

# SHARE



## SUNBELT HUMAN ADVANCEMENT RESOURCES, INC.

DEPT. OF HUMAN RESOURCES \*254 S. PLEASANTBURG DR. \* GREENVILLE, SOUTH CAROLINA  
MAIL: P.O. BOX 10204 \* GREENVILLE, SC 29603 \* PHONE: 864/269-0700 FAX: 864/295-6151

### APPLICATION FOR EMPLOYMENT

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*NAME OF APPLICANT*

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*POSITION APPLIED FOR*

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*DATE OF APPLICATION (m/d/yyyy)*

**THE EMPLOYMENT RELATIONSHIP BETWEEN SHARE AND ITS EMPLOYEES  
IS AT-WILL AND VOLUNTARY. THIS APPLICATION IS NOT A CONTRACT.**

An application is not active until it is received in the SHARE Department of Human Resources at the location or address shown above. This application will remain active for three months, and will expire at the end of that period.

**NOTICE:** Any person who has been convicted of a crime listed in the Child Day Care Licensing Law [Section 20-7-2700 et seq., SC Code of Laws (1976), as amended], who seeks employment with a licensed facility involved in child care, is guilty of a misdemeanor, and, upon conviction, must be fined not more than five thousand dollars or imprisoned not more than one year, or both.

SHARE is an Equal Opportunity Employer. We do not discriminate on the basis of race, color, sex, marital status, religion, disability, national origin, age, veteran status, political belief, or any other unlawful reason.

Email Address: \_\_\_\_\_

**PERSONAL INFORMATION**

Name (Last, First, Middle)		Date		
Current Address: Street (Note Street Address is required)	Apt. No.	City	State	Zip Code
Permanent Mailing Address, if different from above:		City	State	Zip Code
Phone Number	Alternate or Message Number (Identify, as Neighbor, Friend, etc.)			
If related to anyone in our employ or governing board, state name, relationship & dept.   Referred by:				

**EMPLOYMENT DESIRED**

Position	Date you can start	Min. salary desired per --	Are you employed now? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes:	May we inquire with present employer? <input type="checkbox"/> No <input type="checkbox"/> Yes
Have you ever applied to this agency before? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes: Where? For what position?				

<b>EDUCATION</b>	<b>CHECK HIGHEST GRADE LEVEL COMPLETED</b>	<table border="1" style="display: inline-table; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	1	2	3	4	5	6	7	8	9	10	11	12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>COLLEGE</b>	<table border="1" style="display: inline-table; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>GRADUATE</b>	<table border="1" style="display: inline-table; text-align: center;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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NAME AND LOCATION OF SCHOOL	Dates Attended	Date Graduated	Degree, Diploma, Certificate, Major
High School			
College or University			
College or University (Post-Graduate)			
Vocational or Technical School			
Other Training			

**WORK HISTORY (List last four employers, starting with most recent.) Work history is subject to verification and reference checks.**

WORK DATES	NAME, ADDRESS AND PHONE OF EMPLOYER	Position & Supervisor	Salary	Reason for Leaving
1		Position:	Starting	
		Supervisor:	Ending	
2		Position:	Starting	
		Supervisor:	Ending	
3		Position:	Starting	
		Supervisor:	Ending	
4		Position:	Starting	
		Supervisor:	Ending	

**REFERENCES: List below the names of three persons not related to you, whom you have known at least one year. Complete and current mailing address required.**

NAME & ADDRESS (Include Zip Code)	PHONE NUMBER	BUSINESS	YRS. ACQUAINTED

**SKILLS AND ACTIVITIES**

Describe special job related skills:

Activities:

Describe why you are able to perform this job well:

Have you ever been convicted of a crime?

No

Yes      If Yes, Give Details:

**PLEASE READ BEFORE SIGNING**

This Agency does not discriminate in hiring or employment on the basis of race, color, religion, sex, national origin, age, disability, veteran status, or status within any other protected group. No questions on this application are intended to secure information to be used for such discrimination.

In processing this employment application, this Agency may request a police and/or credit report about you. You have the right to request this Agency to completely and accurately disclose to you the content of those reports. Such a request must be made in writing to the Agency within a reasonable time after you have submitted this application.

By signing your name below, you certify that all statements made by you on this application are true and complete to the best of your knowledge, and that you understand that misrepresentations or omissions may be cause for rejection, or may be cause for subsequent dismissal if you are hired.

**BY SIGNING YOUR NAME BELOW, YOU UNDERSTAND THAT NOTHING CONTAINED IN THIS APPLICATION OR IN THE INTERVIEW PROCESS IS INTENDED TO CREATE AN EMPLOYMENT CONTRACT BETWEEN THE AGENCY AND YOU. SHOULD THIS APPLICATION RESULT IN YOUR EMPLOYMENT, YOU HAVE A RIGHT TO TERMINATE YOUR EMPLOYMENT AT ANYTIME AND FOR ANY REASON, AND THE AGENCY RETAINS A SIMILAR RIGHT.** You further understand that no representative of the Agency other than the Board of Directors has any authority to enter into any agreement with you for any specified period of time or to guarantee some other personal move or benefit. You further understand this entire statement applies to the period prior to or after you may be employed.

***I hereby acknowledge that I have read and understand each of the above statements.***

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (m/d/yyyy)

**FOR OFFICE USE ONLY**

Interviewed by:

Date:

Remarks:

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Neatness

Personality

Ability

Skills Samples	Administered By	Date	Results

References

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Outcome

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