



*Council on Aging*  
*of Cleveland County*  
 100 T.R. Harris Drive - Shelby, North Carolina 28150 - (704) 482-3488



## Employment Application

### Applicant Information

**Full Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
 Last First M.I.

**Address:** \_\_\_\_\_  
 Street Address Apartment/Unit #  
 \_\_\_\_\_  
 City State ZIP Code

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Date Available:** \_\_\_\_\_ **Desired Salary:\$** \_\_\_\_\_

**Position Applied for:** \_\_\_\_\_

Have you ever worked for COA/Neal Senior Center? YES NO  
  If yes, when? \_\_\_\_\_

\*Were you referred to us? If yes, referred by: \_\_\_\_\_

### Education

**High School:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**College:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Other:** \_\_\_\_\_ **Address:** \_\_\_\_\_

### Additional Information

Subjects of Special Study or Research Work: \_\_\_\_\_

Special Skills: \_\_\_\_\_

Activities (Civic, Athletic, Etc): \_\_\_\_\_

### References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

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

### Previous Employment

**Company:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
**Job Title:** \_\_\_\_\_  
**Responsibilities:** \_\_\_\_\_  
**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Reason for Leaving:** \_\_\_\_\_  
YES NO  
**May we contact your previous supervisor for a reference?**

**Company:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
**Job Title:** \_\_\_\_\_  
**Responsibilities:** \_\_\_\_\_  
**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Reason for Leaving:** \_\_\_\_\_  
YES NO  
**May we contact your previous supervisor for a reference?**

**Company:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
**Job Title:** \_\_\_\_\_  
**Responsibilities:** \_\_\_\_\_  
**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Reason for Leaving:** \_\_\_\_\_  
YES NO  
**May we contact your previous supervisor for a reference?**

### Military Service

**Branch:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_  
**Rank at Discharge:** \_\_\_\_\_ **Type of Discharge:** \_\_\_\_\_  
**If other than honorable, explain:** \_\_\_\_\_

### Emergency Contact Information

**In Case of Emergency,  
Please Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Emergency Contact  
Address:** \_\_\_\_\_

### Resume Disclaimer and Signature

*I certify that I have attached a copy of my current resume in order to complete my application.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### 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:** \_\_\_\_\_