



**VOLUNTARY AFFIRMATIVE ACTION INFORMATION**

It is the responsibility of the Coastal Regional Commission to comply with government regulations including Affirmative Action obligations where they apply. To comply with requirements regarding government recordkeeping, reporting and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated. Completion of this form is **voluntary**. You may check the “I do not wish to Identify” box at the bottom of the page, sign and then begin the application process on the next page.

Qualified applicants are considered for employment without regard to race, color, religion, sex, national origin, age, marital status, veteran status, medical condition, disability, or any other protected class.

Please be advised that this survey is **NOT** a part of your official application for employment. It is considered confidential information that will not be used in any hiring decision. Upon receipt it is filed separately from the employment application.

Position applied for: \_\_\_\_\_ Date: \_\_\_\_\_  
Name: \_\_\_\_\_

**Referral Source:**  Newspaper Advertisement  Web Site  Walk-in  Job Fair  Employee  Relative  
 Government Employment Agency  Private Employment Agency  Other - Name of Source: \_\_\_\_\_

**Sex:**  Male  Female **Age:** (check only if)  Under 18 or  Over 40

**Race/Ethnic Group:** (check only one)

- Black:** All persons having origins in any of the Black racial groups of Africa.
- Hispanic/Latino:** All persons of Mexican, Puerto Rican, Cuban, Central or South America, or other Spanish culture regardless of race.
- Asian:** All persons having origins in any of the original peoples of the Far East, Southeast Asia, The Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, The Philippine Islands, and Samoa.
- Native American:** All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition. (Meets Bureau of Indian Affairs definition standards)
- Two or more races:** Not Hispanic or Latino
- White:** (or not covered above)

**Check One, if Applicable:**

- Veteran**
- Vietnam Era Veteran**
- Disabled Veteran**
- Individual with a disability** (An individual with a disability is a person who: has a physical or mental impairment that substantially limits one or more major life activities; has a record of such an impairment; or, is regarded as having such an impairment)

**I do not wish to self-identify**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Applicant Information

## Introduction:

Thank you for your interest in employment with the Coastal Regional Commission (CRC). The following information is provided to assist you in completing the application.

Although our application process may seem lengthy and time consuming, we feel it provides us with a fair and equitable means to evaluate an applicant's qualifications. Our goal is to find the best qualified applicant for the job.

## Tips for Completing Your Supplemental Application:

Review the qualifications listed in the job announcement. If you believe that you meet these qualifications, we invite you to complete the application.

The job announcement identifies job duties as well as the knowledge and abilities needed to perform them. It is important that you describe your experience in detail to identify the knowledge and abilities that make you a good candidate for the job. **A resume or cover letter will not substitute for any part of the application.** Resumes are not considered during the initial assessment of your qualifications.

The information you provide will be used to determine your level of qualifications for the current recruitment opening(s). When completing application papers, be as thorough and complete as possible. **DO NOT** overstate or claim experience that you do not have. The following information may be helpful:

- Read all the questions first. Consider the responsibilities of the position you're applying for and their relationship to your training and experience (paid or unpaid).
- Organize your responses in draft form, then prepare your final response.
- When responding to a question, emphasize your most pertinent experience first.
- Include your most complex or important accomplishments. Remember, if you do not include important experience and abilities, management cannot properly assess your qualifications.
- Give specific detailed accounts of your pertinent education, training, and experience. Once your application is submitted, no additional information will be accepted.
- Make sure your statements clearly describe your experience and accomplishments. Avoid describing your experience with general words such as: coordinate, responsible, facilitate, etc. Avoid non-specific statements about experience such as: "I have done this for 10 years."
- When describing education and training, identify specific course content, and special projects completed.
- Avoid using words, phrases, and acronyms that are common only to your profession or previous employer.
- Be as clear, concise, and legible as possible.
- If you do not have enough space to respond to an inquiry, additional sheets may be attached.

It's a good idea to keep a copy of the application and job announcement to prepare for any test or interview that may be required.

We are an equal opportunity employer and do not unlawfully discriminate in employment. No questions in the application are used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law.



## EMPLOYMENT HISTORY

In the spaces below, list the specific tasks and responsibilities included in your work history, beginning with your present or last employment. If you have a long history of employment, be sure to list those jobs which best relate to the position for which you are applying. Employment verification may be made regarding all of your past experience. Please mark the "No" box below if you do not want your present employer contacted. Use additional pages as necessary.

