



Employment Application

ECVC
2100 N. Greene Street
Greenville, NC 27834
252-758-4188

If you are a qualified individual with a disability or a disabled veteran and are unable or limited in your ability to complete this application, you may request a reasonable accommodation to express interest in a specific opening by calling 1-252-758-4188 or by stopping by our office.

Please Print

Applicant Information

Position(s) applied for:		Date:
Full Name		
Last	First	M.I.
Address:		
Street Address		Apartment/Unit #
City	State	ZIP Code
Phone:	Email	

Date Available:	Desired Salary:\$
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Are you at least 18 years of age?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you authorized to work in the U.S. without employer sponsorship?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?
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Answering "yes" to either part of the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be taken into account.

Have you ever been convicted of a crime (other than a minor traffic violation) that has not been expunged, sealed, pardoned, annulled, statutorily eradicated, or dismissed upon condition of probation? You are not required to include sealed or expunged records of conviction or arrest, including juvenile records.

YES NO

If yes, explain:

Education

High School:	Address:
From: To: Did you graduate?	Diploma::
	YES <input type="checkbox"/> NO <input type="checkbox"/>

College:	Address:
From: To: Did you graduate?	Degree:
	YES <input type="checkbox"/> NO <input type="checkbox"/>

Other:	Address:
From: To: Did you graduate?	Degree:
	YES <input type="checkbox"/> NO <input type="checkbox"/>

Previous Employment

Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job Title:	_____	Starting Salary: \$ _____	Ending Salary: \$ _____
Responsibilities:	_____		
From:	_____	To:	_____
		Reason for Leaving:	_____
		YES	NO
May we contact your previous supervisor for a reference?	<input type="checkbox"/>	<input type="checkbox"/>	Phone: _____

Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job Title:	_____	Starting Salary: \$ _____	Ending Salary: \$ _____
Responsibilities:	_____		
From:	_____	To:	_____
		Reason for Leaving:	_____
		YES	NO
May we contact your previous supervisor for a reference?	<input type="checkbox"/>	<input type="checkbox"/>	Phone: _____

Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job Title:	_____	Starting Salary: \$ _____	Ending Salary: \$ _____
Responsibilities:	_____		
From:	_____	To:	_____
		Reason for Leaving:	_____
		YES	NO
May we contact your previous supervisor for a reference?	<input type="checkbox"/>	<input type="checkbox"/>	Phone: _____

References

Please list three professional references.

Full Name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Email:	_____	Number of	_____
		Years Known:	_____

Full Name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Email:	_____	Number of	_____
		Years Known:	_____

Full Name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Email:	_____	Number of	_____
		Years Known:	_____

Disclaimer and Signature

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