

## Bamberg County First Steps Employment Application

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

Date of Application:

	APPLICANT INFORM	ATION					
Position(s) Applied For:							
Referral Source: ( )Advertiseme	nt ( )Friend ( )Relativ	e ( )Walk-In	( )Other				
Personal Details							
First Name: Mi	ddle Initial:		Last Name:				
Preferred name:							
Address:							
Telephone: Daytime:	٨	Mobile:					
Email:							
Have You Ever Been Employed with	h Our Organization? 🔲 Y	es 🗆 No - Wh	nere?				
Are You Available to Work: Full Time Part-Time - When Can You Start Work:							
Do you have a valid driver's license?							
Can you travel if required by the position?   Yes   No If no, explain:							
Have you ever been convicted of a felony?   Yes  No If yes, explain:							
Education							
High School:	A	.ddress:					
From: To:	_ Did you graduate?	☐ Yes ☐No	Diploma:				
College:	A	.ddress:					
From: To:	_ Did you graduate?	☐ Yes ☐ No	Diploma:				
Other:	A	.ddress:					
From: To:	_ Did you graduate?	☐ Yes ☐No	Diploma:				
Are you currently undertaking study/training/school?							
If yes, course/program name:							
(Click one)	time Part ti	me Dis	stance [	Other			

Qualification Title	Institution/Training	g Provider	Year Comple	
evious Employment (Most Recent F	Siret)			
mployer:		Phone:		
ddress:				
ob Title:	Starting Salary:\$	Endin	g Salary\$	
Pesponsibilities:				
rom: To:	Reason for Leavir	Reason for Leaving:		
May We Contact This Employer For A	A Reference:	□No		
mployer:		Phone:		
Address:		Supervisor:		
ob Title:	Starting Salary:\$	Endin	g Salary\$	
esponsibilities:				
rom: To:	Reason for Leavin	ng:		
May We Contact This Employer For A	Reference: Yes	□No		
mployer:	_	Phone:		
Address:		Supervisor:		
lob Title:	Starting Salary:\$	Endin	g Salary\$	
Responsibilities:				
	Reason for Leavir	ng:		
rom: To:				

erences who are not relate	ed to you and are not previou	s emplovers.
Contact No.	Position held/ working relationship	Office use check initial/date
ion that you identify as be	ng pertinent to this applicatio	n:
	_	
termination of employmer	nt with this organization. I und	erstand that, in
ition applied for. Furtherm or a definite period. Rega	nore, I understand and agree rdless of circumstances, my e	that if hired, my
	contact No.  on that you identify as being a special contact in this application for termination of employments and being a policy and be required and by the constitute an offerition applied for. Furtherm for a definite period. Regainst the contact in the conta	on that you identify as being pertinent to this application to the properties of the

\*\*This application will be considered active for a period of (60) days\*\*

Date:

Signed: