



502 USHER STREET | PO BOX 8 PAGELAND, SC 29728  
 PHONE NUMBER 704-243-8717 | FAX NUMBER 843-672-2211

## APPLICATION FOR EMPLOYMENT

### EQUAL OPPORTUNITY EMPLOYER

Name:	Telephone #:
Address #1 (Street address, City, State):	
	How long?:
Address #2 (Street address, City, State):	
	How long?:
<i>Commercial motor vehicle driver applicants include preceding (3) years. Attach separate sheet if needed.</i>	
Date available for employment:	
If employed and under 18, can you furnish a work permit?	YES / NO
Have you ever been employed by this company?	YES / NO
Are you employed now?	YES / NO
May we contact your present employer?	YES / NO
If yes, please provide company name:	
<i>In compliance with federal law, all persons hired will be required to verify their identity and eligibility to work in the United States, and to complete the required employment eligibility verification document form upon hire.</i>	
Type of work desired:	
If applying for a position where driving is required, do you have a valid driver's license in this state?	YES / NO
Are you available to work overtime hours?	YES / NO
<i>This company is an equal employment opportunity employer. All applicants will be considered without regard to age, race, national origin, religion, disability, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws. Title I of the Americans with Disabilities Act of 1990 requires an employer to provide reasonable accommodation to qualified individuals with disabilities who are employees or applicants, unless to do so would cause undue hardship.</i>	

**Special Skills, Qualifications, and Considerations:**

Summarize any special skills and/or qualifications, volunteer activities, military experience, employment, or other activities related to the job you are seeking:

**References:**

List (3) non-relatives who are familiar with your qualifications, abilities, and work history:

#1 - Name:

Years known:

Telephone number:

Occupation / relationship:

#2 - Name:

Years known:

Telephone number:

Occupation / relationship:

#3 - Name:

Years known:

Telephone number:

Occupation / relationship:

**Employment Experience:**

*Driver applicants include preceding (10) years of employment experience, if employment included commercial vehicle operation. Attach separate sheet if needed.*

Employer:

Supervisor:

Address:

Position:

Dates employed:

Phone#:

Pay Rate (Starting / Ending):

Job Duties:

Reason for leaving:

Employer:

Supervisor:

Address:

Position:

Dates employed:	Phone#:
Pay Rate (Starting / Ending):	
Job Duties:	
Reason for leaving:	
Employer:	Supervisor:
Address:	Position:
Dates employed:	Phone#:
Pay Rate (Starting / Ending):	
Job Duties:	
Reason for leaving:	
<p><b>Please read the following statements carefully before signing this application. Only those applications that are signed and dated are considered valid. If you have any questions regarding this statement, PLEASE ASK before signing.</b></p>	
<p>I certify that all answers and statements I have made on this application (and resumé or other supplementary materials) are true and complete without omissions. By signing below, I authorize THE COMPANY to investigate all statements contained in this employment application as they may deem necessary in arriving at an employment decision. I understand that any false information provided by me will likely result in a refusal to hire or immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character, and qualifications.</p> <p>If hired, I will be responsible for familiarizing myself with all rules and regulations of THE COMPANY as they presently exist or are later modified. If hired, I understand my employment can be terminated at the discretion of THE COMPANY or at my option, without notice, at any time, and for any reason.</p> <p>I also understand that no representative of THE COMPANY has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the president of THE COMPANY.</p> <p>I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time.</p> <p>I have read, understand, and agree with the above. This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.</p>	

<b>Applicant Signature:</b>	<b>Date:</b>

This application is valid for only ninety (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from date signed, I will submit a new application.