

Date \_\_\_\_\_

Telephone \_\_\_\_\_

ANDERSON COUNTY  
ANDERSON, SOUTH CAROLINA

EMPLOYMENT APPLICATION

READ THESE INSTRUCTIONS CAREFULLY

Please keep in mind, this application will become a part of your permanent file should you be employed. If necessary, you may use additional sheets of paper. Do not include any information regarding race, color, age, sex, or national origin.

EQUAL EMPLOYMENT OPPORTUNITY POLICY

It is the policy of the County to recruit, hire, train and promote employees on the basis of qualifications and without discrimination because of race, religion, color, political affiliation, handicap, national origin, sex, or age: except where absence of handicap, sex or age is a bona fide occupational qualification.

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

PRESENT ADDRESS (St., or Rt. No.) \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How Long? \_\_\_\_\_

PREVIOUS ADDRESS (St., or Rt. No.) \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How Long? \_\_\_\_\_

POSITION APPLIED FOR \_\_\_\_\_ DATE AVAILABLE \_\_\_\_\_

Are you 18 years of age or older? \_\_\_\_\_ Are you a U.S. Citizen? \_\_\_\_\_ If not, what type of visa do you hold? \_\_\_\_\_

Have you served in the U.S. Military Service? \_\_\_\_\_ How Long? \_\_\_\_\_ Date of Discharge \_\_\_\_\_

Type of Discharge \_\_\_\_\_ Highest Rank \_\_\_\_\_ Any Reserve Status? \_\_\_\_\_

Have you ever worked for Anderson County before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you ever been convicted of anything other than a traffic violation? \_\_\_\_\_ If yes, explain \_\_\_\_\_

EDUCATION	NAME AND LOCATION OF SCHOOL	FROM MONTH/YEAR	TO MONTH/YEAR	DEGREE
Elementary				
High				
Trade				
Technical				
College				
Graduate				
Other				

## EMPLOYMENT APPLICATION (CONTINUED)

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LAST OR PRESENT EMPLOYER:	Summary of your work:
Address:	
Date Started:                      Date Left:	
Earnings At Start:                      At End:	
Supervisor's Name and Title:	
Reason for Leaving:	
LAST OR PRESENT EMPLOYER:	Summary of your work:
Address:	
Date Started:                      Date Left:	
Earnings At Start:                      At End:	
Supervisor's Name and Title:	
Reason for Leaving:	
LAST OR PRESENT EMPLOYER:	Summary of your work:
Address:	
Date Started:                      Date Left:	
Earnings At Start:                      At End:	
Supervisor's Name and Title:	
Reason for Leaving:	
LAST OR PRESENT EMPLOYER:	Summary of your work:
Address:	
Date Started:                      Date Left:	
Earnings At Start:                      At End:	
Supervisor's Name and Title:	
Reason for Leaving:	

If employed, I agree to comply with the rules and regulations of Anderson County. I affirm that all statements and answers are true and correct to the best of my knowledge and that I have not knowingly withheld any information that would affect this application unfavorably. I authorize Anderson County to conduct a necessary and reasonable investigation with respect to my application and release this County, my former employers and personal references for any liability and damage caused by giving and receiving information or opinions as to my employment or character. It is understood that any false statements may be considered for rejection or dismissal if employed.

I agree to have a medical examination, at County expense, now or in the future, which may include testing for alcohol, drugs and communicable diseases. It is understood that this application will remain active for consideration for 90 days.

Signature: \_\_\_\_\_

ANDERSON COUNTY  
ANDERSON, SOUTH CAROLINA

THE LANGUAGE USED IN THIS DOCUMENT DOES NOT CREATE AN EMPLOYMENT CONTRACT BETWEEN THE EMPLOYEE AND THE COUNTY. THE DOCUMENT DOES NOT CREATE ANY CONTRACTUAL RIGHTS OR ENTITLEMENTS. THE COUNTY RESERVES THE RIGHT TO REVISE THE CONTENT OF THIS DOCUMENT, IN WHOLE OR IN PART. NO PROMISES OR ASSURANCES WHETHER WRITTEN OR ORAL, WHICH ARE CONTRARY TO OR INCONSISTENT WITH THE TERMS OF THIS PARAGRAPH CREATE ANY CONTRACT OF EMPLOYMENT.

*Please sign and date.*

I agree \_\_\_\_\_

Date: \_\_\_\_\_