

EMPLOYMENT APPLICATION

A BACKGROUND CHECK WILL BE CONDUCTED



861 Riverland Drive
Charleston SC 29412

PLEASE TYPE OR PRINT ALL ANSWERS IN INK

PERSONAL DATA

Position(s) Desired: _____			
Date Available: _____	() Full Time	() Part Time	() Temporary
Name: _____			
(Last)	(First)	(Middle)	
Address: _____			
Street	(City/Town)	(State)	(Zip Code)
Primary Phone (Include Type and Area Code): _____		Secondary: _____	

EDUCATION AND TRAINING

Circle Highest Grade Completed: 7 or less, 8 9 10 11 12 College 1 2 3 4	Did you Graduate Yes____ No____	High School Equivalent Test Date/State Awarded _____
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	School Name City & State	Type of Diploma or Degree	Major Field	Grade Average	Dates Attended	
					From Mo/Yr	To Mo/Yr
Last High School Attended						
Colleges Attended						
Other Schools (Graduate, Trade, Business, etc.)						

List Special Skills, Training, or Experience that would be of special benefit in the job for which you are applying.

1. Do you have a valid Drivers License? Yes____ No____ State:_____ Drivers License # _____

EMPLOYMENT HISTORY

In the spaces provided below, give your employment history beginning with your present or most recent employer and list all positions held, including military, part-time, summer, volunteer work and any periods of unemployment. An explanation of any period of unemployment should be included under No. 7

<p>2A. Company Name _____ Type of Business: _____ Company Address _____ Supervisor: _____ Company Phone No. _____ Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Position: _____ Reason for Leaving _____ Description of Duties _____ _____ _____</p>
<p>2B. Company Name _____ Type of Business: _____ Company Address _____ Supervisor: _____ Company Phone No. _____ Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Position: _____ Reason for Leaving _____ Description of Duties _____ _____ _____</p>
<p>2C. Company Name _____ Type of Business: _____ Company Address _____ Supervisor: _____ Company Phone No. _____ Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Position: _____ Reason for Leaving _____ Description of Duties _____ _____ _____</p>
<p>2D. Company Name _____ Type of Business: _____ Company Address _____ Supervisor: _____ Company Phone No. _____ Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Position: _____ Reason for Leaving _____ Description of Duties _____ _____ _____</p>

In order to prevent a delay in the processing of your application, please be sure you have signed and dated this application and answered every question clearly and completely.

PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete. I understand that if I am employed, any false statement on this application may result in my dismissal. I further understand that this application is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason.

Signature of Applicant

Date

The U.S. Government requires that we verify your eligibility for U.S. employment. As evidence of eligibility and identity, the government requires new hires to submit originals of one document from Group "A" OR one document from BOTH Group "B" and Group "C" below.

Please check the evidence you will submit to us, should an offer of employment be made. UNDER FEDERAL LAW, YOUR INABILITY TO PRODUCE ADEQUATE PROOF OF ELIGIBILITY AND IDENTITY (WITHIN 3 DAYS OF EMPLOYMENT) WILL RESULT IN YOUR TERMINATION FROM AGENCY EMPLOYMENT.

Group A

- U.S. Passport
- Certificate of U.S. Citizenship
- Certificate of Naturalization
- Unexpired foreign passport with unexpired work authorization endorsement of the Attorney General
- Alien Registration card with photo
- Other- please specify:

Group B

- State driver's license with photo
- U.S. Military Card
- Other form of State ID with photo
- Photo ID approved by Attorney General
- Other- please specify:

Group C

- Social Security Card (original)
- U.S. Birth Certificate bearing seal or other certification
- Other document approved by Attorney General authorizing employment by the applicant in the U.S.
- Other- please specify:

THIS APPLICATION WILL BE CONSIDERED CURRENT FOR 3 MONTHS

THANK YOU FOR MAKING APPLICATION FOR EMPLOYMENT WITH THE CHARLESTON COUNTY PARK AND RECREATION COMMISSION

