

WATAUGA COUNTY GOVERNMENT
Employment Application

APPLICATION INSTRUCTIONS
PLEASE READ AND FOLLOW CAREFULLY

- Applications are accepted for current Watauga County vacancies only.
- A separate application must be completed for each position for which you apply.
- Please type or print application information. Use Black Ink ONLY to complete the application.
- Photocopies of the Application may be submitted with the current date, position desired, and an original signature.
- Resumes and cover letters may be submitted with the completed application for supplemental information.
- Incomplete applications will not be considered. Applications that are received unsigned, undated, incomplete, or after the closing date, will be eliminated from consideration.
- A completed Watauga County Employment Application must be submitted and received by the **NC Works Career Center** located at **130 Poplar Grove Connector, Boone NC 28607** by the closing date to be considered for a current vacancy.
- You must apply for each vacancy for which you want to be considered.
- All applications become the property of Watauga County and cannot be returned.
- Watauga County Government is a drug free work place.

Watauga County is an equal opportunity employer.

It is the policy of Watauga County Government to prohibit discrimination on the basis of race, gender, creed, national origin, religion, age, or disability in employment or the provision of services.



**WATAUGA COUNTY
EMPLOYMENT APPLICATION**



Position Applied For _____

| | | | |
|------------|-------------|--------------------|--------------------|
| First Name | MI | ***** | *****Last Name |
| Address | | "City | |
| Zip Code | *****County | *****Daytime Phone | *****Evening Phone |

EDUCATION

| | High School | Vocational/ Technical | College/ University | Graduate/ Professional |
|--------------------------|---|--|--|--|
| School Name and Location | | | | |
| Did you Graduate? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Dates Attended | | | | |
| Credit Hours | | | | |
| Type Degree | | | | |
| Course of Study/Major | | | | |

SKILLS

List any fields of work for which you are currently licensed, registered, or certified. Give dates and sources of issuance.

List any office or other special skills you possess (typing wpm, shorthand, business machines, professional equipment, etc)

List any computer hardware and software with which you have experience.

List any foreign languages in which you are fluent.

GENERAL INFORMATION

Please Answer All Questions

- Do you currently work for Watauga County Government? yes no
- Are you a former employee of Watauga County Government? yes no
If yes, indicate Dept. and Date Separated _____
- Are you related by blood or marriage to any person currently employed by Watauga County? yes no
If yes, indicate Name, Dept., and Relationship _____
- Have you ever worked under another name? (Used to verify work experience, education, etc.) yes no
If yes, please list _____
- Are you legally eligible to work in the United States? yes no
- If you have a valid driver's license, indicate state of issuance and DL# _____
Do you have a car for use at work? yes no
- Have you ever been convicted of any unlawful offenses, other than a minor traffic violation: yes no
If yes, please explain fully on separate sheet.
NOTE: A conviction record will not necessarily exclude you from employment. Factors such as age at the time of offense, rehabilitation efforts, how recent the offense was, nature of the crime and the type of job for which you are applying for will be considered.
- When will you be available to begin work (mo/day/yr)? _____



EMPLOYMENT HISTORY



PLEASE READ CAREFULLY

Using a separate section for each position, describe in detail ALL work experiences beginning with your present or most recent job. List all jobs you have held. Include periods of unemployment, military service, internships, and volunteer and summer work. Use additional "Continuation Sheets" if necessary. Be sure to indicate whether employment was full-time or part-time, and if part-time, state the average number of hours worked per week. Incomplete information will result in the disqualification of your application. DO NOT REFER TO RESUME.

