

**VIRGINIA'S REGION 2000 LOCAL GOVERNMENT COUNCIL**

**EMPLOYMENT APPLICATION**

An Equal Opportunity Employer

-Please print in ink or type-

915 Main Street, Suite 202

Lynchburg, VA 24505

(434)845-3491 FAX: (434)845-3493

[www.regcomm.org](http://www.regcomm.org)

mail@regcomm.org

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

Position applying for: \_\_\_\_\_

**PERSONAL INFORMATION:**

NAME: \_\_\_\_\_ SSN# \_\_\_\_\_  
                    First                    Middle                    Last

Present address: \_\_\_\_\_  
                                    Street                                    City                                    State                                    Zip Code

Phone number (Day): \_\_\_\_\_ (Evening): \_\_\_\_\_

Do you have a valid driver's license?    Yes    No    CDL?    Yes    No    Endorsements (if any): \_\_\_\_\_

Expiration date: \_\_\_\_\_ Issuing state: \_\_\_\_\_

Have you ever been convicted of    a: Felony    Yes    No    b: Misdemeanor    Yes    No

c: Any traffic infraction (moving violation)    Yes    No    If yes, please explain and gives dates: \_\_\_\_\_

*(A conviction does not automatically eliminate you from employment consideration. The nature of the offense, when it occurred, and the requirements of the position will be taken into consideration.)*

Have you ever been fired or asked to resign from a job?    Yes    No

If yes, give date(s), name and address of employer, and reason (attach additional sheets if necessary): \_\_\_\_\_

*(A firing or forced resignation does not automatically eliminate you from employment consideration. The circumstances, time elapsed, and employment record may be considered.)*

Failure to be completely truthful and accurate may cause you to be disqualified from employment consideration.

**EDUCATION**

Do you have a High School Diploma?    Yes    No    A GED?    Yes    No

School: \_\_\_\_\_

**ADVANCED EDUCATION**

Name and Address	Number of Years completed	Degree Completed (BA, BS, MA, etc., or certificate)	Field(s) of Study
College			
Graduate Work			
Other (i.e. business, secretarial, vocational, technical, military, etc.)			

Please list your professional memberships, certifications, designations, licenses, honors, awards, fellowships, etc.:

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**WORK HISTORY:** Give a complete record of your employment history including part-time work, military service, and volunteer experience. List (you may limit your experience to the past 10 years) all experience in order, starting with your present or most recent position and working back. Describe your duties and responsibilities in each position so that your experience may be thoroughly and fairly evaluated. Account for all periods of unemployment. Please feel free to attach supplemental information.

Name of Employer:	Job Title:	Dates Worked: _____ to _____						
Mailing address (including zip code)	Name and title of your immediate supervisor:	<table border="0"> <tr> <td>Full-time</td> <td>Part-time</td> </tr> <tr> <td>Starting</td> <td>Final</td> </tr> <tr> <td>Salary: _____</td> <td>Salary: _____</td> </tr> </table>	Full-time	Part-time	Starting	Final	Salary: _____	Salary: _____
Full-time	Part-time							
Starting	Final							
Salary: _____	Salary: _____							
Number of people you supervised: _____ Reason for leaving: _____ Description of duties: _____ _____ _____ _____								
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 Description of duties: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

List the equipment, computers, software, etc. you have used in previous jobs: \_\_\_\_\_

Typing Speed \_\_\_\_\_ WPM \_\_\_\_\_  
 May we contact your former employers?      Yes      No      Present employer?      Yes      No

**REFERENCES**

List names and addresses of three persons not related to you who know your qualifications and suitability for desired position.

NAME	ADDRESS & PHONE#	OCCUPATION

The statements made by me in this application are true and complete to the best of my knowledge. I understand that any willful misstatements or material omissions in this application will be sufficient cause to disqualify me from employment consideration with the Virginia's Region 2000 Local Government Council. If such misstatements or omissions are found after employment, it may be considered grounds for dismissal. I understand that this completed application and any materials submitted with it are the property of the Virginia's Region 2000 Local Government Council and will not be returned. In the case of a panel interview, which may consist of non-Virginia's Region 2000 Local Government Council employees, I authorize my application to be viewed by members of the panel. I also understand that any offer of employment is contingent upon my ability to produce documentation as required by the Immigration and Naturalization Service documenting eligibility for employment.

I authorize the release of any and all job-related information that the Virginia's Region 2000 Local Government Council may request or any records pertaining to past or present employment which may now exist or may exist in the future.

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

