



CITY OF COLUMBIA - APPLICATION FOR EMPLOYMENT

ALL Applications for Employment MUST be returned to:

City of Columbia Office of Human Resources
 1225 LADY Street (corner of Lady & Sumter) - (PO Box 147), Columbia, SC 29217-0147

FOR CURRENT JOB VACANCIES go to: <http://www.columbiasc.net/jobs>

THIS APPLICATION, OR ANY PART THEREOF, IS NOT A CONTRACT FOR EMPLOYMENT

I. APPLYING FOR: LIST EACH POSITION BY POSITION TITLE ONLY

Position Title	Position Title	Position Title	Position Title

EMPLOYMENT OFFICE USE ONLY - Position(s) Open Within the Following Department/Division(s):

Dept/Div	EEOC	Status*	Dept/Div	EEOC	Status*	Dept/Div	EEOC	Status*
1			4			7		
2			5			8		
3			6			9		

Date: _____ Date: _____ Date: _____

***STATUS: HIRING AUTHORITY:** You **MUST** contact Human Resources **PRIOR** to making a job offer to an applicant in the Drug Program.

* Q = Qualified/Re: Meets applicable experience &/or special requirement. DQ = Disqualified/Re: Lacks applicable experience &/or special requirement.

It is to your benefit to follow the application procedures since there are often many applicants for each job opening. To be considered, you must possess the required minimum qualifications, i.e., the related education, training & experience and any special requirement(s). Testing is not usually required; however, a performance test (typing test) is required for all positions that indicate **TYPING TEST REQUIRED**. Special testing is required for applicants seeking positions with the Columbia Police Department and the Columbia Fire Department.

Failure to complete all sections or to sign this application will cause delay or disqualification for employment.	You MUST provide your Social Security Number on Page 4A of this application.	THE CITY OF COLUMBIA IS AN EQUAL OPPORTUNITY EMPLOYER
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II. APPLICANT'S DATA:

Date Of Application: _____

APPLICANT'S NAME (Print)			
	PRINT LAST NAME	PRINT FIRST NAME	Middle Initial

Current Home Address:					
	Street Number - Street Name	City	State	Zip Code	

Telephone Numbers:	Home Phone: (AC) _____	Work Phone: (AC) _____	May we call you at work? <input type="checkbox"/> /Yes <input type="checkbox"/> /No
	Cell Phone: (AC) _____	Pager Number: (AC) _____	Instructions: _____
E-mail Address:	_____		

II. (1) ARE YOU A CURRENT CITY OF COLUMBIA EMPLOYEE? **/YES*** EMPLOYEE I.D. Number

***If "YES" YOU MUST COMPLETE SECTION VIII ON PAGE 3 - ITEM (1) Present Employer** /No _____

II. (2) Do you possess a VALID driver's license? /No /Yes* *State _____ *License #: _____

11. (3) Is this a (please check one): Non-Commercial (regular) License Commercial Driver's License (CDL)

II. (4) Class Type (Check One): /A /B /C /D /E /F /G /M Expiration Date: _____

II. (5) Endorsements? /Yes * /No *If Yes, Identify: _____ Restrictions? /Yes* /No *If Yes, Identify: _____

Work schedule Preferred: /Full-Time /Part-Time **Part-Time Hours:** _____ /Temporary

The City of Columbia adheres to and complies with the Drug Free Workplace Act. All applicants selected for employment are offered a "Conditional Offer of Employment" contingent upon successful completion of all Pre-Employment screening processes such as, but not limited to the following: Drug/Alcohol Screening Test, Health Screening, SLED/NCIC Background Check, Driver's License Check, etc. Failure to successfully complete this process will be cause for the City to withdraw its "Conditional Offer of Employment".

APPLICATIONS WILL REMAIN ACTIVE IN THE EMPLOYMENT OFFICE FOR TWO (2) MONTHS FROM THE DATE SUBMITTED.
 A RESUME MAY BE SUBMITTED BUT YOU MUST ALSO SUBMIT A FULLY COMPLETED EMPLOYMENT APPLICATION.

