

CITY OF NEW BERN FIRE-RESCUE DEPARTMENT VOLUNTEER APPLICATION INFORMATION



REQUIREMENTS

1. Must be 18 years of age at time of application
2. Must live within a 30 minute drive time to Headquarters Station (1401 Neuse Boulevard, New Bern, NC)
3. Must be available for 12-24 hour shift work
4. Must possess a valid drivers license
5. Must successfully pass a medical/drug screening
6. Must complete employment application
7. Must obtain a criminal background record check (see below)
8. Must obtain a driving record abstract (see below)

<u>Criminal Background Record</u>	<u>Driving Record Abstract</u>
Craven County Courthouse Clerk of Courts Office 302 Broad Street New Bern, NC 28560 (Corner of Craven & Broad Streets) (252) 639-3000 Cost: \$25.00 (cash)	Department of Motor Vehicles Go to: www.ncdot.gov Then look under: DMV <div style="text-align: right;">Driving Record</div> Cost: \$11.00 - Certified Driving Record (Allow 2 weeks for processing)

City of New Bern

Human Resources Department
Phone: (252) 639-7571



FOUNDED 1710

APPLICATION INFORMATION AND INSTRUCTIONS (Read Carefully Before Starting)

General Information:

The City of New Bern was founded in 1710 by German and Swiss Colonists and is the second oldest city in the State of North Carolina. The City is situated at the confluence of the Neuse and Trent Rivers, thirty-eight miles from the Atlantic Ocean. New Bern boasts many old churches, houses and buildings which have been restored including Tryon Palace which was once the Governor's residence for the Royal Colony of North Carolina as well as the state's first capital (1770-1794).

Today, with a population of approximately 29,000 people, New Bern is mixing the historic past with the professionals of the 21st century, creating a delightfully pleasant community in which to work, live and play.

The City is firmly committed to the principles of Equal Opportunity for all. The City selects and makes all personnel decisions based upon merit and individual qualifications without regard for sex, race, color, religion, national origin, age or disability. If at any point in the selection process you believe that discrimination has occurred, we ask that you contact the City's Director of Human Resources. Upon receipt of notification from any applicant (either internal or external) of alleged discrimination, the Director of Human Resources will conduct a formal investigation into the complaint. Applicants also have the right to contact the EEOC within 180 days after they feel discrimination has occurred.

Six Steps To A Career:

- (1) Check our Employment Opportunity Listing located in the Human Resources office. Listings are also posted with community organizations, newspapers, the North Carolina Employment Security Commission (ESC), and our website.
- (2) Once you locate a position which fits your education, experience and personal interest, contact the Employment Security Commission. You must complete an Employment Application and return it to the ESC before the indicated deadline.
- (2) All applications received are evaluated based on skills, knowledge and abilities required for the job.
- (4) After evaluations are completed, the most qualified applicants are notified for a personal interview.
- (5) After all interviews are completed, a recommendation for hire is processed by the Human Resources Department.
- (6) All applicants not chosen for the particular position will be notified by letter.

Instructions:

The City of New Bern receives hundreds of applications each year for vacant positions. Due to the large volume of applications received, it is imperative that you fill the application out completely, attaching any additional information you feel may be useful. Resumes are not accepted in place of applications, unless otherwise specified. Incomplete applications will not be considered. Please print clearly or type all information. **Please complete all five pages of the application.**

We at the City of New Bern thank you for your interest in employment and wish you success during the application process.

APPLICATION INFORMATION FORM

THE CITY OF NEW BERN IS AN EQUAL OPPORTUNITY EMPLOYER. WE ARE REQUIRED BY THE FEDERAL GOVERNMENT TO COLLECT PERSONAL INFORMATION ON ALL APPLICANTS IN ORDER TO RECORD OUR ATTEMPTS TO SEEK ALL QUALIFIED APPLICANTS WITHOUT REGARD TO RACE, COLOR, SEX, RELIGION, NATIONAL ORIGIN, AGE OR DISABILITY. THIS APPLICATION INFORMATION WILL BE SEPARATED FROM YOUR EMPLOYMENT APPLICATION AND WILL NOT, IN ANY WAY, BE USED IN OUR SELECTION PROCESS OR FOR ANY PERSONNEL ACTION FOLLOWING EMPLOYMENT.

NAME: _____ Date: _____
Last First Middle

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____ SEX: MALE FEMALE
LAST FOUR DIGITS

ETHNIC CATEGORY:

White (not Hispanic) Origins in Europe, North Africa, the Middle East, or the Indian Subcontinent.

Black (not Hispanic) Origins in any of the black racial groups.

Hispanic Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

Asian or Pacific Islanders Origins in the Far East, Southeast Asia, or the Pacific Islands.

American Indian or Alaskan Native Origins in the original peoples of North America.

VETERAN STATUS:

Are you a Vietnam era veteran?
 (Vietnam era begins August 4, 1964)

YES NO

Are you a military veteran?
 (Other than Vietnam)

YES NO

POSITION APPLIED FOR _____

The City of New Bern complies with the Immigration Reform and Control Act of 1986. All employees must provide documentation to verify identity and employment eligibility within the first three days of employment.

THIS APPLICATION IS IN RESPONSE TO:
 Please check box and name particular source.