| | | |
|--|---|---|
| Employer | Address | Phone |
| Job Title | Supervisor's Name and Title | No. Supervised by You |
| Date Employed (Mo/Yr) _____ | Starting Salary: \$ _____ Per _____ | May We Contact Employer? <input type="checkbox"/> yes <input type="checkbox"/> no |
| Date Separated (Mo/Yr) _____ | Ending Salary: \$ _____ Per _____ | |
| <input type="checkbox"/> Full-time _____ #years _____ #months | <input type="checkbox"/> Part-time _____ # years _____ # months; If Part-time, # of hours worked per week _____ | |
| Reason for Leaving/Wanting to Leave: | | |
| Describe your duties and responsibilities: | | |
| | | |
| | | |
| | | |
| | | |
| Employer | Address | Phone |
| Job Title | Supervisor's Name and Title | No. Supervised by You |
| Date Employed (Mo/Yr) _____ | Starting Salary: \$ _____ Per _____ | May We Contact Employer? <input type="checkbox"/> yes <input type="checkbox"/> no |
| Date Separated (Mo/Yr) _____ | Ending Salary: \$ _____ Per _____ | |
| <input type="checkbox"/> Full-time _____ # years _____ #months | <input type="checkbox"/> Part-time _____ # years _____ # months; If Part-time, # of hours worked per week _____ | |
| Reason for Leaving: | | |
| Describe your duties and responsibilities: | | |
| | | |
| | | |
| | | |
| | | |
| Employer | Address | Phone |
| Job Title | Supervisor's Name and Title | No. Supervised by You |
| Date Employed (Mo/Yr) _____ | Starting Salary: \$ _____ Per _____ | May We Contact Employer? <input type="checkbox"/> yes <input type="checkbox"/> no |
| Date Separated (Mo/Yr) _____ | Ending Salary: \$ _____ Per _____ | |
| <input type="checkbox"/> Full-time _____ # years _____ #months | <input type="checkbox"/> Part-time _____ # years _____ # months; If Part-time, # of hours worked per week _____ | |
| Reason for Leaving: | | |
| Describe your duties and responsibilities: | | |
| | | |
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| | | |



EMPLOYMENT HISTORY



Continued

| | | |
|---|---|---|
| Employer | Address | Phone |
| Job Title | Supervisor's Name and Title | No. Supervised by You |
| Date Employed (Mo/Yr) _____ | Starting Salary: \$ _____ Per _____ | May We Contact Employer? <input type="checkbox"/> yes <input type="checkbox"/> no |
| Date Separated (Mo/Yr) _____ | Ending Salary: \$ _____ Per _____ | |
| <input type="checkbox"/> Full-time _____ #years _____ #months | <input type="checkbox"/> Part-time _____ # years _____ # months; If Part-time, # of hours worked per week _____ | |
| Reason for Leaving: | | |
| Describe your duties and responsibilities: | | |
| | | |
| | | |
| | | |

REFERENCES
(Do not list former Employers or Relatives)

| | | |
|------|---------|-----------|
| Name | Address | Telephone |

CERTIFICATION

I certify that all of the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements or information may be grounds for rejection of my application, or dismissal if I am employed. I also understand that as a condition of my employment, I will be required to furnish documentation verifying my identity and eligibility to work in the United States. A background check of my driving, criminal, credit, or other records may be conducted before employment. I permit the County to conduct a police and court records investigation of my background if relevant to the job for which I am applying.

I authorize any and all of my current and previous employers, including the U.S. Government or U.S. Military, and other persons, registration and licensing boards, and educational institutions listed on my application, to provide Watauga County Government with any job-related information requested. I waive any right to legal claims against a disclosing person, employer, or institution and the prospective employer seeking and using this information for hiring purposes. Notwithstanding any provisions of Federal or State law, I also waive any right I may have to review confidential material or information received by Watauga County from a person, employer, or institution.

I understand that Watauga County is a drug free workplace and any offer of employment from Watauga County will be contingent upon satisfactory completion of a physical examination determining that I am capable of performing all job responsibilities.

I certify that if I am a male between the ages of 18 and 26, I am aware of and in compliance with all applicable registration requirements of the Military Selective Service Act.

Signature of Applicant (Unsigned applications will not be processed) _____ Date _____