

Town of Ravenel, SC

An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

Office: (843) 889-8732 Fax: (843) 889-8727 5962 Highway 165, Suite 100 Ravenel, SC 29470

The Town of Ravenel is an equal opportunity employer employing individuals based on job related qualifications and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws. Applicants requiring reasonable accommodation to complete this application, participate in the interview process or otherwise participating in the employee selection process, please direct your inquiries to Human Resources. If you believe you have been discriminated against for these reasons on consideration of your application, please notify the Equal Employment Opportunity Commission, Office of Federal Contract Compliance Programs or any appropriate local or state agency.

This application must be completed in full and signed. Incomplete or unsigned applications will not be considered. By filling out this application you are neither guaranteed an interview nor a job. The Town of Ravenel is an employment-at-will organization and, therefore, the employer or employee can terminate employment at any time without notice. Be aware that certain information contained in this completed job application may be subject to the **Freedom of Information Act**. If you are selected for an interview, you will be notified by the hiring department.

Position: (one position per application)							Date of A	Application	ı
Last Name	Name			First Name N			Middle Name		
Address				City		Sta	te	Zip Cod	e
Home Telephone	Cell Phone Number	Alterr	nate Contact Number	Ema	il Address				
Referral Source	□ Newspapers Ad□ Job Service□ Walk-In		Town Media Town Website Other Ad		Internet (site) City Employee Referra	l (name)			
Have you ever been an emplo If yes,	Oyee of the Town of Ra				m currently a Towr	emplo	oyee		
Oo you have any relatives en	Department nployed here?	s 🗆 N	Po No If yes,	sition			Dates:	From	То
			•	N	ame Dej	artment		R	elation
Note: an answer of "Yes" does not If yes, please speci AVAILABILITY	fy date(s) and nature o								
☐ Immediately	Are you willing	to wo	rk (check all that	annly	:	t Weatl	ner 🗍	Outdoo	ors
After two-week notice	☐ Full-Time	(40 hou						Weeke	ends
EDUCATION Beginning with his	gh school, provide informati	on on all	schools attended includ	ing univ	versities, colleges, techn	ical scho	ools and trade	schools.	You need
morade any mrormanon remied to di	ares of graduation at any time	01 111101	Circle Highest	Li protet	red class status of disac	inty.			
Name and State of School			Level Completed	D	egree		Major		
High School			9 10 11 12		-		<u> </u>		
Trade/Technical School			1234						
Undergraduate School			12345						

Graduate School/ Post-Graduate Sch	nool	1	23456					
List any Professional or Trade Certifications that you have.	Name of Cert	ification	<u>Issuir</u>	g Organization	Issue Date	<u>Expiration</u> <u>Date</u>		
FORMAL TRAINING You may egarding race, color, creed, sex, religing Name of Training	on, national origin, ance	erification. You stry, age, disab Presented by	oility, marital status	membership in profe , veteran status or an	y other protected status. License or Certification No.	Completed?		
						☐ Yes ☐ No ☐ Yes ☐ No		
Do you have military experie What was your last rank in the Please list applicable training	ne military?							
Does this experience or train								
ist jobs starting with your <i>presen</i> years. A Résumé may be attache imployment Experience form. Company Name			s form. If you ne			neet or an Additional		
Address			()	From G Full-Ti Part-Ti	To me		
Job Title	Title		N	ame of Supervisor		May we contact this employer?		
Describe Duties			·		Reason for l	Ü		
List tools, equipment and computer s	software utilized in this p	osition.			Start Salary	End Salary		
Company Name			T (elephone)	Dates Emplo From	То		
Address					☐ Full-Ti ☐ Part-Ti	me		
Job Title Describe Duties			N	ame of Supervisor	May we confunction Yes Reason for 1	tact this employer? No		
Describe Duites					Start Salary	End Salary		
List tools, equipment and computer s	software utilized in this p	osition.						
Company Name				elephone	Dates Emplo	oyed To		
Address			()	From Full-Ti			

☐ Part-Time

Job Title		Name of Supervisor		May we contact this employer? ☐ Yes ☐ No			
			Reason for leaving	<u></u>			
			Start Salary	End Salary			
er software utilized in this position.				-L			
		Telephone	Dates Employed From				
			☐ Full-Time	-			
		Name of Supervisor					
		1					
			Start Salary	End Salary			
er software utilized in this position.							
Indicate the number of words per minute you can type without error:							
Indicate the types of software you are skilled in using: ☐ Windows ☐ Word ☐ Excel ☐ PowerPoint ☐ Access ☐ Outlook ☐ Internet Other							
Have you operated a multi-line phone? Yes No Number of Lines?Years of experience?							
Do you have a Valid Driver's License? ☐ Yes ☐ No Do you have a Valid Commercial Driver's License (CDL)? ☐ No ☐ Permit ☐ Class A ☐ Class B							
NCES (please list 3):							
Full Name:							
elationship to Applicant:							
		Phone:					
	Title:						
Relationship to Applicant:							
		Phone:					
Relationship to Applicant:Company:							
		Phone:					
	Indicate the number of words per Indicate the types of software you windows Word Excord Have you operated a multi-line Do you have a Valid Driver's L Do you have a Valid Commercity NCES (please list 3):	Indicate the number of words per minute you can Indicate the types of software you are skilled in u Windows Word Excel PowerPoin Have you operated a multi-line phone? Yes Do you have a Valid Driver's License? Yes Do you have a Valid Commercial Driver's License NCES (please list 3): Title: Email: Email:	er software utilized in this position. Telephone () Name of Supervisor Indicate the number of words per minute you can type without error: Indicate the types of software you are skilled in using: Windows Word Excel PowerPoint Access Outlook Have you operated a multi-line phone? Yes No Number of Lines? Do you have a Valid Driver's License? Yes No Do you have a Valid Commercial Driver's License (CDL)? No Permit NCES (please list 3): Title: Email: Phone: Title: Email: Phone:	Reason for leaving Start Salary er software utilized in this position. Telephone Form Part-Time Part-Tim			

YOU MUST SIGN THIS APPLICATION. READ THE FOLLOWING CAREFULLY BEFORE YOU SIGN.

I certify that all answers given herein are true and complete to the best of my knowledge. I authorize any reference checks as well as the investigation of all statements contained in this application for employment that may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. If selected for employment, I further understand that my employment is contingent upon passing a pre-employment physical, background investigation and/or a drug test.

I also understand and acknowledge that all employees of the town are employees- at-will who may quit at any time for any reason and who may be terminated at any time for any or no reason.