

# STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA

## **Employment Application**

			Applican	t Information			
Full Name:						_ Date:	
Home Address:	Last		First		М.І.	And/I Init #	
Audress.	City						
Mailing							
Address: (If Different)						_ Apt/Unit #	
	City				State	ZIP Code	
Phone:			Cell:	Emai	l:		
Position A	pplied	for:					
Date Available:				Desired Salary: <u>\$</u>			
Are you a	citizen	of the United States	? YES 🗌 NO 🗌	If no, are you autho	orized to wor	k in the U.S.? YES	
Have you	ever w	orked for SEANC?	YES 🗌 NO 🗌	If yes, when?			
crimes of	theft, fr	een convicted for the aud, embezzlement, related crimes?"	á	Conviction of a crime will r age at the time of the offens rehabilitation will be take employment.	se, type of offense	e, remoteness of the offer	nse in time, and
			Ed	ucation			
High Scho	ool:		Addres	S:			
From:		To:	Did you graduate	9? YES 🗌 NO 🗌 🛛	Diploma:		
College:			Addre	ss:			
From:		To:	_ Did you graduate	e? YES 🗌 NO 🗌	Degree:		
Graduate Profession			Addres	s:			
From:		To:	_ Did you graduate	e? YES 🗌 NO 🗌	Degree:		
Other:			Addres	s:			
From:		То:	_ Did you graduate	e? YES 🗌 NO 🗌	Degree:		

### Military Service

	ct to Military Selective Service registration? Certify compliance by in		] NO 🗌 Initials:
	r served honorably in the Armed Forces of the United States on act her than training?		] NO 🗌
Branch:	Rank:	From:	То:
	and experience related to position		
	Previous Employment		
		Phone:	
Address:		Supervisor:	
Job Title: Responsibiliti	Starting Salary: <u>\$</u>	Ending Sa	alary: <b>\$</b>
	To: Reason for Leaving ct your previous supervisor for a reference? YES □ NO □		
Compony		Dhanai	
	Starting Salary: \$		alary: <b>\$</b>
Responsibiliti	es:		
From:	To: Reason for Leaving	:	
May we conta	ct your previous supervisor for a reference? YES NO		
Company:		Phone:	
Address:		Supervisor:	
Job Title:	Starting Salary: <u>\$</u>	Ending Sa	alary: <b>\$</b>
Responsibiliti			
From:	To: Reason for Leaving	:	
May we conta	ct your previous supervisor for a reference? YES NO		

Continued on additional sheet?

#### References

Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	

#### Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

In making this application for employment, it is understood that a background check of your credit, criminal and civic history may be made, including information obtained through personal contact with individuals with whom you are acquainted. Inquiries will include checking records that can include information as to your character, general reputation, personal characteristics and mode of living. You have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date:

Please print, sign and submit this application with your resume to:

State Employees Association of North Carolina 1621 Midtown Place Raleigh, NC 27609

Attn: Human Resources

Please list three professional references.

### Previous Employment (Continued)

Company:				Phone:
Address:	Supervisor:			
Job Title:		Ending Salary: <u>\$</u>		
Responsibilities:				
From: May we contact your p	To: revious supervisor for a			
Company:				Phone:
Address:				
Job Title: Responsibilities:		Starting Sa	lary: <u>\$</u>	Ending Salary: <u>\$</u>
From:	To:		Posson for Logving:	
May we contact your p	revious supervisor for a	a reference?	YES 🗌 NO 🗌	
Company:				Phone:
Address:				Supervisor:
Job Title:			ary: <u>\$</u>	Ending Salary: <u>\$</u>
Responsibilities:				
From:			Reason for Leaving:	
May we contact your p	revious supervisor for a	a reference?	YES NO	
Company:				Phone:
				Supervisor:
		_ Starting Sal	ary: <u>\$</u>	Ending Salary: <u>\$</u>
Responsibilities:				
From:	То:		Reason for Leaving:	