

CAROLINA SHORES PROPERTY OWNERS ASSOCIATION

17 Lakeview Court, Carolina Shores, NC 28467

Phone 910-579-2044

APPLICATION FOR EMPLOYMENT -ACC CHAIRMAN

PERSONAL INFORMATION

NAME (First Middle Last)	PHONE NO.
PRESENT ADDRESS	SOCIAL SECURITY NO.
PERMANENT ADDRESS (if different)	REFERRED BY
	DRIVER'S LICENSE NO. & STATE ISSUED

DESIRED POSITION

POSITION APPLYING FOR	DATE AVAILABLE	SALARY REQUIRED
IF CURRENTLY EMPLOYED, POSITION HELD	MAY WE CONTACT YOUR PRESENT EMPLOYER?	

EDUCATIONAL BACKGROUND

INSTITUTION	SCHOOL NAME	LOCATION	DATES ATTENDED
HIGH SCHOOL			
COLLEGE			
BUSINESS OR TRADE SCHOOLS			

EMPLOYMENT HISTORY (Most recent employment and/or employment applicable to the position applying for)

DATES (Month and Year) FROM - TO	NAME & ADDRESS OF EMPLOYER(S)	POSITION HELD

SKILLS ACQUIRED

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REFERENCES (Three references are required)

NAME	CONTACT INFORMATION

SIGNATURE _____ DATE _____