



Tamassee DAR School

Employment Application

_____ 1st Interview
 _____ 2nd Interview
 _____ Hire Date

MD ___ C ___ References 1__ 2__ 3__
 MD ___ R ___ SLED Checks
 MD ___ R ___ Central Registry
 N ___ S ___ Sex Offender Registry
 V _____ DMV Record Check

Approval to Hire: _____
 Lori Bailey, Chief Executive Officer

_____ Date

Name

Position Applied For:	Type of Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Summer <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	Date:
Name of Applicant		
Last	First	Middle
Suffix		
Physical Address (Including, City, State, Zip)		
Mailing Address (Including, City, State, Zip)		
Previous Address (if less than 5 years at current)		
Social Security Number	Telephone (Home)	(Other)
Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	Class:	State Number:

Email Address:

Education

High School attended and location	Highest grade completed	Year Graduated
Technical/Trade School attended and location	No. of years completed	Year Graduated
Degree		
Major subject of specialization		
University/College attended and location	No. of years completed	Year Graduated
Degree		
Major subject of specialization		
Other Educational Training Courses		

Employment History (List present or most recent first)

Name of Employer	Type of Business	Phone	
Address (City, State, Zip)	Department	Your Position	
Duties			
Name and Position of immediate Supervisor			
Date Employed (Day, Mo, Yr)	Date Left (Day, Mo, Yr)	Start Salary	Final Salary
Reason for leaving			
May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Name of Employer	Type of Business	Phone	
Address (City, State, Zip)	Department	Your Position	
Duties			
Name and Position of immediate Supervisor			
Date Employed (Day, Mo, Yr)	Date Left (Day, Mo, Yr)	Start Salary	Final Salary
Reason for leaving			
May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Name of Employer	Type of Business	Phone	
Address (City, State, Zip)	Department	Your Position	
Duties			
Name and Position of immediate Supervisor			
Date Employed (Day, Mo, Yr)	Date Left (Day, Mo, Yr)	Start Salary	Final Salary
Reason for leaving			
May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please read Carefully

An Equal Opportunity Employer

We are an equal opportunity employer and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

I hereby certify that to the best of my knowledge and belief the answers given by me to the foregoing questions and all statements made by me in the application are correct. I hereby apply for employment upon the basis and understanding that such employment may terminate at any time upon notice given to me personally or sent to my last known address.

I consent to Tamassee DAR School obtaining such personal and job-related information as required in connection with this application for employment.

Date

Signature of Applicant

For statistical purposes only, how did you hear about Tamassee DAR School?

Tamassee DAR School

APPLICANT QUESTIONNAIRE

(This questionnaire is intended for Children Services Staff only)

1. Are you over the age of 21? Yes No
2. Are you a high school graduate or do you have a GED? Yes No
3. Do you have a valid South Carolina Driver's License? Yes No
4. Have you ever driven a 15 passenger van day and night? Yes No
5. Do you have the availability to reside in campus housing? Yes No
6. Do you have the skills to instruct and supervise the training of daily living skills?
Ex: maintain clean building, prepare meals for entire cottage, manage cottage laundry - student clothing & cottage linens, model and teach appropriate daily living skills, manage a daily devotional, attend campus events with students, recognize the uniqueness of each individual when teaching daily skills. Yes No
7. Are you able to manage and do you have the necessary skills to maintain accurate and up-to-date cottage records? Ex: cottage fill for each child, daily reports on each child, monthly reports, cottage finances, donation log & thank you notes. Yes No
8. Do you possess good communication and counseling abilities? Ex: communicate effectively, clearly, and positively with students & staff, use positive teaching to improve child behavior, follow guidelines for dealing with student management, communicate openly and completely with follow teaching parent staff, report all medical needs, manage student homework and study time, multiple-task in a positive way. Yes No
9. Do you present yourself as a professional? Ex: attend all meetings and training, always be prompt, promote a positive environment for students and their families, willing to represent Tamassee DAR School in a positive way on and off campus. Yes No

Additional Comments: _____

Applicant's Signature

Date

COPIES REQUIRED:

High School Diploma - GED

Or

Degree - Required

These copies must accompany your application. They are a licensing requirement for consideration for employment.

Thanks for your cooperation.

Jan Honeycutt
Human Resources Department

Tamassee DAR School

SIGNATURE AUTHORIZATION FORM

EMPLOYEE REFERENCE CHECK

I, _____ give Tamassee DAR School my permission to contact any of my previous employers in order to determine consideration of employment with Tamassee DAR School.

Applicants Signature

Date

MOTOR VEHICLE RECORDS CHECK

I, _____ hereby authorize Tamassee DAR School to access my Motor Vehicle Record to verify information regarding employment with Tamassee DAR School.

Applicants Signature

Date

Tamassee DAR School

Authorization Form Criminal Records Check

Type or print clearly using black ink.

Last name

First

Middle

Gender Male Female

Date of Birth (MM/DD/YY)

US Soc. Security Number

Driver License or State ID Number

State

Check here if you do not have a Driver License or State ID card.

I, the undersigned, authorize Tamassee DAR School through the department of Social Services, to conduct a SLED and Central Registry background criminal records check by name and identifiers to determine the existence of any arrest resulting in conviction. I also understand that a State and National Sex Offender check will be completed by SLED and the US Dept of Justice. These results will be sent directly to Tamassee DAR School.

Signature

Date

Tamassee DAR School

DRUG TESTING CONSENT FORM

Everyone has the right to work in an environment that is free of drug and alcohol abuse. Tamassee DAR School, Inc. offers a drug free workplace to its employees. All applicants and employees will be required to submit to a drug-test as a condition of employment. If you are injured on the job, you will be required to submit to a drug test. Drug tests will also be scheduled on a random basis.

Compliance with Tamassee DAR School's substance abuse policy is a condition of employment. The failure or refusal of an employee to cooperate fully, sign any required documents, or submit to any inspection or test will be considered a positive test result and therefore grounds for termination.

I, _____ understand the above information and agree to these conditions. This consent is given pursuant to all State and Federal Privacy Statutes and is a waiver of rights of such test records and results only to the extent of the disclosures in the program.

Employee Signature

Date

Human Resource Witness

Date

