



14. EDUCATION - Give your complete educational history below:

Circle highest school year completed

1 2 3 4 5 6 7 8 9 10 11 12

Did you either graduate from high school or pass the High School Equivalency Test? Yes \_\_\_\_\_ No \_\_\_\_\_

High School Name: \_\_\_\_\_ Location \_\_\_\_\_ Ending Date: \_\_\_\_\_

Education Beyond High School Name & Location	Attended From To Month/Yr. Month/Yr.		Circle Number of Years Completed	Did You Graduate	Degree/ Diploma Year Rec'd	Major Subject
College or University			1 2 3 4			
Technical College			1 2			

15. List fields of work for which you are licensed, registered, or certified, give date(s) and sources or issuance:

\_\_\_\_\_  
 \_\_\_\_\_

16. List typing and shorthand skills, machines you can operate, and other skills in which you are proficient:

\_\_\_\_\_  
 \_\_\_\_\_

17. If the position applied calls for specific courses, indicate courses and credits received.

\_\_\_\_\_  
 \_\_\_\_\_

18. EMPLOYMENT RECORD - Answer questions for each period of employment. Failure to give complete information may result in rejection of your application. Begin with your present or last position.

(a) Title of present or last position \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Date Employed \_\_\_\_\_ Date Separated \_\_\_\_\_

Full -Time: Years \_\_\_\_\_ Months \_\_\_\_\_ Part-Time: Years \_\_\_\_\_ Months \_\_\_\_\_ Number of hours/week: \_\_\_\_\_

Name and Title of Supervisor: \_\_\_\_\_ Number of employees supervised by you \_\_\_\_\_

Employer: \_\_\_\_\_ Phone No. \_\_\_\_\_

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

Duties: \_\_\_\_\_

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

\_\_\_\_\_

(b) Title of present or last position \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
 Date Employed \_\_\_\_\_ Date Separated \_\_\_\_\_  
 Full -Time: Years \_\_\_\_\_ Months \_\_\_\_\_ Part-Time: Years \_\_\_\_\_ Months \_\_\_\_\_ Number of hours/week: \_\_\_\_\_  
 Name and Title of Supervisor: \_\_\_\_\_ Number of employees supervised by you \_\_\_\_\_  
 Employer: \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_  
 \_\_\_\_\_

(c) Title of present or last position \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
 Date Employed \_\_\_\_\_ Date Separated \_\_\_\_\_  
 Full -Time: Years \_\_\_\_\_ Months \_\_\_\_\_ Part-Time: Years \_\_\_\_\_ Months \_\_\_\_\_ Number of hours/week: \_\_\_\_\_  
 Name and Title of Supervisor: \_\_\_\_\_ Number of employees supervised by you \_\_\_\_\_  
 Employer: \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_  
 \_\_\_\_\_

**Certificate of Applicant**

Did you personally prepare this application yourself? Yes \_\_\_\_\_ No \_\_\_\_\_

I understand that upon hire with Duplin County, I will be required to participate in pre-employment drug testing. I certify to the best of my knowledge and belief, the statements given, truly represent my background and experience. I understand that false information may be grounds for rejection of my application or dismissal if I am employed. I hereby acknowledge that all documentation submitted as a part of my application for employment with Duplin County shall become the property of Duplin County and will not be returned to the job applicant.

I hereby grant Duplin County authorization to conduct a driver's license check and criminal background check. I also hereby consent to alcohol and drug screening in accordance with the County's policy.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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**FOR EQUAL EMPLOYMENT STATISTICAL INFORMATION ONLY**

Name: \_\_\_\_\_ Date of Application \_\_\_\_\_

Social Security Number: \_\_\_\_\_ NCDL# \_\_\_\_\_

Are you a U.S. Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

American \_\_\_ Black \_\_\_ Asian American \_\_\_ White \_\_\_ Spanish Surnamed American \_\_\_ Other \_\_\_

Application No. \_\_\_\_\_

**AUTHORIZATION FOR REFERENCE RELEASE**

TO WHOM IT MAY CONCERN:

I have applied for employment with Duplin County and hereby authorize any present or past employer of mine, any school, or personal reference to release information to the Duplin County Personnel Office regarding my work experience, character, etc. I release all such persons/institutions from damages or liability as a result of inquiry or the furnishing of the information requested.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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**DUPLIN COUNTY PERSONNEL OFFICE**

I understand that my county application is valid for the particular position for which I have applied.

Applications shall be valid until the position which was advertised and applied for by the applicant has been filled.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date