



APPLICATION FOR AT-WILL EMPLOYMENT

City of Clemson
Form 2

CITY OF CLEMSON
1250 Tiger Blvd. Suite 1, Clemson, SC 29631
(864) 653-2070

The City of Clemson is an at-will employer meaning that either the employer or the employee may end the employment relationship at any time and for any or no reason. We consider applicants for all positions without regard to race, religion, color, national origin, sex, disability, or age. The City makes no commitment of employment to the applicant. The City of Clemson is an equal opportunity employer.

PLEASE PRINT.

POSITION APPLIED FOR: _____

Name: _____ **Phone:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

E-mail Address: _____

EDUCATION: (School and Years Completed)

High School: _____ Diploma: Yes No GED _____

College: _____ Years: _____ Degree: _____

EMPLOYMENT HISTORY: (Starting with Present Employer)

Present Employer: _____ Phone Number: _____

Position: _____ Dates from: _____ to: _____

Weekly wages _____ Supervisor: _____

Previous Employer: _____ Phone Number: _____

Position: _____ Dates from: _____ to: _____

Weekly wages _____ Supervisor: _____

Reasons for Leaving: _____

PERSONAL REFERENCES: (List name, address, and phone number)

1. _____

2. _____

3. _____

PLEASE EXPLAIN YOUR REASONS FOR WHY YOU SHOULD BE HIRED FOR THIS JOB:

(continue on back if necessary)

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ (An answer of "yes" does not necessarily disqualify you from employment, but an explanation should be given.)

I UNDERSTAND THAT FALSE STATEMENTS ON THIS APPLICATION MAY RESULT IN MY NOT BEING FURTHER CONSIDERED, OR IF HIRED, MAY RESULT IN MY TERMINATION.

Signature

Date



RELEASE FORM

City of Clemson
Form 2A

City of Clemson
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I do hereby authorize the City of Clemson, South Carolina to contact references and former employers and to request any public records of former employees or schools about me in considering this application for employment.

I, also, authorize the City of Clemson to conduct a drug screening should I receive an offer of employment for a City position.

The use or acceptance of this form does not indicate any positions are available and in no way obligates the City of Clemson to offer employment.

Signature: _____ Date: _____

Date of Birth: _____ SS#: _____



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City of Clemson
Form 2B

In order to evaluate the success of our recruiting efforts, and to comply with various state and federal laws, we ask all applicants to voluntarily provide the information indicated below. This information is held in confidence and not used in the hiring decision process.

Position Applied For: _____

Male Female

White (not of Hispanic origin) African-American Asian/Pacific Islander
American Indian Hispanic Other

Are you receiving Public Assistance? Yes No (*If yes, please specify below.*)
AFDC (FI Stipend) Food Stamps