

**City Of Morganton ABC Board  
250 West Fleming Drive  
Morganton, NC 28655  
Telephone: 828-437-8919  
An Equal Opportunity Employer**

**APPLICATION FOR EMPLOYMENT**

(This application form is designed to protect individual rights and privacy and to insure equal employment opportunity. All questions are considered import for employment and no other use is intended for the information you submit.)

Date Applied: \_\_\_\_\_ Position Applied For: Full Time  Part Time

**Personal Data (Please Print)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License # \_\_\_\_\_ State: \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_  
Home
Work
Cell

Do you have any relatives currently employed by the City of Morganton ABC Board? Yes  No

If Yes, give name and relationship: \_\_\_\_\_

Are you legally eligible for employment in the U.S. ? Yes  No

Are you 18 years of age or older? Yes  No

When will you be available for employment (Date) \_\_\_\_\_

May inquiry be made of your present or past employer regarding your character, qualifications, etc. ? Yes  No

Do you have any physical limitations that would prevent your effectively performing the job for which you are applying? Yes  No . If Yes, please explain. \_\_\_\_\_

What business Machines can you operate? \_\_\_\_\_

**BOND IS REQUIRED FOR ALL CITY OF MORGANTON ABC EMPLOYEES:** Have you ever been convicted of any offence other than minor traffic violations: Yes  No . If yes, please explain: \_\_\_\_\_

**EDUCATIONAL DATA:** Elementary and High School College Graduate  
 Circle your highest grade of schooling completed: 1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 1 2

List the High School or Schools you attended: \_\_\_\_\_

Did you graduate from High School Yes  No  or pass the High School Equivalency Test? Yes  No

Education Beyond High School	Name and Location	<u>Attended</u>		No. of years Completed	Did you Graduate?	Degree/Diploma and Year	Major Subject
		From Mo. Yr.	To Mo. Yr.				
College/ University				1 2 3 4			
Graduate				1 2 3 4			
Other				1 2 3 4			

**EMPLOYMENT DATA:**

Please list accurately and completely your employment history beginning with your present or most recent employer. Please list all positions held, including military, part-time, summer and significant volunteer work.

Current or last employer: \_\_\_\_\_ Address \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_ No. Supervised By You \_\_\_\_\_

Date Employed (month/Year	Starting Salary	Ending Salary	Reason for Leaving
Date Separated (month/year)	Duties:		
Full Time: Yrs. _____ Months _____			
Part Time: Yrs. _____ Months _____			

Current or last employer: \_\_\_\_\_ Address \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_ No. Supervised By You \_\_\_\_\_

Date Employed (month/Year	Starting Salary	Ending Salary	Reason for Leaving
Date Separated (month/year)	Duties:		
Full Time: Yrs. _____ Months _____			
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Job Title: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_ No. Supervised By You \_\_\_\_\_

Date Employed (month/Year	Starting Salary	Ending Salary	Reason for Leaving
Date Separated (month/year)	Duties:		
Full Time: Yrs. _____ Months _____			
Part Time: Yrs. _____ Months _____			

**REFERENCES:**

Please list the names of three persons who are not related to you and who have a definite knowledge of your work and ability.

<b>Name:</b>	<b>Phone No. (Home)</b>	<b>(Work)</b>
<b>Address</b>		
<b>Name:</b>	<b>Phone No. (Home)</b>	<b>(Work)</b>
<b>Address</b>		
<b>Name:</b>	<b>Phone No. (Home)</b>	<b>(Work)</b>
<b>Address</b>		

**Applicant Signature:** I certify that all of the statements made in this application and any attachments are true, complete, and correct to the best of my knowledge. I authorize the City of Morganton ABC Board to investigate these statements and release of any pertinent information to the ABC Board hiring official. I understand false information may be grounds for rejection of my application and/or dismissal if I am employed.

\_\_\_\_\_  
Signature of Applicant (unsigned applications will not be processed)

\_\_\_\_\_  
Date

Thank you for your interest in employment with the City of Morganton ABC Board. The ABC Board attempts to find the best qualified persons to serve its citizens. Although everyone who applies cannot be hired, your application will be given every consideration.