



1619 Jefferson Davis Highway
 PO Box 310
 Camden, SC 29021
 (803) 432-4841

APPLICATION FOR EMPLOYMENT

The Kershaw County Board of Disabilities and Special Needs does not discriminate on the basis of age, sex, religion, race, national origin or disability in its employment practices, individual admissions, or selection of its governing board.

Date:		Position/Shift Desired:				
Name (Full):						
(First)		(Middle)			(Last)	
Address:						
Number	Street	City	County	State	ZIP	
Phone (Home):						
Cell:						
Email:						
Social Security Number:						
Driver's License Number:				State Issued:		

	Yes	No
Have you ever been convicted of abuse and/or neglect or had such complaint substantiated by the Department of Social Services or any other Agency?		
Have you ever been dismissed or forced to resign from any employment?		
If yes, please explain:		

List the States where you have lived since the age of 18 and the dates of your residence. Please do not leave any gaps: _____

Have you ever served in any Branch of the U.S. Armed Forces? _____ If yes, Branch of Service: _____ Dated Entered: _____ Date Discharged: _____
 Type of Discharge: _____ Highest Rank _____

EXPERIENCE:

Begin with Present or most recent job. Please do not omit any jobs. Use additional pages if needed.

Employer: _____
Address: _____
Phone: _____ Supervisor: _____
Dates of Employment: _____ to _____ Month/Year Month/Year
Starting Salary: _____ Ending Salary: _____ Title: _____
Specific Duties: _____
Reason for Leaving: _____

Employer: _____
Address: _____
Phone: _____ Supervisor: _____
Dates of Employment: _____ to _____ Month/Year Month/Year
Starting Salary: _____ Ending Salary: _____ Title: _____
Specific Duties: _____
Reason for Leaving: _____

Employer: _____
Address: _____
Phone: _____ Supervisor: _____
Dates of Employment: _____ to _____ Month/Year Month/Year
Starting Salary: _____ Ending Salary: _____ Title: _____
Specific Duties: _____
Reason for Leaving: _____

PERSONAL REFERENCES: (Complete Addresses)

Name: _____ **Occupation:** _____

Address: _____

Phone: _____

Name: _____ **Occupation:** _____

Address: _____

Phone: _____

Name: _____ **Occupation:** _____

Address: _____

Phone: _____

IN CASE OF EMERGENCY NOTIFY: _____ **PHONE:** _____

Type	Name & Location	EDUCATION Course of Study	Diploma	
High School				
Business/ Technical				
Junior College				
College				
Graduate				
Other Studies				

