APPLICATION FOR EMPLOYMENT

TOWN OF PINK HILL NORTH CAROLINA

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303 S. Central Ave. P O Box 530 Pink Hill, NC 28572 (252) 568-3181 (252) 568-2435 fax

APPLICANT INFORMATION																	
Last Nam												4.I.		Date			
Street Ad	dress	ress										A	Apartn	nent/U	Init #		
City								State					ZIP				
Phone									Address								
Date Ava	ilable		Social Sec					ty No.		Dat			of Birt	h			
Position Applied for																	
Have you	ever	worke	ed fo	r this company? YES			NC)	If so, when?								
Have you ever been convicted of a felony? YES						NC)	If yes, e	kplain								
Driver's License Number																	
EDUCATION																	
High Scho	ool						Ad	dress									
From			То		Did you graduate?		YE	S 🗌	NO 🗌	Deg	iree						
College	je					Ad	dress	I I									
From	om		To Did you g		graduate?	YE	s 🗌	NO 🗌	Degree								
Other								dress									
From		-	To Did you gra		graduate?	YES		NO 🗌	D Degree								
Provide p	roof c	of Higl	h Sch	nool Diplo	ma or GEC)											
Provide proof of High School Diploma or GED REFERENCES																	
	Please list three professional references.																
Full Name	e								R	elation	iship						
Company								Р	hone								
Address																	
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