Brekenridge Retirement Center

2500 Hunter Hill Road Rocky Mount, NC 27804 252-443-5400

Application for Employment

We consider applicants for all positions without regard to race, religion, creed, gender, national origin, age, disability, marital or veteran status or any other legally protected status.

Please Print

Position Applied For		Date of Application				
Last Name	First Name		Middle Na	me		
Address		City	State	Zip	Code	
Home Number	Cell Number		Oth	er Numbe	er	
Social Security Number		Em	ail			
Have you ever filed an application with If yes, give date				Yes	No	
Have you ever been employed with us b If yes, give date	efore?			Yes	No	
Do any of your friends or relatives work If yes, state name and relationship				Yes	No	
Are you currently employed?			,	Yes	No	
May we contact your current Employer?	,			Yes	No	
Date available for work						
What is your desired salary range?						
Are you available to work:	Full Time	Part Time				
Shift:	6:30 am - 6:30	pm				
	6:30 pm—6:30	am				

School	Name & Address of School	Course of Study	Years Completed	Diploma/Degree Earned
High School				
College				
College				
Other				

Work Experience
Start with your present or last job.

Employer	Dates Employed
Address	Start Date
Telephone Number	End Date
Starting/Present Job Title	Hourly Rate/Salary
Supervisor	Starting Pay Final Pay
Reason for Leaving	May we Contact?YesNo
Employer	Dates Employed
Address	Start Date
Telephone Number	End Date
Starting/Present Job Title	Hourly Rate/Salary
Supervisor	Starting Pay Final Pay
Reason for Leaving	May we Contact?YesNo
Employer	Dates Employed
Address	Start Date
Telephone Number	End Date
Starting/Present Job Title	Hourly Rate/Salary
Supervisor	Starting Pay Final Pay
Reason for Leaving	May we Contact?Yes No
Employer	Dates Employed
Address	Start Date
Telephone Number	End Date
Starting/Present Job Title	Hourly Rate/Salary
Supervisor	Starting Pay Final Pay
Reason for Leaving	May we Contact?YesNo