



Application Instructions

Please use the same name and initials which appears on your **social security card**.

To become an official applicant for a position at Lenoir Community College, the candidate must submit the following:

1. Lenoir Community College's **Application for Employment**
Resumes are welcome but not in place of an official application.
On the application, Section E asks for three (3) professional references. These cannot be friends or relatives. List a phone number where each can be reached during daytime working hours.
2. **Transcripts**
 - a. An official/unofficial copy of your high school transcript
 - b. An official/unofficial copy of a business or commercial school transcript
 - c. An official/unofficial copy of transcript from each college or university attended
 - d. Official transcripts will be required upon offer of employment.
3. At least two **letters of recommendation** from persons qualified to evaluate the applicant's potential for the position. These must be current and signed.
4. Submit any additional **documents** to support your candidacy.

RETURN APPLICATION INFORMATION TO:

Lisa Barrow
Human Resources Coordinator
Lenoir Community College
PO Box 188
Kinston, NC 28502-0188
e-mail: lbarrow@lenoircc.edu
Phone: (252) 233-6822
Fax: (252) 233-6879
Website: <http://www.lenoircc.edu/>



Lenoir
Community College

EMPLOYMENT APPLICATION

The College is committed to equality of educational opportunity and does not discriminate against applicants, students, or employees based on race, color, national origin, religion, sex age, or disability.

P.O. Box 188, Kinston NC 28502-0188
www.lenoircc.edu

Lenoir Community College

Employment Application

Please Print in Black Ink

Part I. Personal Data. The information requested on this part of the application form will be used for reporting purposes only. It will not be made available to screening committees nor will it be considered in the selection of a candidate.

1. Name: _____
(Last) (First) (Middle)

2. Physical Address: _____

3. Telephone: Residence: _____ Cell: _____ Business: _____

4. Race/Ethnic Identification:

- White-Non-Hispanic Black or Non-Hispanic Hispanic (Mexican, Puerto Rican, Cuban, Central or South American, other Spanish origin regardless of race)
- Asian or Pacific Islands American Indian or Alaskan Native

5. Sex: Female Male

6. Date of Birth: _____
(Month) (Day) (Year)

7. Statement of Registration Status:

- I am a veteran of the Armed Forces of the United States.
- I certify that I am registered with Selective Service.
- I certify that I am not required to be registered with Selective Service, because:
- I am female.
- I am in the armed services on active duty. (*Note: Does not apply to members of the Reserves and National Guard who are not on active duty.*)
- I have not reached my 18th birthday.
- I was born before 1960.
- I am a citizen of the Federated States of Micronesia, or the Marshall Islands or a permanent resident of the Trust Territory of the Pacific Islands (Palau).

Signature of Applicant _____

Date _____

Lenoir Community College is an Equal Opportunity Employer

Position Desired: _____

Part II. Professional Data

Name: _____
(Last) (First) (Middle)

Mailing Address: _____

Telephone: Residence: _____ Cell: _____ Business: _____

Educational Record

Section A. Indicate your formal educational preparation in elementary, secondary, and post secondary institutions awarding diplomas and/or degrees.

Type of School Name and Location	Dates of Attendance	Years Completed	Credit Hours	Did You Graduate?	Degree or Diploma	Major Subject and Credit Hours	Minor Subject and Credit hours
Elementary or *High School							
Undergraduate							
Graduate							

* Or have you passed High School Equivalency Test? Yes No

** Indicate quarter hours "Q", semester hours "S", or trimester hours "T".

Do you now work for the State of N.C.? Yes No

Are you related by blood or marriage to any person now working for the State? Yes No

(If yes, give name, relationship to you and the agency where employed.) _____

Section B. List preparation at specialized institutions that normally award licenses, certificates, or forms of recognition other than high school diplomas and college degrees. Examples include military training schools, trade schools, apprenticeship programs, industrial institutes and nursing programs.

Name and location of Schools(s)	Dates of Attendance	Number of Months in Training	Did You Graduate?	Name or Type Of License, Certificates, etc.	Type of Training Received

Section C. List license, certificate, or other forms of official recognition of a vocational, technical, or professional skill that was achieved through a qualifying examination.

License, Certificate, or Other Recognition	How Did You Qualify?	Name and Address of Awarding Agency, Board, etc.

Section D. Employment Record. Beginning with your most recent work experience, list all positions you have held.

Job Title of Position Held	Name and Address of Employing Institution or Agency	Date of Employment Mo. Yr.	Date Separated Mo. Yr.	Average No. of Hours Worked Per Week	Last Salary	Reason for Leaving

Section E. Additional Information-If your answer to “1” or “2” is “yes”, attach a separate sheet and explain.

1. Have you ever been convicted of a violation of any law (other than a minor traffic violation)? Yes No
2. Have you ever been discharged or asked to resign from a position? Yes No

Section F. List names, addresses, and telephone numbers of three (3) professional references.

Name: _____ Address: _____ Telephone: _____

Name: _____ Address: _____ Telephone: _____

Name: _____ Address: _____ Telephone: _____

Section G. Certification of Application. I hereby certify that all answers and statements in this application are true. I am aware that should investigation disclose misrepresentation or falsification, I may be dismissed.

Signature of Applicant _____ Date _____

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