APPLICATION FOR EMPLOYMENT

The Greenville Area Community Foundation is an equal opportunity employer and does not discriminate on the basis of weight, height, race, color, religion, sex, gender, sexual orientation, gender identity, national origin, age, disability, genetic information, marital status, amnesty, status as a covered veteran, or other protected status in accordance with applicable federal, state, and local laws. If you have a disability that impairs your ability to be considered, interviewed, or tested for a position, please let us know what accommodations you may require.

Please complete the entire application and sign the Authorization and Understanding at the end of the application. A paper application is available upon request.

Date of Application _____

Position(s) Applied For _____

Referral Source: ☐ Advertisement ☐ Friend ☐ Relative ☐ Employment Agency
☐ Other _____

If "Friend" or "Relative" is referral source, identify the individual(s). _____

Name _____
LAST FIRST MIDDLE

Address _____
NUMBER STREET CITY STATE ZIP CODE

Email Address

Telephone

Please supply any other names you have used in school or at any previous job.

Are you 18 years of age or older? ☐ Yes ☐ No

Have you filed an application here before? ☐ Yes ☐ No If yes, give date

Have you ever been employed here before? ☐ Yes ☐ No If yes, give date

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Are any of your friends or relatives employed at this Company? ☐ Yes ☐ No

If yes, specify.

Date available for work?

Can you travel if a job requires it? ☐ Yes ☐ No

Have you been convicted of, or pled "no contest," "nolo contendre" or "guilty" to, a crime, excluding routine traffic offenses? ☐ Yes ☐ No

(Do not answer "Yes" to any questions in this section if the charge, plea, or conviction has been expunged. Conviction of a crime does not automatically disqualify you from consideration for employment.)

If yes, describe in detail:

Are there any felony charges pending against you currently? ☐ Yes ☐ No

If yes, describe in detail:

Do you hold any professional licenses or certifications? ☐ Yes ☐ No

If yes, list and describe:

Have you ever had a professional license or certification revoked or suspended? ☐ Yes ☐ No

If yes, list and describe:

Are you currently under investigation by any agency or department concerning any licensure or certification matter?
☐ Yes ☐ No

If yes, list and describe:

EDUCATION

	High School	College/University	Graduate/ Professional
School Name			
Years Attended			
Diploma/Degree/ Certification/Years Completed			

Are you presently attending school, or do you plan on furthering your education? ☐ Yes ☐ No

If yes, specify the courses being taken and estimate the time commitment:

EMPLOYMENT EXPERIENCE

List your last four jobs in order, starting with your most recent employment. Include military service assignments and volunteer activities in which you received relevant job experience. You may exclude organization names that indicate weight, height, race, color, religion, sex, gender, sexual orientation, gender identity, national origin, age, disability, genetic information, marital status, amnesty, status as a covered veteran, or other protected status in accordance with applicable federal, state, and local laws.

Employer	Telephone	Dates Employed
Position	Work Performed	
Reason For Leaving		

Employer	Telephone	Dates Employed
Position	Work Performed	
Reason For Leaving		

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Reason For Leaving		

Are you currently employed? ☐ Yes ☐ No May we contact your current employer? ☐ Yes ☐ No

Are you bound by a continuing confidentiality, intellectual property, non-competition, or other restrictive agreement from your current or former employer? ☐ Yes ☐ No

If yes, list and describe:

_____

_____

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment, military, or other experience.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you able to perform, with or without reasonable accommodation, the functions of the job for which you have applied?

☐ Yes ☐ No

AUTHORIZATION AND UNDERSTANDING

I represent that the answers and information given by me in this application are true and complete. I understand that any incomplete, misleading, or false statements in this application or in an interview can result in immediate disqualification or termination, if hired.

I authorize the Company to verify, both at the time of application and later during my employment, if I am hired, any of the information concerning my background, including, but not limited to, my employment, driving record, education, or criminal history with the appropriate individuals, companies, institutions, or agencies, and I authorize them to release such information as the Company requires, including my prior disciplinary employment record, without any obligation to give me written notice of such disclosure. I also authorize the Company to release any information requested by any of my prospective or subsequent employers without any obligation to give me written notice of such disclosure. I hereby release the Company and them from any liability whatsoever as a result of any such inquiries and disclosures. This release from liability does not waive or prohibit an individual from filing a charge of discrimination under the laws enforced by the EEOC. I understand that I may have to provide further information to assist in these investigations, and I may be fingerprinted.

I do not object to signing an employment agreement on confidential information.

I understand and agree that, if I am hired, employment is "at will," and that either I or the Company can terminate my employment and compensation, with or without cause, and with or without notice, at any time. I acknowledge that no representations, either oral or written, have been made to me to the contrary, and that any pre-existing understandings which contradict an "at will" status of employment are canceled. Further, I understand that only the President and CEO has any authority to enter into any agreement for employment for any fixed period of time, or to make any agreement contrary to the foregoing, and that any such agreement must be in writing and signed by the President and CEO and me.

In consideration of my employment, I agree to conform to and be bound by the rules, policies, regulations, and terms and conditions of employment of the Company as they exist or are, from time to time, changed. Also, I agree not to begin any claim, action, or lawsuit relating directly or indirectly to employment with the Company or the termination of such employment more than six (6) months after the event complained of (except that a charge filed with the EEOC may be filed within the agency's 300-day period). I waive any statute of limitations to the contrary. However, I agree that any shorter statute of limitations remains in effect. This shortened period of limitations shall apply to any claim, action, or lawsuit against Company, its parent, subsidiaries, affiliates, successors and assigns, and its/their current or former employees, members, directors, officers, or agents ("Affiliated People").

I KNOWINGLY AND VOLUNTARILY WAIVE ALL RIGHTS TO TRIAL BY JURY OF ALL CLAIMS AND DISPUTES BETWEEN ME AND THE COMPANY/ITS AFFILIATED PEOPLE.

I agree that, if hired, all communications and stored information on any computer, telephone, or other electronic system supplied or paid for by the Company are the property of the Company. I understand that I will have no expectation of privacy in such communications and information, and I consent to Company's retrieval and monitoring of all such communication and information.

This application for employment shall be considered active for sixty (60) days. If I wish to be considered for employment after that time period, I understand that I must inquire at that time whether or not applications are being accepted.

My signature below indicates that I have read, understand, and agree to the above paragraphs.

Signature: Date: