

# **CITY OF KINSTON NORTH CAROLINA**

## **APPLICATION FOR EMPLOYMENT**



To help us learn about your experience, abilities and interests, please prepare this Application thoroughly and accurately. Your "Application for Employment" is used for making referrals to those City departments filling job openings. It can be officially considered by the City only after you have completed and submitted the original of the Application and the attached "Applicant Log" to the Personnel Department. If you forget to complete some part of this application, it will be returned to you for completion.

**DEPARTMENT OF HUMAN RESOURCES  
CITY OF KINSTON  
P.O. Box 339  
207 East King Street  
Kinston, NC 28501**

The City of Kinston is an Equal Opportunity/Affirmative Action Employer and does not discriminate in employment on the basis of race, color, religion, age, sex, national origin or disability.



# APPLICATION FOR EMPLOYMENT

EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

**CITY OF KINSTON  
NORTH CAROLINA**

### 1. CURRENT DATA

Position Applied For \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Mailing Address \_\_\_\_\_  
St. & No. or RFD City County State Zip

\*NOTE: Employees of the City of Kinston are required to live within a 50 mile radius of the City of Kinston.

Telephone (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

If neither, where can you be reached \_\_\_\_\_

When will you be available for work? \_\_\_\_\_

### 2. EDUCATION AND TRAINING

ENDING DATE Circle highest grade completed:

High School \_\_\_\_\_  
Name City State Month/Year      1 2 3 4 5 6 7 8 9 10 11 12 GED

Education Beyond High School	Name and Location	Attended				Circle Number Years Completed	Credit Hours	Degree, Diploma or Certificate	Year Received	Major Subject
		From		To						
		Mo.	Yr.	Mo.	Yr.					
College or University						1 2 3 4				
Graduate or Professional						1 2 3 4				
Other (Internship, etc.)						1 2 3 4				

If your education includes courses specifically related to a position sought, please indicate these courses below.

Subject	Credits	Grade	Subject	Credits	Grade

Are you enrolled in school now?  Yes  No If yes, where? \_\_\_\_\_

Course of Study? \_\_\_\_\_

Fields of work for which you are licensed, registered or certified. Give date(s) and source(s) of issuance. \_\_\_\_\_

### 3. GENERAL INFORMATION

a. Citizenship:  U.S. If not, Visa Type \_\_\_\_\_ Date Granted \_\_\_\_\_ Immigrant No. \_\_\_\_\_  
Mo. Day Yr.

b. Military Status: Are you a veteran?  Yes  No Dates of Military Service: \_\_\_\_\_ To \_\_\_\_\_ Branch \_\_\_\_\_

c. Are you, or have you ever been employed by the City of Kinston?  Yes  No If yes, where? Give places, dates and name used (if different) in Item j.

d. Have you filed an application with the City of Kinston within the last 3 months?  Yes  No If yes, give date and position applied for in Item j.

e. Are you related by blood or marriage to any person now employed by the City of Kinston?  Yes  No If yes, give name, relationship and department name in Item j.

f. Have you ever been convicted of any unlawful offense (other than a minor traffic violation)?  Yes  No If yes, explain in Item j.

g. Will you accept employment requiring regular night work or weekend work?  Yes  No

h. Will you accept employment requiring occasional night work or weekend work?  Yes  No

i. Please list your driver's license number and the state and date it was issued.

License No. \_\_\_\_\_ State \_\_\_\_\_ Date of Issue \_\_\_\_\_ Date to Expire \_\_\_\_\_

j. \_\_\_\_\_

**4. EMPLOYMENT RECORD**

List your present or most recent employer FIRST. Include U.S. Armed Forces experience. Account for all time during the past 10 years. Include any volunteer or unpaid experience. If necessary, use the Continuation Sheet.

