



TRINITY EDUCATION COMMUNITY AND CONFERENCE CENTER (TECCC)
2523 RICHLAND STREET ♦ COLUMBIA, SC 29204 ♦ (803)931-3994
"MAKING A DIFFERENCE IN THE COMMUNITY IN WHICH WE LIVE"

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS TO APPLICANT: Please type or print legibly in ink. Incomplete applications will not be accepted. Application must be signed by the applicant. A resume may be attached but not substituted for completing the application. All applications will be referred to the department where the vacancy is located.

DATE: _____ POSITION APPLIED FOR: _____

PERSONAL DATA

SOCIAL SECURITY NO. _____ DATE OF BIRTH (MM/DD/YYYY) _____

NAME _____
LAST FIRST MI

MAILING ADDRESS: _____

CITY STATE ZIP CODE

TELEPHONE: HOME _____ CELL _____ Work _____

MAY WE CALL YOU AT WORK? Yes ___ NO ___

ARE YOU AUTHORIZED TO WORK IN THE U.S.? YES ___ NO ___ PERMIT NO. _____

DO YOU POSSESS A VALID DRIVER'S LICENSE? YES ___ NO ___

DRIVER'S LICENSE NO. _____ STATE ISSUED _____

HAVE YOU PLED NO CONTEST OR BEEN CONVICTED OF A CRIME OTHER THAN MINOR TRAFFIC VIOLATION (I.E. PARKING TICKET)? YES ___ NO ___

If yes, please explain to include whether convicted: _____

AVAILABILITY

PLEASE SELECT THE DAYS OF THE WEEK YOU ARE AVAILABLE TO WORK: M TU WE TH FR SAT SU

HOURS AVAILABLE FOR WORK (Please include am or pm): _____

EDUCATION: Starting with High School, provide COMPLETE information on all schools attended, including special courses or schools:

| TYPE OF SCHOOL | NAME OF SCHOOL | LOCATION (MAILING ADDRESS) | NUMBER OF YEARS COMPLETED | MAJOR & DEGREE |
|--------------------------|----------------|-------------------------------|---------------------------------|----------------|
| High School | | | | |
| College | | | | |
| | | | | |
| Business or Trade School | | | | |
| | | | | |

CERTIFICATIONS: _____

WORK EXPERIENCE

Title of present or recent position _____ From _____ To _____
 Employer _____ Phone _____
 Address _____
 Manager/Supervisor's Name _____
 May we contact? _____ Hours per week _____ Salary (Weekly, Monthly or Annually) \$ _____
 Reason for Leaving _____
 Duties:

Title of present or recent position _____ From _____ To _____
 Employer _____ Phone _____
 Address _____
 Manager/Supervisor's Name _____
 May we contact? _____ Hours per week _____ Salary (Weekly, Monthly or Annually) \$ _____
 Reason for Leaving _____
 Duties:

Title of present or recent position _____ From _____ To _____
 Employer _____ Phone _____
 Address _____
 Manager/Supervisor's Name _____
 May we contact? _____ Hours per week _____ Salary (Weekly, Monthly or Annually) \$ _____
 Reason for Leaving _____
 Duties:

Title of present or recent position _____ From _____ To _____
 Employer _____ Phone _____
 Address _____
 Manager/Supervisor's Name _____
 May we contact? _____ Hours per week _____ Salary (Weekly, Monthly or Annually) \$ _____
 Reason for Leaving _____
 Duties:

REFERENCES – Provide the name, address and phone number of three people, not relatives, who are familiar with your work:

| NAME | ADDRESS | PHONE NUMBER |
|------|---------|--------------|
| | | |
| | | |
| | | |

APPLICANT CERTIFICATION: *By signing below, I affirm, agree and/or understand all statements on this form are true and accurate; and any misrepresentation or omission of facts may result in exclusion from further consideration and/or, if hired, termination of employment. If I have requested that my present employer not be contacted, I understand an offer of employment may be contingent upon information and verification of other former employers, prior to beginning work. I understand that I may be subject to drug screening. I understand that a criminal background and/or driving record checks may be conducted. I understand, if hired, I will have to work a flexible schedule including extended hours, weekends, and holidays. I understand and agree to these terms.*

 (Signature)

 (Date)