

**Town of Salem
5-A Park Avenue
Salem, SC 29676**

Application for Employment

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or handicap.

Date of Application: _____

Position(s) Applied For: _____

Name: _____

Address: _____

Phone: _____ SS Number: _____

Have you filed an application or been employed here before? _____

Are you a Citizen of the United States? _____

Have you been convicted of a felony or released from prison within the last 7 years? Yes No
If yes, describe in full, including date(s) _____

In case of accident or emergency, please notify: _____

Are you on lay-off and subject to recall? Yes No

Are you a Veteran? Yes No If Yes, which branch? _____ Rank: _____

List trade or professional organizations of which you are a member, including offices held: _____

Give name, address and phone number of three (3) references NOT related to you:

1. _____

2. _____

3. _____

Employment Experience

List each job held. Start with your present or last job. Include military service assignments and volunteer activities.

1. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

2. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

3. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

4. Employer: _____

Address: _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

If you need additional space, please continue on a separate sheet of paper.

Summarize special skills and qualifications acquired from employment or other experience including the use of heavy equipment: _____

Education

High School: _____ Years Completed: __1__ __2__ __3__ __4

College: _____ Years Completed: __1__ __2__ __3__ __4

Describe Course of Study: _____ Degree: _____

Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activites: _____

Agreement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

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

Signature of Applicant

Date

For Town Official Use Only

Arrange Interview: __Yes__ __No__

Date: _____

Remarks: _____

Employed: __Yes__ __No__

Date of Employment: _____

Job Title: _____ Hourly Rate: _____