FOR CURRENT JOB VACANCIES go to: <http://www.columbiasc.net/jobs>

(If this application has been downloaded from the City's Web Page – make sure this is all on Page 1 ONLY)

List jobs **STARTING WITH YOUR PRESENT or LAST JOB.** You may list work history such as volunteer, part-time, temporary, self-employment and military. **Provide work history for at least the past 10 years.**

NOTE: CURRENT CITY EMPLOYEE'S MUST COMPLETE ITEM (1) BELOW.

Have you included a Resume?	<input type="checkbox"/>	/Yes*	<input type="checkbox"/>	/No	*If yes, a resume may be submitted; however, you MUST submit a fully completed employment application.
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(1) Present or Last Employer/Company's Name <small>Note: Current City Employee List Current Div.</small>				From		To		Starting Salary	Last Salary
				Month	Year	Month	Year		
Company Address (Current City Employee: List Current Division Location)				Position Title:		Describe your duties:			
Company City & State/Zip Code (Current City Employee: List Current Division Location)									
Telephone Number	AC:								
Supervisor's Name:									
May We Call?		/Yes	No /Reason:						
Check One	FT	Reason for Leaving or Wanting to Leave (BE SPECIFIC)							
	PT								

(2) Previous Employer/Company's Name				From		To		Starting Salary	Last Salary
				Month	Year	Month	Year		
Company Address				Position Title:		Describe your duties:			
Company City & State/Zip Code									
Telephone Number	AC:								
Supervisor's Name:									
May We Call?		/Yes	No /Reason:						
Check One	FT	Reason for Leaving (BE SPECIFIC)							
	PT								

(3) Previous Employer/Company's Name				From		To		Starting Salary	Last Salary
				Month	Year	Month	Year		
Company Address				Position Title:		Describe your duties:			
Company City & State/Zip Code									
Telephone Number	AC:								
Supervisor's Name:									
May We Call?		/Yes	No /Reason:						
Check One	FT	Reason for Leaving (BE SPECIFIC)							
	PT								

For additional Employment History, please attach a resume or separate sheets of paper (your name must be on each sheet)
(If this application has been downloaded from the City's Web Page – make sure this is all on Page 3 ONLY)



CITY OF COLUMBIA REPORTING FORM

ALL APPLICANT'S MUST COMPLETE THE FOLLOWING SECTIONS OF THIS REPORTING FORM

NAME:				S.S. #:									
	(Print Last Name)	(Print First Name)	MI										

How did you **FIRST** hear about this position? **CHECK OR X ONE** of the following?

<input type="checkbox"/>	1	City's Job Posting (Location):	<input type="checkbox"/>	5	Internet (Site) – Identify:	<input type="checkbox"/>	9	Newspaper – Name of Newspaper:
<input type="checkbox"/>	2	Human Resources Walk-In	<input type="checkbox"/>	6	Job Fair – Identify Where:	<input type="checkbox"/>	10	Referred by – Name:
<input type="checkbox"/>	3	City's Web Site (www.columbiasc.net/jobs)	<input type="checkbox"/>	7	Job Service – One Stop	<input type="checkbox"/>	11	Other – Identify:
<input type="checkbox"/>	4	Employment Agency (Name):	<input type="checkbox"/>	8	Journal/Publication – Name:	<input type="checkbox"/>		

NOTE: The information requested ABOVE is needed to analyze and assure compliance with Federal Equal Employment Opportunity laws, as well as meet the reporting requirements of those laws. **YOUR SIGNATURE IS REQUIRED (SEE BELOW).**

EQUAL EMPLOYMENT OPPORTUNITY REPORTING AND RESEARCH FORM

THIS FORM IS RETAINED IN THE HR/EMPLOYMENT OFFICE FOR RECORD KEEPING PURPOSES ONLY.

SEX (Check or X One):	<input type="checkbox"/>	MALE	<input type="checkbox"/>	FEMALE	DATE OF BIRTH:			-			-		
	<input type="checkbox"/>		<input type="checkbox"/>										

POLICE OFFICER APPLICANTS ONLY:			
Are you 21 Years of age or older?	Yes	No	N/A

All applicants		
Are you 18 years of age or older?	Yes	No

ETHNIC GROUP (Check or X One of the following):

<input type="checkbox"/>	Caucasian (White) Non-Hispanic (W)	<input type="checkbox"/>	Asian or Pacific Islander (AP)
<input type="checkbox"/>	African-American (Black) Non-Hispanic (B)	<input type="checkbox"/>	American Indian or Alaskan Native (AI)
<input type="checkbox"/>	Hispanic (H)	<input type="checkbox"/>	Other:

MISCELLANEOUS: Identify any **REASONABLE ACCOMMODATIONS** that would be needed to perform the essential functions of the position(s) for which you are

NOTE: The information requested above regarding race, color, sex, age, national origin, disability status and reasonable accommodation, for qualified individuals with disabilities, is needed to analyze and assure compliance with Federal Equal Employment Opportunity laws, as well as meet the reporting requirements of those laws. Your cooperation in providing this information is important to the success of our equal employment opportunity and affirmative action programs.