<input type="checkbox"/> Newspaper _____	<input type="checkbox"/> Radio _____
<input type="checkbox"/> Professional magazine or newsletter _____	<input type="checkbox"/> www.newbern-nc.org _____
<input type="checkbox"/> Employment Security Commission _____	<input type="checkbox"/> T.V. _____
<input type="checkbox"/> Employment Opportunity Listing _____	<input type="checkbox"/> Personal referral _____
	<input type="checkbox"/> Other _____

DO NOT WRITE BELOW THIS LINE

THIS SECTION FOR USE BY HUMAN RESOURCES DEPARTMENT

EMPLOYMENT APPLICATION SENT TO:

Dept./Person	Position	Date Sent	Action Taken	Date
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____
(4) _____	_____	_____	_____	_____

APPLICATION FOR EMPLOYMENT



City of New Bern
HUMAN RESOURCES DEPARTMENT
P. O. BOX 1129 248 CRAVEN ST.
New Bern, NC 28563
(252) 639-7571

An Equal Opportunity Employer

INSTRUCTIONS: It is important that you fill out all sections completely and to the best of your ability. Your application will be used as part of the hiring process and, therefore, should represent your best effort.

Current Information

Position Applying For Volunteer Fire Specialist Date _____

When will you be available for employment? _____ Are you seeking:
Full-time Part-time Temporary Seasonal

NAME _____
Last First Middle

PRESENT ADDRESS _____
No., Street and P.O. Box City State Zip

PREVIOUS ADDRESS _____
(If at present address less than 2 years) No., Street and P.O. Box City State Zip

TELEPHONE _____
Home Business If neither, where can you be reached? _____

ARE YOU 16 OR OLDER YES NO Last 4 Digits of Social Security Number _____

General Information (Attach additional sheet if needed)

- a. Have you ever been employed with the City of New Bern? YES NO
If yes, what dept. & when? _____
- b. Have you filed an application with the City of New Bern in the last 6 months? YES NO
- c. Will you accept employment requiring night or weekend work? YES NO
Comments _____
- d. Are you related by blood or marriage to any City Employee? YES NO
If yes, give name, relationship and department. _____
- e. Do you have a valid driver's license? If so, please complete the following: YES NO
Number _____ State _____
Is this a Commercial Driver's License? If so, please check type. _____ A _____ B YES NO
- f. Have you ever been convicted of any law violation, other than a minor traffic violation? YES NO
If yes, please explain. _____

NOTE: A conviction record will not necessarily exclude you from employment. Factors such as rehabilitation efforts, how recent the offense was, and nature of the crime will be taken into consideration.

Education

Give your complete educational history below.

Have you received a high school diploma or equivalent? YES NO If an equivalent, from what institution? _____

High School _____
 Name City State Circle highest school year completed
 1 2 3 4 5 6 7 8 9 10 11 12

Education Beyond High School	Name and Location	Circle Number Years Completed	Credit Hours	Degree or Diploma	Year Received	Major Subject
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College or University		1 2 3 4				
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Graduate or Professional Other		1 2 3 4				
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Skills, Certifications

Please list any skills, abilities, special certifications, licenses, special training, or courses you have had that you feel are applicable to the position for which you are applying. Include skills with equipment or machines you operate. If you wish consideration for a clerical position, indicate typing speed.

(a) _____	(f) _____
(b) _____	(g) _____
(c) _____	(h) _____
(d) _____	(i) _____
(e) _____	(j) _____

Employment

Record your complete work history in the spaces below. Begin with your current or most recent employer first. Attach as many sheets as necessary to account for your full record. Be sure to account for gaps in your employment history. Related volunteer experience should also be listed.

A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title _____ Starting Salary _____ Last Salary _____

Name and title of supervisor _____ No. employees supervised by you _____

Employer or company _____ Telephone _____

Date Employed _____ Address _____

Date Separated _____ Duties _____

Full-time for: Years Months _____

Part-time for: Years Months _____

Reason for leaving _____

If part-time, number of hrs. worked per week _____

If you are currently employed, may we inquire of this employer about your qualifications and character? YES NO

Employment (continued)

E. NEXT EMPLOYMENT (or explain gap in employment)

Job Title _____	Starting Salary _____	Last Salary _____
Name and title of supervisor _____	No. employees supervised by you _____	
Employer or company _____	Telephone _____	
Date Employed _____	Address _____	
Date Separated _____	Duties _____	
Full-time for: _____	Years _____	Months _____
Part-time for: _____	Years _____	Months _____
Reason for leaving _____		
If part-time, number of hrs. worked per week _____		

(Attach additional sheets if this does not account for your full record)

Military Service (Applicable to Veterans Only)

Please list any relevant military training or services you may have obtained. Also list your service dates, present military status, etc., in the spaces provided:

(a) Date of entry: _____ (b) Date of separation: _____ (c) Service Branch: _____
 (d) Service Number: _____ (e) Special skills or training: _____

References

List three references who are not relatives or former employers.

	NAME	ADDRESS	PHONE NUMBER	OCCUPATION
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____

(This application must be signed.)

I certify that, to the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly misrepresented or falsified any of the information, I may be disqualified for employment consideration or dismissed from employment with the City.

I authorize my current and former employers to give any information regarding my employment, together with any information regarding me whether or not it is in my records. I hereby release them from any damage whatsoever for issuing same. I also permit the City of New Bern to conduct a Police, Court, and Driving Record investigation of my background.

I also authorize schools and other educational institutions which I may have attended to reveal my scholastic ratings to the City of New Bern representatives who are investigating my educational background.

I understand that this application is not an employment contract nor an agreement guaranteeing employment for any specific period of time, and further that any employee may voluntarily leave the City of New Bern and the City of New Bern may terminate the employment of any individual at any time.

Signature _____

Date _____