A. Title of present or last position \_\_\_\_\_ Starting Salary \_\_\_\_\_ Last Salary \_\_\_\_\_

Supervisor's Name and Title \_\_\_\_\_

Date employed	Mo.	Yr.
Date separated	Mo.	Yr.
Full Time	Years	Months
Part Time	Years	Months
If Part Time, number of hours worked per week		

Employer \_\_\_\_\_

Address \_\_\_\_\_

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

B. Title of next to last position \_\_\_\_\_ Starting Salary \_\_\_\_\_ Last Salary \_\_\_\_\_

Supervisor's Name and Title \_\_\_\_\_

Date employed	Mo.	Yr.
Date separated	Mo.	Yr.
Full Time	Years	Months
Part Time	Years	Months
If Part Time, number of hours worked per week		

Employer \_\_\_\_\_

Address \_\_\_\_\_

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

C. Title of next to last position \_\_\_\_\_ Starting Salary \_\_\_\_\_ Last Salary \_\_\_\_\_

Supervisor's Name and Title \_\_\_\_\_

Date employed	Mo.	Yr.
Date separated	Mo.	Yr.
Full Time	Years	Months
Part Time	Years	Months
If Part Time, number of hours worked per week		

Employer \_\_\_\_\_

Address \_\_\_\_\_

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

If you are employed now, may we inquire of your present employer regarding your experience and qualifications?  No  Yes

**6. SKILLS**

Please list any skills and abilities you wish considered. Include skills with equipment or machines you operate, special computer knowledge, laboratory techniques and the like. If you wish consideration for a secretarial position, indicate speeds for typing and shorthand.

(a) \_\_\_\_\_ (d) \_\_\_\_\_ (g) \_\_\_\_\_

(b) \_\_\_\_\_ (e) \_\_\_\_\_ (h) \_\_\_\_\_

(c) \_\_\_\_\_ (f) \_\_\_\_\_ (i) \_\_\_\_\_

**EQUAL OPPORTUNITY PLEDGE**

The City of Kinston is an Equal Opportunity Employer. Through its affirmative action plan the City reaffirms its commitment to equality of opportunity and pledges that it will not practice or permit discrimination in employment on the basis of race, color, religion, sex, national origin or disability. The City complies with all applicable legislation prohibiting age discrimination in employment.

I hereby certify that all statements on this Application and the "Applicant Log" are true and complete to the best of my knowledge and belief. If employed I understand that any falsification of this record may be considered cause for termination. I authorize persons, schools, current employer (if approved by me in the "Employment Record" section) and other individual organizations or employers to provide the City of Kinston with any relevant information needed to consider my candidacy.

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

Return to: Department of Human Resources  
P.O. Box 339  
207 East King Street  
Kinston, NC 28501

CONTINUATION SHEET  
CITY OF KINSTON

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Title of present or last position: _____		Starting Salary: _____	Last Salary: _____
Date employed Mo. ___ Yr. ___	Employer: _____	Supervisor's Name: _____	
Date separated Mo. ___ Yr. ___	Address: _____		
Full-time #Yrs. ___ #Mo. ___	Duties: _____		
Part-time #Yrs. ___ #Mo. ___	_____		
If part-time, # of hrs. worked per week: ___	Reason for leaving: _____		
Title of next position: _____		Starting Salary: _____	Last Salary: _____
Date employed Mo. ___ Yr. ___	Employer: _____	Supervisor's Name: _____	
Date separated Mo. ___ Yr. ___	Address: _____		
Full-time #Yrs. ___ #Mo. ___	Duties: _____		
Part-time #Yrs. ___ #Mo. ___	_____		
If part-time, # of hrs. worked per week: ___	Reason for leaving: _____		
Title of next position: _____		Starting Salary: _____	Last Salary: _____
Date employed Mo. ___ Yr. ___	Employer: _____	Supervisor's Name: _____	
Date separated Mo. ___ Yr. ___	Address: _____		
Full-time #Yrs. ___ #Mo. ___	Duties: _____		
Part-time #Yrs. ___ #Mo. ___	_____		
If part-time, # of hrs. worked per week: ___	Reason for leaving: _____		
Title of next position: _____		Starting Salary: _____	Last Salary: _____
Date employed Mo. ___ Yr. ___	Employer: _____	Supervisor's Name: _____	
Date separated Mo. ___ Yr. ___	Address: _____		
Full-time #Yrs. ___ #Mo. ___	Duties: _____		
Part-time #Yrs. ___ #Mo. ___	_____		
If part-time, # of hrs. worked per week: ___	Reason for leaving: _____		
Title of next position: _____		Starting Salary: _____	Last Salary: _____
Date employed Mo. ___ Yr. ___	Employer: _____	Supervisor's Name: _____	
Date separated Mo. ___ Yr. ___	Address: _____		
Full-time #Yrs. ___ #Mo. ___	Duties: _____		
Part-time #Yrs. ___ #Mo. ___	_____		
If part-time, # of hrs. worked per week: ___	Reason for leaving: _____		



