



1105 Kelly Drive  
Sanford, N.C. 27330  
(919) 775-5401

An equal opportunity employer  
Committed to Diversity

# Application for Employment

Please answer all questions and complete all sections of this application; "see resume" is not acceptable. A resume may be attached, but will not be accepted in lieu of completing an application.

If you are applying for an instructional (faculty) position, copies of unofficial transcripts must be attached to completed application; otherwise, your application will be deemed **incomplete and will not be considered.**

**Provide only the last 4 digits of your Social Security Number.**

**Please be sure to check for accuracy, sign and date your application.**

## Applicant Information

Position applied for \_\_\_\_\_ Date of application \_\_\_\_\_  
(must complete separate application for each position)

Name \_\_\_\_\_  
Last First Middle

Present address \_\_\_\_\_  
Number Street City State Zip

Telephone: Day ( ) \_\_\_\_\_ Evening ( ) \_\_\_\_\_ Last 4 digits of Social Security No. \_\_\_\_\_

Email address \_\_\_\_\_

If you are related to any past or present CCCC employee, provide name and relationship \_\_\_\_\_

If you are a current or former CCCC employee, list dates, area you worked and supervisor \_\_\_\_\_

Are you at least 18 years of age?  YES  NO      Are you legally eligible for employment in the U.S.?  YES  NO

Military service?  YES  NO      Number of years \_\_\_\_\_

Employment desired (check all that apply)  Full-time  Part-time Hours available  Daytime  Evening

If part-time only, how many hours per week are you available? \_\_\_\_\_

Have you ever been convicted of an offense against the law other than a minor traffic violation?  YES  NO

**(IF YES, EXPLAIN FULLY ON AN ADDITIONAL SHEET.)** (A conviction does not mean you cannot be hired. The offense and how recently you were convicted will be evaluated in relation to the position for which you are applying.)

Have you ever been discharged or asked to resign from a position?  YES  NO

## Educational Record

Type of School, Name & Location	Circle Number of Years Completed	Did You Graduate?	Major, Type of Degree and # of Credit Hours <i>(indicate quarter or semester hours)</i>
High School	9   10   11   12   GED		
Trade School/Technical Inst./ Community College	1   2		
College or University	1   2   3   4		
Graduate or Professional	1   2   3   4		
Other Educational Experiences			

List fields of work for which you are licensed, registered or certified, giving date(s) and source of issuance \_\_\_\_\_

List courses taken dealing with Community or Junior Colleges \_\_\_\_\_

List subjects you feel qualified to teach \_\_\_\_\_

List other activities which you are qualified to direct \_\_\_\_\_

List hobbies, professional recognitions, current professional memberships, committee work, publications, civic activities, etc. \_\_\_\_\_

## Applicant Computer/Software Skills

Circle level of competency in the following areas: none = 0; low = 1; average = 2; high = 3

Word 0 1 2 3 Excel 0 1 2 3 PowerPoint 0 1 2 3 Access 0 1 2 3 Typing \_\_\_\_\_ WPM Other relevant job skills \_\_\_\_\_

## Work Experience

Please list your experience, beginning with the last position held.  
If you were self-employed, give company name. Attach additional sheets if necessary.

# 1			
Name of Employer	Name of Last Supervisor	Employment Dates Start: End:	Pay or Salary
Address	City, State, Zip	Phone Number	Fulltime ____ Parttime ____
Reason for leaving (be specific)			
May we inquire of this employer about your character and qualifications? __Yes __No			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

# 2			
Name of Employer	Name of Last Supervisor	Employment Dates Start: End:	Pay or Salary
Address	City, State, Zip	Phone Number	Fulltime ____ Parttime ____
Reason for leaving (be specific)			
May we inquire of this employer about your character and qualifications? __Yes __No			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

<b># 3</b>			
Name of Employer	Name of Last Supervisor	Employment Dates Start: End:	Pay or Salary
Address	City, State, Zip	Phone Number	Fulltime ____ Parttime ____
Reason for leaving (be specific)			
May we inquire of this employer about your character and qualifications? __Yes __No			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

<b># 4</b>			
Name of Employer	Name of Last Supervisor	Employment Dates Start: End:	Pay or Salary
Address	City, State, Zip	Phone Number	Fulltime ____ Parttime ____
Reason for leaving (be specific)			
May we inquire of this employer about your character and qualifications? __Yes __No			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

## References

*List references, other than relatives, who are in position and willing to certify to your character, ability and experience for the position.*

**# 1**

Name & Title \_\_\_\_\_ Company \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Email \_\_\_\_\_

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**# 2**

Name & Title \_\_\_\_\_ Company \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Email \_\_\_\_\_

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**# 3**

Name & Title \_\_\_\_\_ Company \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Email \_\_\_\_\_

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**# 4**

Name & Title \_\_\_\_\_ Company \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Email \_\_\_\_\_

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## Professional Statement

Please indicate why you chose education as a profession and your views on vocational and technical education, professional organizations and academic standards. *(This is not required of clerical or maintenance applicants.)*

## Applicant Certification

I hereby authorize and request the firms, organizations and institutions listed on my application for employment with Central Carolina Community College (CCCC) to release all employment information as requested by CCCC. I have attached a separate sheet of relevant additional information such as name change or nickname that may assist in a check on my employment and educational background. I hereby release the firms, organizations and institutions listed on my application from any and all liabilities arising from the furnishing of requested employment information. I further certify that all answers and statements in this application are true. I am aware that should investigation disclose misrepresentation or falsification, I may be disqualified for employment at CCCC.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Applicant Signature (unsigned applications will not be processed)

## Internal Applicants Only

I understand that in applying for this position, any prior work experience before and during my employment at CCCC may be reviewed from my personnel file by the hiring manager, and I consent to this.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

## Additional Work Experience

**# 5**

Name of Employer	Name of Last Supervisor	Employment Dates Start: End:	Pay or Salary
Address	City, State, Zip	Phone Number	Fulltime ____ Parttime ____
Reason for leaving (be specific)			
May we inquire of this employer about your character and qualifications? __Yes __No			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

**# 6**

Name of Employer	Name of Last Supervisor	Employment Dates Start: End:	Pay or Salary
Address	City, State, Zip	Phone Number	Fulltime ____ Parttime ____
Reason for leaving (be specific)			
May we inquire of this employer about your character and qualifications? __Yes __No			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

**# 7**

Name of Employer	Name of Last Supervisor	Employment Dates Start: End:	Pay or Salary
Address	City, State, Zip	Phone Number	Fulltime ____ Parttime ____
Reason for leaving (be specific)			
May we inquire of this employer about your character and qualifications? __Yes __No			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

## Policy Statement/Equal Opportunity Employer

Central Carolina Community College serves the public without regard to race, sex, color, creed, age, disability, religion or national origin. State and Federal regulations prohibit discrimination based on race, sex, color, national origin, age or handicap. The information requested below will in no way affect you as an applicant. Its sole use will be for statistical and record-keeping purposes only and to see how well our recruitment efforts are reaching all segments of the population. The information on this form will be detached from your employment application and maintained separately and confidentially. Failure to provide information on this form will **NOT** subject you to any adverse treatment.

<b>Date of Birth</b>						<b>Sex</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Month		Day		Year		Male	Female

### Ethnic Group

- White
- Black (African-American)
- Hispanic (Mexican, Puerto Rican, Cuban, Central or South American, other Spanish origin regardless of race)
- American Indian/Alaskan Native
- Asian or Pacific Islander
- Other \_\_\_\_\_

### Disability

Yes (Describe below)

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No/Prefer not to report

How did you learn of this job opening? \_\_\_\_\_

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