



# TOWN OF ABERDEEN

## *Employment Application*

Thank you for applying for employment with the Town of Aberdeen. **PLEASE NOTE:** We accept Employment Applications only when there is an advertised job opening. Employment Applications may be mailed to: Town of Aberdeen Human Resources, PO Box 785, Aberdeen, NC 28315 or hand delivered to 115 N. Poplar Street, Aberdeen, NC. To view a listing of our current job vacancies, please visit our web site at [www.townofaberdeen.net](http://www.townofaberdeen.net). The Town of Aberdeen wants to find the best qualified people available to serve its citizens. Although everyone who applies cannot be hired, your application will be given every consideration.

### IMPORTANT INFORMATION

The Town of Aberdeen employs only U.S. citizens or aliens who can provide proof of identity and work authorization within three working days of employment. A complete list of acceptable identification will be provided to you by Human Resources upon employment. Males subject to military selective service registration must certify compliance to be eligible for employment.

### WHEN COMPLETING THIS APPLICATION, PLEASE MAKE SURE YOU:

Apply for only one vacancy per application.

Complete all sections of application – incomplete applications will not be accepted.

Give complete information on your education and work history (“see resume” is not acceptable).

List separately each job held and your duties for each position when you worked for one employer and held more than one position.

Check for accuracy.

Sign and date application.

### EQUAL EMPLOYMENT INFORMATION

The Town of Aberdeen is an Equal Opportunity Employer. We do not practice or condone discrimination, in any form, against employees or applicants on the grounds of race, creed, color, national origin, religion, sex, age, political affiliation or mental or physical abilities except where physical or mental abilities, sex, or age are legitimate occupational qualifications.

### POSITION APPLYING FOR

Enter below the specific title of the job for which you are applying. Please list only one job on each application.

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# APPLICATION FOR EMPLOYMENT

Town of Aberdeen  
 PO Box 785, 115 N. Poplar Street  
 Aberdeen, NC 28315  
 Phone: 910-944-1115  
 Fax: 910-944-7459

Position Applying For \_\_\_\_\_

Date of Application \_\_\_\_\_

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

Address (Street number and name) \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

CHECK the types of work you will accept:  1. Permanent full-time  2. Permanent part-time  3. Temporary full-time  4. Temporary part-time  
 5. Any of the preceding  6. Work involving Travel

If you are not available for work now, enter the earliest date you could begin work (mo/day/yr.) \_\_\_\_\_

Have you ever filed an application with the Town of Aberdeen?  YES  NO If yes, give date: \_\_\_\_\_

Are you now or were you previously related in any way to a Town employee?  YES  NO

If yes, give name, relationship, and department: \_\_\_\_\_

## Education

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4 Graduate School 1 2 3 4

Under S/Q Hrs., list the hours of credit received and if they were semester (S) or quarter (Q) hours.

Schools	Name and Location	Dates Attended (mo/yr)		Grad?	S/Q Hrs.	Major/Minor Course	Type of Degree Received
		From	To				
High School				YES <input type="checkbox"/> NO <input type="checkbox"/>			
College University				YES <input type="checkbox"/> NO <input type="checkbox"/>			
Graduate or Professional				YES <input type="checkbox"/> NO <input type="checkbox"/>			
Other educational, vocational school, internships, etc.				YES <input type="checkbox"/> NO <input type="checkbox"/>			

Special training programs and seminars you have completed in the last five years (list):

If the job(s) applied for calls for specific courses, indicate those courses taken and credits received:

Current professional status: (List fields of work for which you have been registered):

Registration \_\_\_\_\_ State \_\_\_\_\_ No. \_\_\_\_\_

Registration \_\_\_\_\_ State \_\_\_\_\_ No. \_\_\_\_\_

Licenses and certifications (List, giving dates and sources of issuance):

## SKILLS

CHECK the following skills, experiences, etc., which you have:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Driver's License _____<br>Number _____ State _____ | <input type="checkbox"/> Sign Language _____                        | <input type="checkbox"/> Microsoft Excel _____           |
| <input type="checkbox"/> CDL License _____<br>Number _____ State _____      | <input type="checkbox"/> Foreign language (specify) _____           | <input type="checkbox"/> Microsoft Word _____            |
| <input type="checkbox"/> Car for use at work _____                          | <input type="checkbox"/> Adding Machine/calculator _____            | <input type="checkbox"/> Web Site Design _____           |
|   | <input type="checkbox"/> Typing (specify WPM) _____                 | <input type="checkbox"/> Computer Skills (specify) _____ |
|   | <input type="checkbox"/> Shorthand/speedwriting (specify WPM) _____ | <input type="checkbox"/> Other _____                     |

## HOW DID YOU LEARN OF THIS OPENING? Check sources below.

- |                                     |                                  |
|-------------------------------------|----------------------------------|
| ____ Town of Aberdeen Website       | ____ Newspaper (which one) _____ |
| ____ Employment Security Commission | ____ Social Media _____          |
| ____ Referred by Current Employee   | ____ Other _____                 |

**WORK HISTORY** (include volunteer experience) Use Additional Sheets if Necessary

Current or Last Employer		Address		
Job Title		Supervisor's Name	Telephone Number	No. Supervised by you
Date Employed (mo/yr)	Starting Salary \$ _____ per	Ending or Current Salary \$ _____ per	Reason for Leaving	May We Contact Employer? YES <input type="checkbox"/> NO <input type="checkbox"/>
Date Separated (mo/yr)	List major duties in order of their importance in the job			
Full Time    Years    Months				
Part Time    Years    Months				
If part time, number of hours worked per week				

Employer		Address		
Job Title		Supervisor's Name	Telephone Number	No. Supervised by you
Date Employed (mo/yr)	Starting Salary \$ _____ per	Ending or Current Salary \$ _____ per	Reason for Leaving	
Date Separated (mo/yr)	List major duties in order of their importance in the job			
Full Time    Years    Months				
Part Time    Years    Months				
If part time, number of hours worked per week				

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Date Employed (mo/yr)	Starting Salary \$ _____ per	Ending or Current Salary \$ _____ per	Reason for Leaving	
Date Separated (mo/yr)	List major duties in order of their importance in the job			
Full Time    Years    Months				
Part Time    Years    Months				
If part time, number of hours worked per week				

**REFERENCES**

Give name, address, and telephone numbers of three references who are not related to you and are not previous employers.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**CERTIFICATION AND RELEASE – This application MUST be signed and dated below to be considered.**

I certify that I have given true, accurate and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registration and licensing boards, and others to furnish whatever detail is available concerning my qualifications. I authorize investigation of all statements made in this application and understand that false information or documentation, or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action or dismissal if I am employed, and (or) criminal action. I further understand that dismissal upon employment shall be mandatory if fraudulent disclosures are given to meet position qualifications (Authority: G.S. 126-30, G.S. 14-122.1.)

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

\*\* When you have completed the above application form, please submit by saving a copy to your hard drive and attach the file to an email sent to [rosy@townofaberdeen.net](mailto:rosy@townofaberdeen.net).

Send a copy of your cover letter and resume to [rosy@townofaberdeen.net](mailto:rosy@townofaberdeen.net).

This form can also be printed after you have typed in your information and mailed with your resume to:  
Town of Aberdeen  
Attn: Human Resources Director  
PO Box 785  
Aberdeen, NC 28315

You can also hand deliver your application and resume to:  
115 N. Poplar Street  
Aberdeen, NC 28315

For questions or comments regarding job opportunities with the Town of Aberdeen, you may e-mail the Human Resources Director at [rosy@townofaberdeen.net](mailto:rosy@townofaberdeen.net).