# **Board of Commissioners**

John Davis, Mayor Frank Tursi, Mayor Pro Tem Patricia Turner, Commissioner Harry Pugliese, Commissioner Larry Philpott, Commissioner Laurent Meilleur, Commissioner



# **Town Manager**

Christopher D. Seaberg cseaberg@ci.swansboro.nc.us

Assistant Manager/Town Clerk
Paula W. Webb, MMC-NCCMC
pwebb@ci.swanboro.nc.us

# Town of Swansboro

Friendly City by the Sea • Established 1783 www.swansboro-nc.org

## **Planning Intern**

The Town of Swansboro is interested in hiring an intern to work through the summer of 2020 to assist in updating our Town Code of Ordinances and Unified Development Ordinance to coincide with the recently adopted Chapter 160D, a new chapter of the North Carolina General Statues. This change requires updates to all local government development regulations by January 1, 2021.

The position would run from May 18, 2020 through August 14, 2020 and would consist of a maximum of 20 hours per week at a rate of \$15.00/hour. Proficiency in Microsoft Office and Adobe is desired. A motivated self-starter with the ability to work independently and who possesses good technical writing skills, the ability to research statutory requirements, and good organizational skills are a must. Some knowledge of basic planning principles is desired, but not required.

The Town of Swansboro is located along the White Oak River in Onslow County just 12 miles from the beach at Emerald Isle. Our hours are from 8:00 am to 5:00 pm Monday through Thursday, and from 8:00 am to 1:00 pm on Friday.

Interested candidates must complete a Town Application by Friday, April 17, 2020. Applications can be emailed to Paula Webb/Assistant Manager-Town Clerk at <a href="mailto:pwebb@ci.swansboro.nc.us">pwebb@ci.swansboro.nc.us</a> or mailed to 601 W. Corbett Avenue Swansboro, NC 28584.

Please feel free to contact me with any questions.

Jennifer H. Ansell, CFM, CZO Planner Town of Swansboro 601 W. Corbett Avenue Swansboro, NC 28584 (910) 326-4428 (910) 326-3101 Fax

#### TOWN OF SWANSBORO



# **EMPLOYMENT APPLICATION**

An Equal Opportunity/Affirmative Action Employer 601 W. Corbett Ave. Swansboro, NC 28584 910 326-4428

www.swansboro-nc.org

Please complete all sections to the best of your ability; placing N/A in areas where needed. Once submitted, application material become property of the Town of Swansboro. Resumes may be attached but not substituted for an application. Faxed applications will not be accepted.

## CURRENT INFORMATION Position applied for: \_\_\_\_\_ Date: \_\_\_\_\_ Name: \_\_\_\_\_ (Last) (First) (Middle Initial) Present Address: (Street Number and Name/ PO Box) (City) (State) (Zip) Telephone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ Email Address: \_\_\_\_\_ Date Available for Work: GENERAL INFORMATION (circle YES or NO- attach additional sheets if necessary) Have you ever been employed by the Town of Swansboro? If yes, when and what department. YES NO Are you now, or have you ever been related to a current Town of Swansboro employee? If yes, give name YES NO and department. Are you able to perform all of the duties of the position in which you are applying? YES NO Are you an American citizen or do you currently have authorization to work in the United States? YES NO Have you ever been discharged or asked to resign by a former employer? YES NO Have you ever been disciplined for excessive absences or tardiness? YES NO Did you receive your education or employment experience under another name? If yes, please list prior names. YES NO Have you ever been convicted of an offense against the law other than a minor traffic violation? If yes, explain. YES NO A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, length of time since the offense, and nature of the crime will be taken into consideration. MILITARY HISTORY Attach DD 214 Have you ever served active duty in the United States military service? If yes, what branch? NO Dates of duty: From Are you currently in the reserves or have any other obligation? If yes, explain. YES NO

State
gree, Diploma, Certificate Major med of # of years Minor
n for which you are applying. Include lerical position, indicate typing speed
Expiration Date:
Expiration Date:
STATE

# **EMPLOYMENT**

Record your complete work history below. Attach additional sheets if necessary. Explain any gaps in employment history. Related volunteer information should also be listed. "See Resume" is not acceptable in the 'list major duties' space below.

# **CURRENT OR MOST RECENT EMPLOYER**

Employer Name and Address				
Position Title		Starting Salary	Current/Ending Salary	
Supervisors Name		Phone Number	# Supervised by you	
Date Employed	Date Separated	Full-Time	(yr(s)/mo) Part-time (yr(s)/mo)	
Reason for leaving				
List <b>Major</b> Duties in order of				
May we contact employer:	YES	NO		
NEXT MOST RECEN	Γ EMPLOYER			
Employer Name and Address				
Position Title		Starting Salary	Current/Ending Salary	
Supervisors Name			# Supervised by you	
Date Employed			(yr(s)/mo) Part-time (yr(s)/mo)	
Reason for leaving				
List <b>Major</b> Duties in order of				
Manage and the state of the sta	VEC	NO		
May we contact employer:	YES	NO		
NEXT MOST RECEN	Γ EMPLOYER			
Employer Name and Address				
Position Title		Starting Salary	Current/Ending Salary	
Supervisors Name		Phone Number	# Supervised by you	
Date Employed	Date Separated	Full-Time	(yr(s)/mo) Part-time (yr(s)/mo)	
Reason for leaving				
List Major Duties in order of	importance			
May we contact employer:	YES	NO		

