

**JOINT MUNICIPAL WATER AND SEWER COMMISSION**

**Application for Employment**

PO BOX 2555; LEXINGTON, SC 29071

FAX: 359-6553

EEO EMPLOYER

**EMPLOYMENT POLICIES**

**Direct Deposit of Pay**

Date:				
Last Name:		First	Middle	Known by any other name?
Address:		City and State:		Zip Code: Phone:
Applying for Position:	First	Second	Date Available	Expected Salary (1) (2)
Work Status Desired:	Full Time ( )		Part Time ( )	Hours Avail:
Overtime ( ) yes ( ) no	Weekends ( ) yes ( ) no		Transportation Available? ( ) yes ( ) no	
Have you ever been employed by the Joint Municipal Water and Sewer Commission (JMWSC)? ( ) yes ( ) no				
If yes, show dates and department:				
Are you legally eligible for employment in the United States?  ( ) yes ( ) no		Have you ever been convicted or pled guilty or nolo contendere of/to a crime other than a minor traffic violation? ( ) yes ( ) no If yes, explain charge(s), date(s), disposition(s): ( <i>Conviction is not an automatic elimination from employment consideration</i> )		
List three references who are not related to you or who have supervised you in a previous position:				
Name	Address		Occupation	Phone Years Known
1.				
2.				
3.				
Do you have a valid SC Driver's License? ( ) yes ( ) no If yes # _____ Class II ( ) yes ( ) no Class III ( ) yes ( ) no				
Have you been in the Armed Forces? ( ) yes ( ) no If yes, Branch of Service _____ Dates of Duty _____ Discharge Rank _____ List duties, including special training _____				
Schools Attended	Name and Address of School		Dates Attended	Graduated with Diploma/Degree Major Circle Years Completed
High School				( ) yes ( ) no 1 2 3 4 5 6 7 8 9 10 11 12
College				( ) yes ( ) no 1 2 3 4
Post Graduate				( ) yes ( ) no 1 2 3 4
Technical Business/Other				( ) yes ( ) no
Skills: Typing ( ) yes _____wpm ( ) no Shorthand ( ) yes _____wpm ( ) no List other office equipment Dictophone ( ) yes ( ) no Data Entry ( ) yes ( ) no operated _____ Personal Computer ( ) yes ( ) no Word Processing ( ) yes _____wpm ( ) no _____				

**PRE-EMPLOYMENT INFORMATION**

Qualified applicants and employees are treated without regard to race, religion, sex, national origin, age, marital status or handicap.

To help us comply with Federal/State equal employment opportunity recordkeeping, reporting and other legal requirements, please answer questions on the back of this form.

This Pre-Employment Information will be kept in a Confidential File, separate from the attached Employment Application.

**EMPLOYMENT HISTORY**

List present and all past employment, beginning with most recent. If necessary, use additional sheets.

Company Name				Street Address				City	State	Zip Code
Dates Employed				Job Title and Duties Performed				Supervisor	Salary	
Start		End		Title: Duties:						
Month	Year	Month	Year					Reason for Leaving:		
Phone:										
May we contact? ( ) yes ( ) no. If no, please explain.										
Company Name				Street Address				City	State	Zip Code
Dates Employed				Job Title and Duties Performed				Supervisor	Salary	
Start		End		Title: Duties:						
Month	Year	Month	Year					Reason for Leaving:		
Phone:										
May we contact? ( ) yes ( ) no. If no, please explain.										
Company Name				Street Address				City	State	Zip Code
Dates Employed				Job Title and Duties Performed				Supervisor	Salary	
Start		End		Title: Duties:						
Month	Year	Month	Year					Reason for Leaving:		
Phone:										
May we contact? ( ) yes ( ) no. If no, please explain.										

**PLEASE READ THE FOLLOWING STATEMENT CAREFULLY AND SIGN**

I hereby affirm that all statements made herein are true and correct. I authorize the Joint Municipal Water and Sewer Commission (JMWSC) to conduct whatever investigation it deems necessary to confirm the statements submitted in this application. I understand that any misstatement or omission of fact on this application shall be sufficient grounds for refusal to hire or dismissal. I also authorize and request each former employer and person, firm or corporation given as reference to answer any and all questions that may be asked and to give any and all information that may be sought in connection with application concerning my work habit, character or skill. I agree to submit myself, upon request, for physical examination by a physician selected by the JMWSC and understand that failure to meet the physical requirements may disqualify me for employment. The use of this application form does not indicate that there are any positions available, and in no way obligates the JMWSC. I understand and agree that if I am employed I may terminate my employment at any time, with or without notice and with or without cause. I understand that the JMWSC has the same right. New hires with JMWSC must agree to utilize the Direct Deposit system. Personal checking/savings accounts may be used, or arrangements will be made with BB&T Bank to open a checking/savings account for direct deposit.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

<p>I understand that the U.S. Government requires the Joint Municipal Water and Sewer Commission (JMWSC) to verify my Eligibility for U.S. employment and my Identity. I understand that the JMWSC must decline to hire me if I fail to present adequate proof of my eligibility and identity. As evidence of eligibility and identity, the government requires applicants to submit <u>originals</u> of one document from Group A or one document from both Group B and Group C. Please check the evidence you will submit.</p>		
<p><b>GROUP A</b></p> <p>( ) U. S. Passport</p> <p>( ) Certificate of U.S. Citizenship</p> <p>( ) Unexpired foreign passport with unexpired work authorization endorsement of the Attorney General</p> <p>( ) I-551 alien registration receipt card with photo</p>	<p><b>GROUP B</b></p> <p>( ) Social Security Card (Absent no-work endorsement)</p> <p>( ) U.S. birth certificate or certificate establishing U.S. nationality at birth</p> <p>( ) Other document approved by Attorney General authorizing employment by the applicant in the U.S.</p>	<p><b>GROUP C</b></p> <p>( ) State driver's license with photo</p> <p>( ) Other form of state ID with photo</p> <p>( ) Photo ID approved by Attorney</p>