

# 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?		
Advertisement	Friend	Walk-In
Employment Agency	Relative	Other _____

Last Name	First Name	Middle Name
Address Number	Street	City
	State	Zip Code
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	

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

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

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

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