PARKER SEWER & FIRE SUBDISTRICT 117 SMYTHE STREET GREENVILLE, SOUTH CAROLINA 29611 PHONE: (864) 467-4030 FAX: (864) 467-4032



Parker Sewer & Fire Subdistrict is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

INSTRUCTIONS: THIS APPLICATION MUST BE FILLED OUT IN DETAIL AND PRINTED IN BLACK OR BLUE INK. FAILURE TO COMPLETE ALL SECTIONS, OR TO SIGN THE APPLICATION, MAY RESULT IN YOUR APPLICATION BEING RETURNED FOR COMPLETION, CAUSING DELAY OR POSSIBLE DISQUALIFICATION. A RESUME MAY BE ATTACHED BUT NOT SUBSTITUTED FOR THE APPLICATION.

| PERSONAL: | S A |
|--------------------------------------------|---------------------------|
| Name Last First | Middle Date |
| Address | |
| Phone Number CPE | INVILLE SIL |
| Position Sought | Full Time Part Time |
| Date Available | _ Salary Desired |
| Are you over 18 years old? Yes | No |
| Are you legally eligible for employment in | the United States? Yes No |

(If offered employment, you will be required to provide documentation to verify eligibility.)

EDUCATION: Please indicate education or training which you believe qualifies you for the position you are seeking.

| High School: No. of Years Completed | (check one) | _1 | _ 2 | 3 | _ 4 |
|-----------------------------------------------------------------------------------------------------------------------------|--------------------|----------|------------------|-------|----------------|
| Diploma: Yes No | G. | E.D.: _ | _Yes | 1 | No |
| School(s) | City/State | | $\mathbf{\cdot}$ | | |
| College and/or Vocational School: Number of Years Completed (check on | e)12 _ | 3_ | 4 | | |
| School(s) | City/State | e | | | |
| Major | _ Degrees Earne | ed | | 7 | |
| Other Training or Degrees: | | | - | | |
| School(s) | City/State | | | | |
| Course | _ Degree or Cer | tificate | Earned | | |
| | | | | | |
| PROFESSIONAL LICENSE OR MEME | BERSHIP: | | | | |
| Type of License(s)Held | | | | | |
| Other Professional Memberships | <u> </u> | | | | <u>↓</u> |
| (You need not disclose membership in regarding race, color, creed, sex, religions status, veteran status or any other prote | on, national origi | | | | |
| Have you ever been employed in any faci | lity of Parker Sev | wer an | d Fire Su | ubdis | strict? Yes No |
| If so, please state facility name and location | on and dates of e | employ | ment | | |

CERTIFICATIONS:

| Certificate | Certifying Agency | Approximate Date of Completion |
|-------------|-------------------|-----------------------------------|
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EMPLOYMENT: List last employer first, including U.S. Military Service.

May we contact your present employer? ____ Yes ____ No

If any employment was under a different name, indicate name_____

| Employer | D | Address |
|--------------------|------------------------|------------------|
| Telephone | JEN | Position |
| Dates of Employme | nt: From Month/Year | To Month/Year |
| Salary | Supervisor | Department |
| Duties | | |
| Reason for Leaving | | |
| Employer | | Address |
| | 6 | |
| Dates of Employme | nt: From Month/Year | To Month/Year |
| Salary | Supervisor | Department |
| Duties | | |
| Reason for Leaving | | |
| Employer | 2 | Address |
| Telephone | | Position |
| | | Month/Year |
| Salary | Supervisor | Department |
| Duties | | |
| Reason for Leaving | | |

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

| Explain any gaps in work history: | |
|--------------------------------------|-------------------------------|
| Have you ever been discharged or ask | ed to resign from a job?YesNo |
| If yes, explain: | R DISTR |
| REFERENCES: | |
| Professional | Personal |
| Name | Name |
| Address | Address |
| | |
| Phone Phone | Phone () |
| Name | Name |
| Address | Address |
| Phone () | Phone () |
| Name | Name { |
| Address | AddressSIN |
| Phone () | Phone () |
| Name | Name |
| Address | Address |
| Phone () | Phone () |

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Parker Sewer and Fire Subdistrict to verify their accuracy and to obtain reference information on my work performance. I hereby release Parker Sewer and Fire Subdistrict from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

The use or acceptance of this form does not indicate any positions are available and in no way obligates Parker Sewer and Fire Subdistrict or me.

I understand that my credit rating may also be checked.

I also authorize and request all former employers, person, firms or corporations, to answer any or all questions asked and give all information sought including the release of documents in connection with this application.

I understand that Parker Sewer and Fire Subdistrict requires me to take and pass a urine test to detect drug use as part of the application.

I hereby release Parker Sewer and Fire Subdistrict, any person or entity acting on their behalf, and any and all of my former employers, their officers, agents and employees, from any and all claims, liability, or damage of any kind, whether due to negligence, error or any cause, as a result of releasing said information to any member of the District, or any person or entity acting on their behalf. I further understand that in consideration for said release, Parker Sewer and Fire Subdistrict will regard all information so obtained as confidential and shall not release the same to any other person without my express consent.

Applicants applying for positions with Parker Sewer and Fire Subdistrict are required to meet the minimum qualifications or an equivalent combination of training and experience in reference to the position for which they apply, before any application may be given consideration for employment.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant

Date:

This application for employment is good for 60 days only.

Consideration for employment after 60 days requires a new application.

South Carolina Firefighter Registration Act Request for Criminal Record Review

| Name: | RDIS | (Full Given Name) |
|-----------------------------------|--------------------------------------------------------------------|-------------------|
| Address: | | |
| City | State Zip | |
| Social Security#: | Date of Birth:// | |
| Driver's License: State: Nur | mber: | |
| Race: | Sex: 🗖 Male 🗖 | Female |
| | | |
| | | |
| | | |
| Department to inquire and receive | , do hereby grant approval for any and all criminal information | |
| S. | | \checkmark |
| Applicant Signature | | Date O |
| | | |
| Authorized Signature | | Date |
| Gr Gr | | IN |
| A M | EENVILLE | |
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