



ABBEVILLE COUNTY Employment Application

Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, material or veteran status, or the presence of a non-job-related medical condition or handicap.

Applicant Information

Date: _____ Position Applied For: _____

Full Name: _____
Last First M.I.

Address: _____
Street/P.O. Box City Zip

Home Phone #: _____ Cell Phone #: _____

If hired, when could you begin work? _____

Will you be available for work on weekends? Yes _____ No _____

Have you participated in the SC Retirement System? Yes _____ No _____

Can you be bonded? Yes _____ No _____

Have you ever been in the U.S. Armed Forces? Yes _____ No _____

If yes to the above question, what branch? _____

Dates of Duty: From _____ To _____ Rank at Discharge _____

Do you have a valid driver's license? Yes _____ Class _____ No _____

Do you have any criminal convictions? Yes _____ No _____

If yes, list all criminal convictions, guilty pleas, and/or no-contest. Convictions will not be an absolute bar to employment. _____

Have you ever been employed by Abbeville County? _____ If yes, dates worked: _____

List any member(s) of your immediate family who work for Abbeville County: _____

In case of emergency, contact: _____

Name	Relationship
_____	_____
_____	_____
_____	_____

Education

High School: _____ Address: _____

From: _____ To: _____ Degree: _____

College: _____ Address: _____

From: _____ To: _____ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Degree: _____

High School Equivalency Test: Date Passed _____ State Awarded _____

Employment History

List your entire employment history beginning with your most recent employment; account for periods of unemployment. Attach additional sheets if necessary. May we contact your present employer for a reference? Yes _____ No _____

From/To Name/Address of Employer

Duties

Annual Salary Reason for leaving

From/To Name/Address of Employer

Duties

Annual Salary Reason for leaving

From/To Name/Address of Employer

Duties

Annual Salary Reason for leaving

Personal References

List below three (3) persons (not former employers or relatives) who have known you for at least five (5) years.

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Occupation</u>
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I hereby certify that the answers given by me to the above questions are true to the best of my knowledge. I understand that any falsification or misrepresentation may result in my being disqualified from consideration or dismissed from the classified service.

Applicant's Signature

Date

