

North Greenville University
Post Office Box 1892
Tigerville, South Carolina 29688-1892
864.977.7000

APPLICATION FOR EMPLOYMENT

This application must be filled out in detail. Please print in ink or type. Failure to complete all sections, or to sign the application, may result in your application being returned for completion, causing delay or disqualification. A resume may be attached but not substituted for completing the application.

PERSONAL DATA

Date _____ Name _____
Last First Middle
Mailing address _____
Street Apt. Number P.O. Box
Telephone _____
City State Zip Code Home Work
Social Security Number _____ May we call you at work? _____

Are you legally eligible for work in the United States yes no

EMPLOYMENT DATA

Use this space to describe the type of work you are seeking, or position you are interested in:

Are you willing to accept the following type positions? (Answer all three)

Full Time yes no Part Time yes no Temporary yes no

Date available for work? _____ Salary Desired? _____

Have at any time ever:

Been arrested for any reason? yes no

Been convicted of, or pleaded no contest to, any crime? yes no

Engaged in, or been accused of, any child molestation, exploitation, or abuse? yes no

Are you aware of:

Having any traits or tendencies that could pose any threat to children, youth or others? yes no If yes, please explain. Use additional pages as needed.

Have you previously been employed with us? yes no If yes, give date _____

Do any of your friends or relatives work here? [] yes [] no If yes, give name _____

Do you possess a valid driver's license? [] yes [] no If yes, give license ID# _____
State _____

Computer Skills – List software/applications in which you are proficient . . . _____

WORK EXPERIENCE

If you are presently employed, may we contact your employer? _____

List employers, starting with present or most recent employer:

Company Name	Telephone		
Address	Dates Employed -	From	To
Name of Supervisor	Weekly Pay Rate -	Start	Final
Reason for Leaving			
Duties			

Company Name	Telephone		
Address	Dates Employed -	From	To
Name of Supervisor	Weekly Pay Rate -	Start	Final
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Duties			

Company Name	Telephone		
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Name of Supervisor	Weekly Pay Rate -	Start	Final
Reason for Leaving			
Duties			

Company Name	Telephone		
Address	Dates Employed -	From	To
Name of Supervisor	Weekly Pay Rate -	Start	Final
Reason for Leaving			
Duties			
Comments: Include explanation of any gaps in employment			

EDUCATION

Note: For positions requiring submission of transcripts, certificates, or licenses, this application is not complete until such documentation is received. Attach such documentation if required.

	School Name and Location	Field of Study	No. of Yrs. Completed	Degree Conferred
Graduate	_____	_____	_____	_____
College	_____	_____	_____	_____
Bus./Trade	_____	_____	_____	_____
High School	_____	_____	_____	_____
Elementary	_____	_____	_____	_____

REFERENCES

Name	Address	Telephone
_____	_____	_____
Name	Address	Telephone
_____	_____	_____
Name	Address	Telephone
_____	_____	_____

APPLICANT'S STATEMENT

I certify that the information set forth in my application for employment is true and complete. I understand that if hired, any false statement on this application may result in my dismissal. I further understand that this application is not, and is not intended to be a contract of employment, nor does this application obligate the University in any way.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this institution is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

I authorize North Greenville University to make such investigations and inquiries of my personal, employment, and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, school, or persons from all liability in responding to inquiries in connection with my application.

I understand that if hired, I am required to abide by all rules and regulations of North Greenville University.

Signature of Applicant

Date

RELEASE OF INFORMATION WAIVER

I understand that I am applying for employment at North Greenville University. Because this is an educational institution, a background investigation is required for employment. The areas that may be included in this background investigation include:

- 1. Criminal history record check
- 2. Motor vehicle department driving record

I hereby authorize the procurement of a criminal history record report and motor vehicle department driving record by North Greenville University as part of the pre-employment background investigation.

I hereby release North Greenville University, any person or entity acting on its behalf from any and all claims, liability, or damage of any kind, whether due to negligence, error or any other cause as a result of releasing said information to any member of North Greenville University, or any person or entity acting in their behalf. I further understand that in consideration for said release, North Greenville University will regard all information so obtained as confidential and shall not release the same to any other person without my express consent.

Signature of Applicant

Date Signed

Applicant's Information

DOB _____
 Race _____
 Sex _____
 SS# _____
 DL# _____
 State _____

Signature of Witness

Date Signed