



# TOWN OF YEMASSEE

101 Town Cir

Yemassee, SC 29945-3363

## Non-Sworn Application For Employment

*An Equal Employment Opportunity Employer*

POSITION APPLYING FOR: \_\_\_\_\_

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
City State ZIP Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

When are you available to start work? \_\_\_\_\_ Are you authorized to work in the US? YES NO  
☐ ☐

Have you ever worked for the Town of Yemassee? YES NO If yes, when and  
☐ ☐ reason for leaving? \_\_\_\_\_

Are you related to anyone employed by the Town of Yemassee? YES NO If yes, give name &  
☐ ☐ relationship \_\_\_\_\_

How did you learn of this position with the Town of Yemassee? ☐ Employee Referral ☐ Town of Yemassee Website  
☐ Newspaper: ☐ Other: \_\_\_\_\_

### Education History

High School: \_\_\_\_\_ City and State: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate or earn a GED? YES NO Please specify:  
☐ ☐

College: \_\_\_\_\_ City and State: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree/Major:  
☐ ☐

Other: \_\_\_\_\_ City and State: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree/Major:  
☐ ☐

### Military Service

US Military Service: YES NO Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
☐ ☐

Current Rank/Rank at Discharge: \_\_\_\_\_

*(If you served in the military, please provide with your application a copy of your most recent DD214)*

### All applicants are required to answer the following questions prior to employment with the Town

Have you ever been convicted, pled guilty or pled no contest to a crime, other than a minor traffic offense? YES NO  
☐ ☐

If yes, please explain: \_\_\_\_\_

**NOTE:** A conviction will not necessarily disqualify applicant from consideration. \_\_\_\_\_

## General

List any special skills and/or qualifications you have  
(including certifications, licenses, etc):

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO  
☐ ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO  
☐ ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO  
☐ ☐

## References

***Please list three professional references.***

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

## Disclaimer and Authorization Release

In connection with my application and/or continued employment with the Town of Yemassee, I authorize any representative of the Town of Yemassee bearing this release to obtain any information upon request from the bearer. I agree to the following:

- I understand that false, misleading information or omissions in my application or interview may result in my not being further considered for employment, or if hired, may result in termination.
- I further understand that any employment relationship will be "at will". Accordingly, either party may terminate the employment relationship at any time with or without notice or cause.
- I authorize the Town of Yemassee to contact former employers and educational organizations regarding my employment and education.
- I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades.
- I authorize those persons designated as references to fully and freely communicate information regarding my character, performance, work ethic, and education.
- I consent to your release of any and all public and private information in regards to my military service records (if applicable), educational records, my financial status, driving record, credit report and my criminal and civil history record.
- The Town of Yemassee is a drug/alcohol free work place and if offered employment, a drug and/or alcohol test will be required prior to starting work. The Town of Yemassee also reserves the rights to require a drug and/or alcohol test during employment whenever it has reasonable suspicion of a violation of its drug/alcohol policies. Please note that all positions are subject to randomized drug and/or alcohol testing.
- In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.
- I understand my rights with regard to access and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Town of Yemassee in conjunction with employment procedures.
- I acknowledge that a FAX or photocopy of this release form will be as valid as an original.
- I have been given the opportunity to carefully read the above disclaimer and authorization and I understand and agree to its terms.

I declare under penalty of perjury that the Disclaimer and Authorization is true and accurate.

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

**NOTE:** All Applicants not contacted within 45 working days after application closing date, may consider the position filled.

## DO NOT WRITE OR TYPE BELOW THIS LINE

(For Internal Office Use Only)

Interview By: \_\_\_\_\_ Date: \_\_\_\_\_

Is applicant recommended for hire? ☐ YES ☐ NO

Remarks: \_\_\_\_\_

Dept.: \_\_\_\_\_ Position: \_\_\_\_\_ Start Date: \_\_\_\_\_

Salary/Wage: \_\_\_\_\_

Approved: 1. \_\_\_\_\_ 2. \_\_\_\_\_

Department Head

Town Administrator



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**Confidential: For Statistical Use Only**

## Voluntary Self Identification Form

The Town of Yemassee is an Equal Employment Opportunity Employer (EEO) and does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, sexual orientation or any other classification protected by Federal, State or local law. The information below will be used only in the compilation of data for EEO/Affirmative Action reporting. Completion of this data is voluntary and will not affect opportunity for employment, or terms or conditions of employment, if hired or currently an employee of the Town of Yemassee.

Please complete in full:

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

First Name *(optional)*: \_\_\_\_\_ Last Name *(optional)*: \_\_\_\_\_

Gender: ☐ Male ☐ Female

Date of Birth: \_\_\_\_\_

Position applying for or current: \_\_\_\_\_

Department: \_\_\_\_\_

Veteran: ☐ Yes ☐ No

### Race/Ethnic Group:

- |  |   |
|--|---|
| <input type="checkbox"/> American Indian or Alaskan Native         | A person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.   |
| <input type="checkbox"/> Asian                                     | A person having origins of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Island, Thailand, and Vietnam. |
| <input type="checkbox"/> Black or African-American                 | A person having origins in any of the Black racial group of Africa.   |
| <input type="checkbox"/> Native Hawaiian or other Pacific Islander | A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.  |
| <input type="checkbox"/> White                                     | A person having origins in any of the original peoples of Europe, North America, or the Middle East.  |
| <input type="checkbox"/> Hispanic or Latino                        | A person of Mexican, Puerto Rican, Cuban, Central or South American and other Spanish culture or origin.  |