



# CHARLESTON COUNTY PUBLIC LIBRARY

## EMPLOYMENT APPLICATION

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, handicap, or national origin. Public Law 90-202 prohibits discrimination because of age. The Charleston County Public Library is an Equal Opportunity/Affirmative Action Employer. M/F/V/H

PLEASE PRINT OR TYPE

POSITION FOR WHICH YOU ARE APPLYING                      BRANCH                      FULL/PART-TIME

LAST NAME                      FIRST NAME                      MI

CURRENT MAILING ADDRESS

CITY                      STATE                      ZIP                      TELEPHONE #

### EDUCATION

SCHOOLS	NAME/ADDRESS	YEARS ATTENDED	GRADUATED	DEGREE
High School				
College or University				
Graduate School				
Other				

List any courses, seminars, workshops, training sessions, etc. giving the date of completion and the school that might relate to the position for which you are applying.

SCHOOL ATTENDED                      COURSE                      DESCRIPTION

Have you ever been employed at the Charleston County Public Library? Yes  No  Year   
List any relatives or friends employed at the Library:

May we contact previous employers? Yes  No

Have you ever been discharged or forced to resign from any job for misconduct or unsatisfactory service?  
Yes  No  If yes, please describe briefly:

Have you ever been convicted of a crime other than a misdemeanor or summary defense? Yes  No   
If yes, please describe briefly:

**Please complete the following job history information beginning with your most recent job:**

Name of Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Describe Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Full or Part-Time: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Describe Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Full or Part-Time: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Describe Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Full or Part-Time: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

**PLEASE READ CAREFULLY: 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. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal and employment history through any investigative agencies or bureaus of your choice.

Applicants requiring disability related accommodations should request them during the application process.

\_\_\_\_\_  
APPLICANT'S SIGNATURE                      DATE

**VOLUNTARY APPLICANT DATA INFORMATION**  
(Completion of Information Below is Voluntary)

We consider applicants for all positions without regard to race, color, religion, sex, national origin, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

As required, the Charleston County Public Library must comply with government regulations including Affirmative Action and ADA obligations where they apply.

In an effort to comply with requirements regarding government record keeping and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is greatly appreciated.

Please be advised that your survey is not a part of your official application for employment. It is considered confidential information that will not be used in any hiring decisions.

**REFERRAL SOURCE:**

Advertisement	Employee	Private Employment
Relative	School	Government Employment Agency
Walk-In	Other	Name Source

**Applicant's Name**

Last	First	MI
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**Address**

Street	City	State	Zip Code
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Phone Number	Birth Date	Female	Male
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Check one of the following race or ethnic group:

NATIVE AMERICAN / ALASKAN	CAUCASIAN
AFRICAN AMERICAN	ASIAN / PACIFIC ISLANDER
HISPANIC	OTHER

Check if one of the following is applicable:

Vietnam Era Veteran	Disabled Veteran	Handicapped Individual
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To Be Completed By Applicant — Not For Interview Purposes — To Be Filed Separately From Application

**FOR HUMAN RESOURCES USE ONLY**

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Positions for which applicant applied:	
Available:	
Not Available:	
Other positions for which applicant may be considered:	
<b>Position</b>	<b>Branch</b>

**Hired**

Yes
No

Position for which applicant was hired:
Branch:
EEO Classification:

- 1. Administrative
- 2. Librarian
- 3. Supervisory
- 4. Pre-Professional
- 5. Public Relations
- 6. Library Assistant
- 7. Office and Clerical
- 8. Drivers
- 9. Library Pages

NOTES:

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COMPLETED BY: \_\_\_\_\_

DATE: \_\_\_\_\_