yes No	Degree	Major:
Are you presently enrolled in school?			If yes, give name & location of school and expected degree date:				
List any job-related skills or accomplishments, including military service:							
Availability							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							NA
To:							NA
Total hours per week you are available to work:		Do you have any special requests or needs for a work schedule?					
- Provide Three References Who Are Not Former Employers Who We May Contact -							
Name and Occupation			How do you know them, and for how long?			Phone Number	
Are you related by blood or marriage to any current ABC employee? No Yes If yes Who							
Employment offers are conditional upon completing a Federal I-9 form and also providing documents to verify identity and to provide work authorization. If hired, can you provide evidence of legal eligibility to work in the U.S.? Yes No							
Please detail any convictions for crimes other than minor traffic violations including the offense and approximate date*							

*The existence of a criminal record will not automatically exclude you from employment consideration

Employment History

List names of last 3 employers with the most recent employer listed first.

May we contact current employers before you are offered a position? Yes No	
Name of most recent or current Employer:	Supervisor Name Phone #
Address:	Dates of Employment: From: _____ To: _____
Job Title	Hourly pay or salary: Starting pay: _____ Ending pay: _____
Job Duties	Reason for Leaving:
Name of previous Employer:	Supervisor Name Phone #
Address:	Dates of Employment: From: _____ To: _____
Job Title	Hourly pay or salary: Starting pay: _____ Ending pay: _____
Job Duties	Reason for Leaving:
Name of previous Employer:	Supervisor Name Phone #
Address:	Dates of Employment: From: _____ To: _____
Job Title	Hourly pay or salary: Starting pay: _____ Ending pay: _____
Job Duties	Reason for Leaving:

Carefully read each Statement below and sign at the bottom

I certify that all of the information provided in this employment application is true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background, credit history check, and drug test, as applicable. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employers, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I have read, understand, and agree to the above statements.

Signature

Date