Starting Date:	Ending Date	Starting Salary:	Ending Salary:	Hours per Week:
Your Title:		May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Present or Last Employer - Name/Address & Phone:			Supervisor - Name & Title	
Reason for Leaving:				
Duties (be specific and use additional pages as necessary)				
Starting Date:	Ending Date	Starting Salary:	Ending Salary:	Hours per Week:
Your Title:		May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Present or Last Employer - Name/Address & Phone:			Supervisor - Name & Title	
Reason for Leaving:				
Duties (be specific and use additional pages as necessary)				
Starting Date:	Ending Date	Starting Salary:	Ending Salary:	Hours per Week:
Your Title:		May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Present or Last Employer - Name/Address & Phone:			Supervisor - Name & Title	
Reason for Leaving:				
Duties (be specific and use additional pages as necessary)				

Name:

Please explain any gaps in your work history.

List any experiences and/or skills that you feel would especially qualify you for this position.

Professional registrations or other occupational certificates (furnish number if applicable)

Job-related seminars or training (excluding formal education):

Membership in any technical/ professional associations:

**EMPLOYMENT REFERENCES**

**(Include individuals who are qualified to evaluate your capabilities. Do not include relatives.)**

Name	Address	City	State	Phone

**SIGNATURE OF APPLICANT**

I certify that all information given on this application is true, correct and complete to the best of my knowledge. I also certify that I have accounted for all of my work experience and training on this application, and that I have not knowingly withheld any fact or circumstance which would, if disclosed, affect my application unfavorably.

The CRC is hereby authorized to make a criminal background check, motor vehicle check, an investigation of my employment, educational or background history through any investigative agencies or bureaus of its choice. I release all relevant parties from all liability of any damages resulting from furnishing such information.

If employed by the CRC, I agree to abide by its rules and regulations. I understand that discovery of misrepresentation or omission of facts herein will make me ineligible for employment or be cause for immediate dismissal. I agree to furnish additional information as may be required to complete my employment file.

I have read and reviewed the job description of the job for which I am applying. I understand that I must be capable of performing the essential functions of the job effectively and safely.

If requested, I agree to submit to a drug and/or alcohol screen, performed by a qualified medical person of the CRC's choice. Such exam shall be paid for by the CRC. I also agree that all information concerning said drug and/or alcohol screen can be supplied to the CRC, or an authorized agent of the CRC, upon its request.

I further understand that this is an application for employment and that no employment contract, either express or implied, is being offered. I also understand that if employed, such employment is for an indefinite period and can be terminated at will by either party, with or without notice, at any time, for any or no reason, and is subject to change in wages, conditions, benefits and operating policies.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

**Reference Release Form**

**Applicant Name:** \_\_\_\_\_

**Former Employer:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_ **Dates Employed:** \_\_\_\_\_

The above named applicant is being considered for employment with the Coastal Regional Commission (CRC) and has listed your organization as a former employer. We would appreciate your verification and completion of this form at your earliest convenience. Information provided will be treated in confidence. Please return this form to us in the enclosed self-addressed, stamped envelope. Thank you for your assistance.

**Applicant's Authorization**

I consent to and authorize the above named former employer, and its agents and employees, to furnish any reference information concerning me, including achievement, wage history, performance, attendance, personal history, disciplinary information and reason for separation of employment, relating to my employment with the former employer. It is expressly understood that any information given is to be used for the purpose of determining my acceptability for employment. I also hereby release the above named former employer, and its agents and employees, from all liability for damages or claims, including, but not limited to defamation, interference with contract, or prospective economic advantage and negligence, I have or may have which arise or result from any reference information provided pursuant to this authorization or any attempts to comply with this information.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Record of Employment**

Position held: \_\_\_\_\_ Dates employed: \_\_\_\_\_

Summary of essential duties: \_\_\_\_\_

\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Salary at termination: \_\_\_\_\_ Eligible for Rehire?  Yes  No

Please rate the following:	Excellent	Good	Average	Fair	Poor
Job Knowledge	_____	_____	_____	_____	_____
Accuracy	_____	_____	_____	_____	_____
Productivity	_____	_____	_____	_____	_____
Dependability	_____	_____	_____	_____	_____
Attendance	_____	_____	_____	_____	_____
Overall Performance	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_

\_\_\_\_\_