

# APPLICATION FOR EMPLOYMENT

LAURENS COUNTY PERSONNEL  
P.O. BOX 445  
LAURENS, SOUTH CAROLINA 29360  
(864) 984-3691

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For \_\_\_\_\_

Date of Application \_\_\_\_\_

How Did You Learn About Us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In	<input type="checkbox"/> Internet
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	

Last Name		First Name		Middle Name
Address Number		Street	City	State
Telephone Number(s)		Social Security Number		

Do you have a valid S.C. Driver's License?  YES  NO  
 If yes, list License Number \_\_\_\_\_.  
 List Driver's License Classification \_\_\_\_\_

Have you ever filed an application with us before?  YES  NO  
 If Yes, give date \_\_\_\_\_

Have you ever been employed with us before?  YES  NO  
 If Yes, give date \_\_\_\_\_

Are you currently employed?  YES  NO

May we contact your present employer?  YES  NO

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  
*Proof of citizenship or immigration status will be required upon employment.*  YES  NO

On what date would you be available to work? \_\_\_\_\_

Are you available to work:  Full Time  Part Time  Shift Work  Temporary

Are you currently on "lay-off" status and subject to recall?  YES  NO

Can you travel if a job requires it?  YES  NO

Have you ever been convicted of, or pled guilty, or no contest to, any crime other than a minor traffic violation?  YES  NO  
 If Yes, please explain \_\_\_\_\_

School Name and Location	Elementary School	High School	Undergraduate College / University	Graduate / Professional
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma / Degree _____				
Describe Course of Study _____				
Describe any specialized training, apprenticeship, skills and extra-curricular activities. _____				
Describe any honors you have received. _____				
State any additional information you feel may be helpful to us in considering your application. _____				

**INDICATE ANY FOREIGN LANGUAGES YOU CAN SPEAK, READ AND/OR WRITE**

	FLUENT	GOOD	FAIR
SPEAK _____			
READ _____			
WRITE _____			

**LIST PROFESSIONAL, TRADE, BUSINESS OR CIVIC ACTIVITIES AND OFFICES HELD**  
*\*You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry or handicap or other protected status:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES**  
 Give name, address and telephone number of three references who are not related to you and are not previous employers.

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_

Have you ever had any job-related training in the United States Military?  YES  NO

If Yes, Please describe. \_\_\_\_\_

## EMPLOYMENT EXPERIENCE

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Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1.)	EMPLOYER	DATES EMPLOYED		WORK PERFORMED
		From	To	
ADDRESS				
TELEPHONE NUMBER(S)				
JOB TITLE			SUPERVISOR	
REASON FOR LEAVING			HOURLY RATE / SALARY	
			Starting	Final

2.)	EMPLOYER	DATES EMPLOYED		WORK PERFORMED
		From	To	
ADDRESS				
TELEPHONE NUMBER(S)				
JOB TITLE			SUPERVISOR	
REASON FOR LEAVING			HOURLY RATE / SALARY	
			Starting	Final

3.)	EMPLOYER	DATES EMPLOYED		WORK PERFORMED
		From	To	
ADDRESS				
TELEPHONE NUMBER(S)				
JOB TITLE			SUPERVISOR	
REASON FOR LEAVING			HOURLY RATE / SALARY	
			Starting	Final

4.)	EMPLOYER	DATES EMPLOYED		WORK PERFORMED
		From	To	
ADDRESS				
TELEPHONE NUMBER(S)				
JOB TITLE			SUPERVISOR	
REASON FOR LEAVING			HOURLY RATE / SALARY	
			Starting	Final

**SPECIAL SKILLS AND QUALIFICATIONS**

Summarize special job-related skills and qualifications acquired from employment or other experience.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

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

\_\_\_\_\_  
Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview  YES  NO

Remarks \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Interviewer

\_\_\_\_\_  
Date

Employed  YES  NO

\_\_\_\_\_  
Date of Employment

Job Title \_\_\_\_\_ Salary / Hour Rate \_\_\_\_\_ Department \_\_\_\_\_

BY: \_\_\_\_\_  
Name and Title Date

NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_