



An Equal Opportunity Employer

111 North Harvin St.
Sumter, SC 29150
803/773-7273 fax 803/773-4875
<http://www.sumtercountylibrary.org>

APPLICATION FOR EMPLOYMENT

Date: Position Applying For: _____

Personal Data

Name _____

Address _____

City, State, Zip _____

Home Telephone _____

Business Telephone _____

Driver's License # and State _____

CDL# and Class _____

Emergency Contact _____ Relationship _____

Address _____ Telephone _____

Educational Data

School	Name of School City/State	Major Studies	Type of Degree	Grad? Y/N
High School				
College/University				
Graduate/Professional				
Vocational, Business, Other				

List any Job-Related or Professional Certifications, Licenses, or other special knowledge, skills, or qualifications.

Computer Experience

PC <input type="checkbox"/> Mac <input type="checkbox"/> Email <input type="checkbox"/>	Ms Office: Word <input type="checkbox"/> Excel <input type="checkbox"/> Access <input type="checkbox"/>	Internet: If so, what level? Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced <input type="checkbox"/>	Describe in detail any other computer skills you have:
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Have you ever been convicted of a crime other than a minor traffic violation?

Yes _____ No _____ If yes, list date _____

Where convicted _____ Nature of charge _____

Status _____

Are you legally eligible for employment in the U.S.? (Proof of U. S. citizenship or immigration status will be required upon employment.)

Yes _____ No _____ Comments _____

Note: (1) Resumes are accepted, but the application must be completed in its entirety; (2) Incomplete applications will not be processed; (3) Begin with your most recent position; and, (4) List all positions held. Include all military service, if any. Attach additional pages if necessary.

Employed From / /	Employer Name	Supervisor Name & Phone#	Starting Salary
Employed Until / /	Employer Address	Part Time / Full Time	Ending Salary
Job Title		How many people did you supervise?	
Duties and Responsibilities			
Reason for Leaving			May we contact?

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List three references who are not relatives that you have known at least two years. Complete mailing addresses required.

Name _____ Address _____ Phone _____

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PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND SIGN

I do hereby affirm that all information provided by me in this application is true and correct. I understand that, if hired by the Library, I shall be subject to dismissal if any information that I have given in this application is false or misleading or I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I hereby authorize Sumter County Library to conduct whatever investigation it deems necessary to confirm statements submitted on this application. If the investigation determines any untrue statements or answers, I accept this as sufficient reason for refusal to hire.

I authorize and request each person, former employer, firm, or corporation, given as reference to answer any and all questions related to my current and past work performance, character or skills. I hereby release from liability, the employer and its representatives for seeking such information and all persons, corporations or organizations for furnishing such information.

In the event of employment, I understand that false or misleading information given on my application or during my interview(s), may result in dismissal. I also understand that I am required to abide by all rules and regulations of my employer.

As prerequisite to my employment, I agree that I will consent to and undergo testing to detect the presence of drugs and/or alcohol. If employed by the Sumter County Library, I further agree, as a condition of my employment, that at such time or times during my employment as the Sumter County Library shall require, I will consent to and undergo testing for the presence of drugs and/or alcohol. I also agree that at the time of any such examinations, I will execute all forms of consent and release of liability as are usually and reasonable attendant to such examination. Finally, I agree that the results of any such examination shall be made available to Sumter County Library or its agents.

I agree to submit to myself, upon request, for a physical examination by a physician selected by the County and understand that failure to meet the physical requirements may disqualify me for employment. In the event of my employment, I understand that I have the right to quit or leave my employment with proper notification and I further understand, my employer has the right to terminate my employment at any time for any reason in accordance with my employer's Personnel Policies.

Applicant's Signature _____ Date _____