

FOR RCPL USE ONLY:
 REC. PERS. OFC./AKN. SENT
 DATE: _____ BY: _____
 F.C. SENT
 DATE: _____ BY: _____

RICHLAND COUNTY PUBLIC LIBRARY

An Equal Opportunity Employer

1431 Assembly Street • Columbia, South Carolina 29201

www.myrpl.com Fax: 803-929-3448

APPLICATION FOR EMPLOYMENT

(Please print legibly or type; complete in full)

POSITION APPLIED FOR: _____ VACANCY NO. _____
 (Please indicate job title, location, and vacancy number; please submit a separate application for each job if applying for more than one)

DATE: _____ REFERRED BY: _____
 (How you found out about the position vacancy)

NAME: _____
 (First) (Middle) (Last)

MAILING ADDRESS: _____
 (Number) (Street) (Box or Apartment No.)

 (City) (State) (Zip Code)

PHONE: (Home) _____ (Cell) _____ (Other) _____ E-mail: _____

BEGINNING DATE AVAILABLE IF HIRED _____ SOC. SEC. NUMBER (Last 4 only): XXX-XX-_____

Can you work the job's schedule? (As listed on the vacancy notice)
 Yes No Not Sure Comments: _____

If the job is part-time without a specific schedule listed on the vacancy notice, please list the days and hours you are available: _____

Are you legally eligible for employment in the U.S.? (Proof of U.S. citizenship or immigration status will be required upon employment.)
 Yes No Comments: _____

Can you perform the essential functions of the position applied for, with or without reasonable accommodation?
 Yes No Comments: _____

Are you related to any current employee of the Richland County Public Library?
 Yes No If "Yes" state name and relationship: _____

Have you worked previously for Richland County Public Library?
 Yes No If "Yes" state dates and positions: _____

EDUCATION: (A) List schools attended in order from the most recent to least recent. Include college, technical and trade school, high school and other relevant schools; (B) Show number of years completed (or semesters/quarters); (C) Number of hours/credits completed (estimate if necessary); (D) Courses of study (major, minor, etc.); (E) Degree or diploma received; (F) Did you graduate? (Yes or No).

| (A) School & Address (City & State) | (B) Number of Years Completed | (C) Number of credits | (D) Course of Study (Major, Minor, Etc.) | (E) Indicate Degree, Diploma, or Certificate Received | (F) Did you graduate? (Yes or No) |
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Please describe any relevant specialized training, apprenticeship, skills, extra-curricular activities, and honors related to the above schools: _____

Do you have typing or keyboarding proficiency? (If relevant) Yes No #WPM _____
 Do you have a valid Driver's License and safe driving record? (If required) (Record and documentation will be required for some jobs.) Yes No N/A Comments: _____

ANALYSIS SURVEY FOR AFFIRMATIVE ACTION

(Please complete and return either with or separately from application.)

Upon receipt, this form is separated and not part of the selection process.

Government agencies require us to give them periodic reports on the demographics of applicants. This survey is for statistical analysis related to affirmative action only and will be kept in a confidential file separate from the application for employment. Submission of this information by the applicant is VOLUNTARY. This will not be used in considering your application. Your completion of this form is needed to make the survey response as accurate as possible.

DATE _____
 POSITION & VACANCY # APPLIED FOR (Because this sheet is not used in consideration of your application, you should be sure to also write the position and vacancy number applied for on the main application form) _____

CHECK ONE: Male Female

CHECK ONE OF THE FOLLOWING: (Race/ethnic categories as listed by EEOC Form 164)

White Black Hispanic American Indian/Alaskan Native Asian/Pacific Islander Other _____

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List most recent employment first, then earlier jobs in reverse order; use additional sheet if necessary.

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|---|---|--------------------------------------|------------|--------|
| 1 | EMPLOYER & LOCATION | JOB TITLE | DATES FROM | TO |
| | DUTIES/WORK PERFORMED | | | |
| | SUPERVISOR (Name, title & phone number) | REASON FOR LEAVING OR WANTING CHANGE | | SALARY |
| 2 | EMPLOYER & LOCATION | JOB TITLE | DATES FROM | TO |
| | DUTIES/WORK PERFORMED | | | |
| | SUPERVISOR (Name, title & phone number) | REASON FOR LEAVING OR WANTING CHANGE | | SALARY |
| 3 | EMPLOYER & LOCATION | JOB TITLE | DATES FROM | TO |
| | DUTIES/WORK PERFORMED | | | |
| | SUPERVISOR (Name, title & phone number) | REASON FOR LEAVING OR WANTING CHANGE | | SALARY |

We may contact employers listed above unless you indicate here those you do NOT want us to contact: _____
MILITARY: Please list any relevant information about your military background, training and/or status, if not included in above under "Work Experience": _____
OTHER INFORMATION: Please list OTHER relevant special skills and qualifications (you may include computer skills/knowledge, word processing, foreign languages, other skills, licenses, certificates, education, volunteer activities, etc.) and any OTHER information you want us to know, not already listed: _____

NAME: Please indicate if any of your educational or employment records are under a different last name: _____

REFERENCES: List three persons who know the most about your qualifications and work. List name, address, telephone, how they know you (i.e., "supervisor", "employer", "teacher" etc.) and how we may contact them.

1. _____
2. _____
3. _____

* I hereby certify that all answers and information given by me on this application, in accompanying documents, résumés, transcripts, or in interview(s)
 * are true and complete to the best of my knowledge. I understand and agree that any falsification, omission, or misrepresentation may result in my being
 * disqualified from consideration or dismissed from employment. I authorize and release RCPL to check all references and to thoroughly investigate and
 * discuss the information I have provided with anyone it deems appropriate. I further authorize RCPL to receive relevant employment records, school
 * records, driving records, criminal reports, credit reports, and any other information necessary to my employment. I understand that E-Verify and like
 * databases may be used to confirm my employment eligibility. I agree to submit to any specified physical examination or drug tests, after a conditional
 * offer of employment and during my employment. I also agree to abide by all rules, regulations, and policies of RCPL. I understand that parking is
 * not provided to employees. I understand that all employees are employed at will and may be terminated at any time, without notice, for any or no
 * reason, and that I may quit at any time, for any or no reason. I understand that no RCPL documents or representations constitute a contract of
 * employment. This application creates no contractual obligation and does not alter recipient's at-will relationship; RCPL reserves the right to amend, alter, and
 * make exceptions; no statements by employee, officer, or agent of RCPL can contradict this disclaimer.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

Richland County Public Library is an EQUAL OPPORTUNITY EMPLOYER. All applicants are considered for employment without regard to race, color, religion, sex, age, national origin, handicap, or veteran status. No question on this application or in any interview is used for the purpose of limiting or excluding any applicant's consideration on any basis prohibited by federal, state or local law.

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| FOR RCPL USE ONLY: INTERVIEWED BY: _____ FOR VACANCY: _____ DATE: _____ |
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| POSITION _____ EMPLOYMENT BEGINS _____ HOURS _____ BEGINNING SALARY _____ COMMENTS _____ |
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