



Date Received _____

CITY OF GEORGETOWN GEORGETOWN, SOUTH CAROLINA

APPLICATION FOR EMPLOYMENT WE ARE AN EQUAL OPPORTUNITY EMPLOYER

(Resumes are accepted in addition to this employment application.
All conditionally hired candidates must pass a drug screen
as a condition of employment)

Please Read and Carefully Complete All Sections

Name _____ Soc. Sec. # _____

Address _____
Street Apt. # City State Zip

Telephone Number (____) _____ Are you 18 or older? _____

Are you legally permitted to work in the U.S.? _____

Do we employ any of your relatives? _____ If yes, please provide name and position: _____

Position(s) for which you are applying _____

Desired compensation _____

Have you ever applied for employment with us in the past? _____ If yes, when: _____

Have you ever been convicted of or pled guilty or no contest to any crime other than a minor traffic violation? (A "yes" answer to this question will not necessarily disqualify a candidate from employment) _____ If yes, please give details: _____

Have you ever been discharged or asked to resign from any job? (A "yes" answer will not necessarily disqualify you from employment) _____ If yes, please give details: _____

EDUCATION AND TRAINING

	Name and Location	Level Completed	Degree	Dates
High School				X X X X X X X X X X X X
Business/Tech.				
College				
Graduate School				

Please list professional licenses, certifications and professional memberships:

Please list any special training:

EMPLOYMENT HISTORY

Please set forth your employment history for the past fifteen years beginning with your most recent employer:

Employer _____

Address _____

Phone Number () _____ Job Title _____

Explanation of Duties _____

Beginning and Ending Dates of Employment _____

Beginning Salary _____ Ending Salary _____

Supervisor's Name and Title _____

Reason(s) for Leaving _____

Employer _____

Address _____

Phone Number () _____ Job Title _____

Explanation of Duties _____

Beginning and Ending Dates of Employment _____

Beginning Salary _____ Ending Salary _____

Supervisor's Name and Title _____

Reason(s) for Leaving _____

Employer _____

Address _____

Phone Number () _____ Job Title _____

Explanation of Duties _____

Beginning and Ending Dates of Employment _____

Beginning Salary _____ Ending Salary _____

Supervisor's Name and Title _____

Reason(s) for Leaving _____

Employer _____

Address _____

Phone Number () _____ Job Title _____

Explanation of Duties _____

Beginning and Ending Dates of Employment _____

Beginning Salary _____ Ending Salary _____

Supervisor's Name and Title _____

Reason(s) for Leaving _____

(OVER)



Employer _____

Address _____

Phone Number () _____ Job Title _____

Explanation of Duties _____

Beginning and Ending Dates of Employment _____

Beginning Salary _____ Ending Salary _____

Supervisor's Name and Title _____

Reason(s) for Leaving _____

PERSONAL REFERENCES

Please list three (3) personal references (other than relatives and former employers)

	Name	Address	Phone	Occupation
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

APPLICANT'S CERTIFICATION AND AGREEMENT

My signature below certifies that the foregoing statements are true and complete to the best of my knowledge and belief. I hereby authorize the verification of all information set forth in this application for employment. I also authorize the review of my credit history, review of my criminal record (if any), and any other inquiries which may be necessary in arriving at an employment decision. I understand that any false, incomplete, or misleading information will be grounds for rejection of this application or, if subsequently discovered, grounds for termination. I understand that any employment will be "at will," which means that I may terminate the employment relationship at any time, with or without notice or cause, and that the employer retains the same rights.

Applicant's Signature

Date