

**GREENE LAMP**  
**309 Summit Avenue**  
**Kinston, NC 28501**  
**(252) 523-7770**

**APPLICATION FOR EMPLOYMENT**

Position Applied For \_\_\_\_\_

Do You Have Reliable Transportation to Work?  Yes  No

Salary Needed \_\_\_\_\_

Date Available For Work \_\_\_\_\_

(Please Print)

NAME: \_\_\_\_\_  
 Last First Middle

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 No. Street City State Zip

TELEPHONE: (\_\_\_\_\_) \_\_\_\_\_  
 Are you 18 years of age or older?  Yes  No

Education - Give your complete educational history

Circle highest grade completed 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17

<b>Name &amp; Location of High School</b> _____	Did You Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
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If you did not graduate from high school, have you passed the High School Equivalency Test?  Yes  No

If yes, give name of school: \_\_\_\_\_

<b>Education Beyond/High School</b>	<b>Name &amp; Location</b>	<b>Attended</b>	<b>From</b>	<b>Mo/Yr</b>	<b>No. of Years Completed</b>	<b>Credit Hours</b>	<b>Did You Graduate?</b>	<b>Degree/Diploma Received</b>	<b>Major Subject</b>
College or University			To	Mo/Yr					
Graduate or Professional									
Other education, internship, etc.									

**EMPLOYMENT RECORD** - List ten (10) years of work history. Begin with your present or last position. If more space is needed, use a continuation sheet.

**A. Title of present or last position** \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_

Ending Salary \$ \_\_\_\_\_

Name & Title of Supervisor \_\_\_\_\_  
 No. of employees supervised by you \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone No. \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Date Employed _____	Date Separated _____
Number of hours worked per week: _____	

**B. Previous position** \_\_\_\_\_

Starting Salary \$ \_\_\_\_\_

Ending Salary \$ \_\_\_\_\_

Name & Title of Supervisor \_\_\_\_\_  
 No. of employees supervised by you \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone No. \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Date Employed _____	Date Separated _____
Number of hours worked per week: _____	

**C. Previous position** \_\_\_\_\_

Starting Salary \$ \_\_\_\_\_

Ending Salary \$ \_\_\_\_\_

Name & Title of Supervisor \_\_\_\_\_

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

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

No. of employees supervised by you \_\_\_\_\_

Number of hours

Employer \_\_\_\_\_

worked per week: \_\_\_\_\_

Address \_\_\_\_\_

Phone No. \_\_\_\_\_

Duties \_\_\_\_\_

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

Please list any additional information that relates to your ability to perform the job for which you have applied: such as licenses, professional memberships, hobbies, etc.

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	ADDRESS	TEL. NO.	YEARS KNOWN

**APPLICANT'S STATEMENT**

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the chief operating officer of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit proof of employment eligibility.

I understand this application will be active for a period of one year; after that time, if I wish to be considered for employment, I must submit a new application, or call to have my application pulled.

I understand that the employer will thoroughly investigate my education and personnel history; conduct a certified name check; and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested by me, and I release them from all liability for damage in providing this information.

I certify that all statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Your Signature: \_\_\_\_\_

**\*\*\*Please submit copies of credentials (certificates, degrees, etc.) along with application**

List the name and address of references who are in a position and willing to certify to your character, ability, experience, and qualifications.

A. Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

B. Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

C. Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

#### INTERESTS AND ACTIVITIES

1. List professional recognitions, current professional memberships, committee work, publications, civic activities, etc.

\_\_\_\_\_

2. Please give a brief statement as to why you have chosen Business Administration as a profession. (Attach a separate sheet if necessary.)

\_\_\_\_\_

3. Copies of college degree(s) will be required for the Executive Director position prior to employment.

4. Pre-employment Background Check

I understand and agree that my employment may be conditional upon passing a physical examination including a controlled substance or drug screening prior to employment, a SS # / driver's record/ criminal background check, and that an appointment is subject to a three month probationary period.

5. Criminal Convictions

A criminal background check will be conducted on all applicants who are finalists for employment or re-employment. The refusal to consent to a criminal background check will result in the applicant not being offered employment, or if a conditional offer has been made, the offer will be withdrawn or the employee's employment will be terminated, as applicable. Greene Lamp will require an applicant to agree to credit checks for positions which are subject to bonding and have access to cash, checks, or bank account information. When applying for such positions, the refusal to consent to a credit check will result in the applicant not being offered employment, or if a conditional offer has been made, the offer will be withdrawn or the employee's employment will be terminated, as applicable.

I certify that to the best of my knowledge and belief, the statements and information given during the hiring process truly represent a complete and accurate report of my background and employment history. I understand that misrepresentation or falsification of information may be grounds for rejection of my application and (or) dismissal if I am employed. I agree to permit the investigation of all statements made by me hereon unless otherwise indicated.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Greene Lamp is an Equal Opportunity Employer**