# NEXT MOST RECENT EMPLOYER Employer Name and Address Position Title \_\_\_\_\_ Starting Salary Current/Ending Salary Supervisors Name \_\_\_\_\_\_ Phone Number \_\_\_\_\_ # Supervised by you \_\_\_\_\_ Date Employed \_\_\_\_\_ Date Separated \_\_\_\_\_ Full-Time (yr(s)/mo) \_\_\_\_\_ Part-time (yr(s)/mo) \_\_\_\_\_ Reason for leaving

List <b>Major</b> Duties in order of i	mportance			
May we contact employer:	YES	NO		
NEXT MOST RECENT EM				
Employer Name and Address				
Position Title			Starting Salary	Current/Ending Salary
Supervisors Name				# Supervised by you
Date Employed			Full-Time (yr(s)/mo)	
Reason for leaving				
May we contact employer:	YES	NO		
NEXT MOST RECENT EM	PLOYER			
Employer Name and Address _				
Position Title			Starting Salary	Current/Ending Salary
Supervisors Name			Phone Number	# Supervised by you
Date Employed	Date Separated	1	Full-Time (yr(s)/mo)	Part-time (yr(s)/mo)
Reason for leaving				
List <b>Major</b> Duties in order of i	mportance			
May we contact employer:	YES	NO		
NEXT MOST RECENT EM	PLOYER			
Employer Name and Address			~	
Position Title				Current/Ending Salary
Supervisors Name				# Supervised by you
	Date Separated	l	Full-Time (yr(s)/mo)	Part-time (yr(s)/mo)
Reason for leaving				
List <b>Major</b> Duties in order of i	mportance			
May we contact employer:	YES	NO		

# REFERENCES

Please list people such as co-workers, teachers, friends, etc., who have knowledge of your qualifications for the position of which you are applying. Do not list family relatives. Do not list names of supervisors noted on your employment record unless they can no longer be reached at the addresses listed.

Relationship to you
Address
Relationship to you
Address
Relationship to you

- To the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly or negligently misrepresented, falsified or omitted any information during the application process, or have made any changes to the format or working of the application form, I may be disqualified for employment consideration or dismissed from employment with the Town.
- ➤ I authorize my current and former employers to five any information regarding me or my employment, whether or not it is on their records, I hereby release them from any damage whatsoever for issuing same.
- ➤ I also authorize educational institutions which I attended to reveal my scholastic ratings, as well as degrees or certificates earned, to the Town of Swansboro; and associations, registration and licensing boards and to others to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision of State or Federal law, I expressly waive any right I have to review information the Town receives from an employer or educational institution under a promise of confidentiality.
- ➤ I also permit the Town of Swansboro to conduct a Police, Court, Credit and/or Motor Vehicle Records Investigation of my background.
- ➤ I understand that if I apply or have applied for certain jobs, I may be tested for drug and alcohol use to determine if I am currently abusing these substances, I consent to the testing and understand that the results could preclude my appointment.
- I understand and acknowledge that should I be employed by the Town of Swansboro, then I serve "at will". This means that I may be terminated at any time with or without cause. I further understand that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically approved by the Town Manager.

unless such change is specifically	approved by the Town Manager.
Signature:	Date:

# SUPPLEMENT TO TOWN OF SWANSBORO EMPLOYMENT APPLICATION

The Town of Swansboro is an Equal Opportunity Employer. Please complete this form in order for us to comply with the reporting requirements of the Equal Employment Opportunity Commission. This form will be separated from your employment application. Other than the information you provide in Section I, the information on this form will to be used in any way in our selection process or for any personnel action following employment. It will be maintained in personnel files which must be kept confidential under state law. Public disclosure of this information without your consent would be a violation of state general statutes.

I. Position applied for:

Na	ime:_	Last	First	Middle
Da	ite of A	Application:	FIISt	Middle
_				
II.	Sex:	(please circle)	Male	Female
III	. Ethn	ic Category: (pleas	se circle)	
Hi orig As Pac	White- Origins in any of the original peoples of Europe, North Africa, or the Middle East Black- Origins in any of the Black racial groups of Africa. (Not Hispanic) Hispanic- Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish Culture or origin regardless of race.  Asian or Pacific Islander-Origins in the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands.  American Indian or Alaskan Native-Origins in any of the original peoples of North America.			
НС	OW DI	D YOU LEARN OF	THIS OPENING: (C	HECK ALL THAT APPLY)
	Newspaper (specify): Employment Security Commission Job Line Came to Municipal Building Internet Other (specify)			
	SOCIAL SECURITY NUMBER (SSA)  If you are applying for any position, you must provide your SSN for drug testing.			
SS	#			

#### DRUG SCREENING

All FINAL applicants must pass a drug screening process. Further information will be provided at the appropriate time in the employment process.

#### OVERTIME COMPENSATION AGREEMENT

For employees subject to the overtime provisions of the Fair Labor Standards Act (FLSA), we generally allow the employee to accrue compensatory time for hours worked over schedule. However, it is subject to supervisory approval and may be affected by budgetary constraints.

SELECTIVE SERVICE REGISTRATION			
If <b>male</b> and age 18 to 26, have you registered for Selective Service?			
(Please Circle)	YES	NO	
If not, you will have 30 days to comply if selected for a position as required by Federal Law.			

#### **CERTIFICATION (THIS FORM MUST BE SIGNED)**

I certify that I have read and understand the information contained on this form, complied with the instructions provided, and have done so truthfully to the best of my knowledge.

Vame	Date

An Equal Opportunity/Affirmative Action Employer