## CITY OF KINSTON

### APPLICANT WAIVER AND RELEASE TO CONDUCT REFERENCE CHECKS

The City of Kinston employs a variety of tools in the selection of individuals to be considered for employment with the City. Each step is designed to collect information from applicants about individual characteristics that are closely related to job performance and to effectively use this data to identify the best applicants for employment.

One of the tools is the EMPLOYMENT REFERENCE. It involves collecting information about prospective job applicants from people who have had contact with the applicants. Its purpose is to verify information given by applicants on other selection devices such as application forms and interviews and to identify additional information that may have been omitted by the applicant.

REFERENCE CHECKS may include inquiries about employment and educational background, appraisal of an applicant's character and personality and assessments by previous employers and supervisors or others who have first hand knowledge of the applicants qualifications and job performance.

Job offers with the City are contingent upon positive REFERENCE CHECKS and are made only with the WRITTEN PERMISSION OF THE APPLICANT.

If applicants are currently employed and do not wish their current supervisors to be contacted, a REFERENCE CHECK will be performed at a mutually agreed upon time. Any information solicited in REFERENCE CHECKING will be job-related, satisfy the City's legitimate business interest, not violate EEOC guidelines and adhere to state and federal privacy laws concerning release of information.

YOUR SIGNATURE BELOW AUTHORIZES THE CITY TO CONDUCT THE EMPLOYMENT REFERENCE CHECKS REQUIRED BY CITY POLICY AND ORDINANCE:

I authorize the City of Kinston to contact persons familiar with my work qualifications to solicit information concerning my employment and educational background, appraisal of my character and personality, and an analysis of my job performance abilities. I understand that the information gathered is protected as confidential under North Carolina General Statute and will not be disclosed to me. I further understand that refusal to authorize the employment reference checks will result in my disqualification from consideration for employment with the City of Kinston. I understand that the City of Kinston reserves the right not to make an offer of employment if any of the information received through the reference checks materially contradicts information supplied through the application form and/or interview.

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Signature of Applicant

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Signature of Witness

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Date

# APPLICANT LOG

The City of Kinston is an Equal Opportunity/Affirmative Action Employer. The Federal Government requires us to collect and be able to produce data pertaining to each applicant's sex, ethnic background, citizenship and veteran status. Please complete the following Applicant Log information. It will be removed from the Application, retained in the Personnel Department and not forwarded to any employing department. In keeping with the city's status as an Equal Opportunity/Affirmative Action Employer, this information will not be used in making any decision affecting employment or any personnel action following employment.