This EEO Reporting and Research Form will be retained in the Human Resources Office with your original application. The Human Resources Office only sends a **copy** of your **application** to the Hiring Authority. The information contained in this form will **not** be used in the hiring or interviewing process and will be available only to authorized personnel for research and evaluation purposes. Refusing to provide this information **will not** subject you to adverse treatment.

TO THE BEST OF MY KNOWLEDGE, THE INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT.

(APPLICANT'S SIGNATURE - IN INK)	Today's Date

HUMAN RESROUCES OFFICE USE ONLY - DO NOT COPY - DO NOT SEND

Have you EVER been convicted of any Criminal Offense (s)? Yes* No (Conviction will not necessarily disqualify you from employment)

Have you EVER been convicted or entered a plea of guilty or no contest to any crime, then you **must** list it. Even if you only paid a fine, forfeited bond, or received a suspended sentence. You must also list any criminal charges currently pending against you. Convictions for Driving Under the Influence or Driving Under Suspension must be listed. **List every conviction since you were 18 years of age or older even if you believe you made restitution, i.e., paid a fine, etc. You MUST list ALL convictions.** Do not list **minor** vehicle violations, such as non-payment of parking tickets or any offense committed **before** your 17th birthday, which was adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense does not disqualify you for employment in all cases. Each case is considered individually, based on a number of factors including the nature of the crime, how long ago the crime and/or release from incarceration occurred, whether a sufficient or satisfactory work record has been established since the crime and/or release from incarceration, and the position applied for. **HOWEVER, failure to disclose ALL criminal CONVICTIONS WILL disqualify you for employment with the City.**

If additional space is needed, please attach a separate sheet of paper.

*** If yes, you MUST provide the following information for ALL CONVICTIONS**

Conviction(s)	Where Convicted/Arresting Authority & City/State	Date (Mo/Yr)	Court Disposition

ATTENTION – READ THIS

The City of Columbia runs a SLED or NCIC check on applicants selected for employment as part of the “Conditional Offer of Employment” process. You need to know that the City will withdraw its “ Conditional Offer of Employment” if the City receives a report that has ANY convictions and you have not listed them above -- **IF IN DOUBT, LIST IT.**

X. REFERENCES

Name	Address / City/State / Zip Code	Phone w/Area Code
1.		
2.		
3.		

XI. SIGNATURES

Authority to Release Information: By my signature, I consent to the release of information to duly authorized officers, agents and/or employees of the City of Columbia, S.C. This may include, but not be limited to, information concerning my past and present work including my official personnel files, attendance records, evaluations, educational records including transcripts, military service, law enforcement records, and/or any personnel record deemed necessary to make inquiries of third parties such as credit bureaus. I further release the organization, educational entity, present and former employers, law enforcement organizations and all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment.

X. (1) - Original Signature:	Date:

Certification of Applicant: By my signature, I affirm, agree and/or understand that all statements on this application or attachments hereto, are true and accurate. Any misrepresentation, falsification, or material omission of information or data on this application or attachments hereto, may result in exclusion from further consideration or, if hired, termination of employment. If I have requested herein that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from such employer prior to beginning work. If employed by the City of Columbia, S. C., I agree to adhere to the City’s Drug Free Workplace policy. I further certify that I have/or I am adhering to all outstanding government student loan commitments.

X. (2) - Original Signature:	Date:

APPLICATIONS WILL REMAIN ACTIVE IN THE HUMAN RESOURCES OFFICE FOR TWO (2) MONTHS FROM THE DATE SUBMITTED.

NOTE: Failure to complete all sections or to sign this application will cause delay or disqualification for employment. (If this application has been downloaded from the City’s Web Page – make sure this is all on Page 4 ONLY)