



Date Received  
Office Use Only

Electronic Version

# 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:

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Please list any special training:

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E-Mail Address \_\_\_\_\_  
(Optional)

## 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 \_\_\_\_\_

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**