

WILLIAMSBURG COUNTY SCHOOL DISTRICT
OFFICE OF HUMAN RESOURCES
PERSONNEL DATA FORM 2021-2022

PERSONAL DATA (Please Print)

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
SOCIAL SECURITY #: _____ - _____ - _____ RACE: _____ SEX: _____
DATE OF BIRTH: _____ PLACE OF BIRTH: _____
TELEPHONE #(_____) _____ - _____ ALTERNATE # (_____) _____ - _____
E-MAIL ADDRESS: _____

JOB RELATED DATA

NAME OF SCHOOL(S) ASSIGNED: _____
POSITION: _____ PROGRAM (Title 1, etc): _____
SUBJECTS: (Please list all subjects you will teach this year) _____
TOTAL YEARS OF EXPERIENCE: _____ TOTAL DISTRICT EXPERIENCE: _____
HIRE DATE (First day actually worked for Williamsburg County School District): _____

RETIREMENT DATA

ARE YOU RETIRED FROM THE SOUTH CAROLINA RETIREMENT SYSTEMS? YES [] NO []
LAST DATE OF ACTIVE SERVICE PRIOR TO RETIREMENT: _____
NAME OF FORMER EMPLOYER UNDER THE SCRS: _____
POSTION HELD: _____
ARE YOU CURRENTLY RECEIVING A RETIREMENT CHECK FROM THE SCRS? YES [] NO []

IN CASE OF AN EMERGENCY, PLEASE CONTACT:

NAME: _____ RELATIONSHIP: _____
ADDRESS: _____ CITY: _____
STATE: _____ ZIP: _____ PHONE: (_____) _____ - _____

(Any alternate person to contact should be listed similarly on the opposite side of this form.)

I, _____, HEREBY CERTIFY THAT I AM PHYSICALLY AND MENTALLY CAPABLE TO PERFORM THE DUTIES OF THE ABOVE POSITION.

SIGNATURE OF EMPLOYEE

DATE