



The Lowcountry's Hometown

PO Box 700 | Moncks Corner, SC 29461 | 843.719.7900 | monckscornersc.gov

EMPLOYMENT APPLICATION An Equal Opportunity Employer

Specify Position Applying For: _____

Full Name: _____

Street Address: _____

Phone Number: _____ Alt Number: _____

Drivers License No./State: _____

E-mail Address _____

If under 18, list date of birth: _____/_____/_____

NOTHING IN THIS APPLICATION OF IN ANY OF THE RELATED DOCUMENTS CONSTITUTES A CONTRACT OF EMPLOYMENT AND 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. NO ONE OTHER THAN THE TOWN ADMINISTRATOR MAY MAKE ANY PROMISES OR ASSURANCES OR ENTER INTO ANY CONTRACT WHETHER ORAL OR WRITTEN, THAT IN ANY WAY IS CONTRARY TO OR INCONSISTENT WITH THE LIMITATIONS SET FORTH IN THIS PARAGRAPH, AND ANY SUCH PROMISES, ASSURANCES, OR PURPORTED CONTRACTS SHALL BE INVALID AND NOT BINDING ON THE TOWN UNLESS ADOPTED, ENDORSED, OR AGREED TO IN WRITING BY THE ADMINISTRATOR.

Education	Name and Location of School	No. of Years Attended	Graduate or GED?	Major/Degree
High School				
College				
Trade, Business, Correspondence				

Have you ever attended school under a different name? ____ Yes ____ No.

Please Specify: _____

Have you applied here before? ____ Yes ____ No. If yes give dates: _____

Do you have any family members that are employed and/or elected or appointed by the Town of Moncks Corner? ____ Yes ____ No.

If yes, please list names and positions of family members currently employed: _____

Have you worked for us before ____ Yes ____ No.

If Yes, specify dates and positions: _____

List any special skills you have, equipment you operate, or licenses you have obtained such as the commercial drivers license:

List specific computer skills to include hardware and software programs:

Have you ever served as a member of the armed forces? ____ Yes ____ No

If Yes, please list branch, occupation, duties, dates of service; submit a copy of your DD 214:

Have you been convicted of a crime other than a minor traffic violation? _____ Yes _____ No.

If Yes, list all dates and nature of offenses:

NOTE: A Yes answer to any of the above questions does Not automatically disqualify you from employment.

Type of Employment desired: _____ Full Time _____ Part Time _____ Summer

Start Date: _____ Salaried Desired: _____

If hired are you available to work "on call" status if required and/or the required hours and shifts for the position? _____ Yes _____ No.

If No, please explain:

Employment History					
List your last four employers, beginning with your current or most recent first.					
Please complete each section.					
Date, Month, Year		Employer Name/Address/Phone	Supervisor's Name	Salary	Position
From					
To					
Duties:					
Reason for Leaving:					
From					
To					
Duties:					
Reason for Leaving:					
From					
To					
Duties:					
Reason for Leaving:					
From					
To					
Duties:					
Reason for Leaving:					

May we contact your current employer? Yes No May we contact your past employer(s)? Yes No

References			
List three persons, not related to you, whom you have known for at least one year.			
Name	Address	Business/Phone	Years Acquainted
1.			
2.			
3.			

SIGNATURE AND CERTIFICATION

PLEASE READ CAREFULLY BEFORE YOU SIGN!

I understand further that all information contained in this application may be verified through third parties, including schools and prior employers. By signing this application, I affirm that all information in this application is true and complete, and I understand that any misrepresentation, falsification, or omission is sufficient reason for dismissal or refusal of employment.

I understand that, if hired, my employment with the Town will be at will, meaning I can quit at any time for any or no reason and I can be discharged at any time for any or no reason. I understand that this application and related documents do not constitute a contract of employment.

Signature _____ Date _____

The Town of Moncks Corner is an EQUAL OPPORTUNITY EMPLOYER. We adhere to a policy of making all employment decisions without regard to race, color, religion, sex, national origin, age disability, or political affiliation, except where age is a bonafide occupational qualification.

Authorization For Release Of Information

TO:

Any Academic Dean, Registrar, Principal, Guidance Counselor, other authorized person at a school (college, business, trade or high school), or Town of Moncks Corner

Any past or present Employer, or Town of Moncks Corner

I, _____, am aware that my entire background, to include a criminal background check, is to be investigated and hereby authorize and request the release of any and all information you have concerning me, excluding health care information, to the Human Resource Office for the Town of Moncks Corner as my authorized representative for the purpose of obtaining this information.

I, hereby release anyone addressed above, who gives information about me in the course of an investigation covered by this authorization, from any liability for damages of whatever kind to me, my family, heirs or associates as a result of giving such information, except that I do not release anyone who gives information that he or she knows is false, deliberately intending to harm me.

Print Name: _____ SSN: _____

Date of Birth: _____ Drivers License No./State: _____

Street Address: _____ City: _____

State of: _____ County of: _____

Signature: _____ Date: _____

Signature of Parent/Guardian if Subject is Under 18 _____

Print Name: _____

Date: _____

Notary Certification

Sworn and Subscribed before me on this day _____ of _____ 20_____

Notary for the State of South Carolina, County of Berkeley:

Notary Signature My commission Expires: _____ 20_____

SOCIAL MEDIA ACCOUNTS

Please list all social media accounts:

Social Media Platform (Facebook, Twitter, Instagram, etc...)	Account Name, Username or User ID

The Town of Moncks Corner does **not** request passwords for applicants' social media accounts. Additionally, this record will be kept in a confidential file separate from the Application for Employment. Any social media review will focus on business-related information and any protected class information will be redacted when presenting results to the appropriate hiring authority.

Applicants are considered for all positions without regard to protected class information, such as race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, age, mental or physical disability, genetic information (including family medical history), or marital status.

APPLICANT DATA RECORD

THE TOWN OF MONCK'S CORNER'S POLICY IS TO COMPLY WITH ALL LAWS INCLUDING THOSE BANNING DISCRIMINATION. APPLICANTS ARE CONSIDERED FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, RELIGION, AGE, SEX, VETERAN STATUS OR DISABILITY.

NAME (as is appears on Social Security card):

Last	First	Middle	Maiden
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Social Security Number: _____ Phone: (_____) _____

Address: _____

Street	City	State	Zip Code
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Date of Birth: _____ Age: _____

Position applying for: _____

Date: _____

AS EMPLOYERS / GOVERNMENT CONTRACTORS, WE COMPLY WITH GOVERNMENT REGULATIONS AND AFFIRMATIVE ACTION RESPONSIBILITIES. SOLELY TO HELP US COMPLY WITH GOVERNMENT RECORD KEEPING, REPORTING AND OTHER LEGAL REQUIREMENTS, PLEASE COMPLETE THE APPLICANT DATA RECORD. IT WILL BE KEPT IN A CONFIDENTIAL FILE SEPARATE FROM THE APPLICATION FOR EMPLOYMENT. WE APPRECIATE YOUR COOPERATION.

CHECK ONE: Male Female

How did you hear about this job?

CHECK ONE: White
 Black or African-American
 Hispanic or Latino
 Native Hawaiian/Pacific Islander
 American Indian/Alaskan Native
 Asian
 Two or More Races

CHECK ONE: Town Employee
 Job Line
 Website
 Newspaper Ad
 Office Visit
 Job Service
 Other