NAME _____ Date _____ <small style="display: flex; justify-content: space-between; width: 100%;"> <span>Last</span> <span>First</span> <span>Middle</span> </small>											
ADDRESS _____ Zip _____ <small style="display: flex; justify-content: space-between; width: 100%;"> <span>St. &amp; No., RFD, or P.O. Box</span> <span>City</span> <span>State</span> </small>											
DATE OF BIRTH _____											
<p style="text-align: center;"><b>ETHNIC BACKGROUND</b></p> <p><input type="checkbox"/> <i>White</i>: Origins in Europe, North Africa, or the Middle East.</p> <p><input type="checkbox"/> <i>Black</i>: Origins in any of the black racial groups.</p> <p><input type="checkbox"/> <i>American Indian or Alaskan Native</i>: Origins in the original peoples of North America.</p> <p><input type="checkbox"/> <i>Asian or Pacific Islanders</i>: Origins in the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.</p> <p><input type="checkbox"/> <i>Hispanic</i>: Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race.</p>	<p style="text-align: center;"><b>VETERAN</b></p> <p><input type="checkbox"/> <i>Vietnam Era Veteran (8-5-64 to 5-7-75)</i>                      "A person (1) who (i) service on active duty for a period of more than 180 days, any part of which occurred during the Vietnam era, and was discharged or released therefrom with other than a dishonorable discharge, or (ii) was discharged or released from active duty for a serviced-connected disability if any part of such active duty was performed during the Vietnam era, and (2) who was so discharged or released within 48 months preceding his application for employment covered under the Act."</p> <p><input type="checkbox"/> <i>Disabled Veteran</i>                      "A person entitled to disability compensation under laws administered by the Veterans Administration for a disability rated at 30 per centum or more, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty."</p> <p><input type="checkbox"/> <i>Disabled Vietnam Era Veteran (8-5-64 to 5-7-75)</i>                      Both of the above.</p>										
<p style="text-align: center;"><b>CITIZENSHIP</b></p> <p><input type="checkbox"/> <i>Resident Foreign National</i>                      An alien who has been admitted for permanent residence (must have Alien Registration Receipt Card, Form I-551).</p> <p><input type="checkbox"/> <i>Non-Resident Foreign National</i>                      An alien admitted temporarily for specific purposes and periods of time.</p> <p><input type="checkbox"/> <i>U.S. Citizen</i></p>	<p style="text-align: center;"><b>SEX</b></p> <p><input type="checkbox"/> Male <span style="margin-left: 100px;"><input type="checkbox"/> Female</span></p>										
<p><b>U. S. SELECTIVE SERVICE REQUIREMENT</b></p> <p><input type="checkbox"/> I certify that I am registered with Selective Service.</p> <p><input type="checkbox"/> I certify that I am not required to be registered with Selective Service because I am female.</p> <p><input type="checkbox"/> I am in the armed service on active duty. (Note: Does not apply to members of the Reserves and National Guard who are not on active duty.)</p> <p><input type="checkbox"/> I have not reached my 18th birthday.</p> <p><input type="checkbox"/> I was born before 1960.</p> <p><input type="checkbox"/> I am a citizen of the Federated States of Micronesia, or the Marshall Islands or a permanent resident of the Trust Territory of the Pacific Islands (Palau).</p>											
<p><b>THIS APPLICATION IS IN RESPONSE TO (Please check block and name particular source):</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><input type="checkbox"/> Kinston Free Press _____</td> <td style="width: 50%; border: none;"><input type="checkbox"/> Radio _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> News &amp; Observer _____</td> <td style="border: none;"><input type="checkbox"/> TV _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Other Newspaper _____</td> <td style="border: none;"><input type="checkbox"/> Personal Reference _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Professional magazine or newsletter _____</td> <td style="border: none;"><input type="checkbox"/> Other _____</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Employment Security Commission _____</td> <td style="border: none;"><input type="checkbox"/> Job Opportunities Listing _____</td> </tr> </table>		<input type="checkbox"/> Kinston Free Press _____	<input type="checkbox"/> Radio _____	<input type="checkbox"/> News & Observer _____	<input type="checkbox"/> TV _____	<input type="checkbox"/> Other Newspaper _____	<input type="checkbox"/> Personal Reference _____	<input type="checkbox"/> Professional magazine or newsletter _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Employment Security Commission _____	<input type="checkbox"/> Job Opportunities Listing _____
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<input type="checkbox"/> News & Observer _____	<input type="checkbox"/> TV _____										
<input type="checkbox"/> Other Newspaper _____	<input type="checkbox"/> Personal Reference _____										
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<input type="checkbox"/> Employment Security Commission _____	<input type="checkbox"/> Job Opportunities Listing _____										
POSITION APPLIED FOR _____											