

APPLICATION FOR EMPLOYMENT

The Greenville County Library System (GCLS) is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, ancestry, citizenship, veteran status or physical or mental disability. We assure you that your opportunity for employment depends solely on your qualifications. GCLS participates in E-Verify.

Please complete the application in its entirety. Incomplete applications will not be processed.

PERSONAL			PRINT OR	TYPE USIN	IG BLUE OR	BLACK INK ONLY
Last Name	First Name		Middl	e Initial	Primary Tele	ephone #
Address	City	State	Zip Code		Alternate Te	elephone #
Referred By					Email Addre	255
Select the type of employment	you are seeking: (Check only	one.) ()Full Time ()Pa	rt Time		
Position(s) in which you are inte	erested:					
Location(s) in which you are int	erested: (Check all that apply.) 🗌 Ande	erson Rd 🗌 Aug	usta Rd	Berea	Blue Ridge
Five Forks Fountain Inn	Greer Main Mauld	in 🗌 Pe	Iham Rd 🗌 Simp	osonville	Taylors	Travelers Rest
Are there any days or hours yo	u are unable to work?	⊖No	⊖Yes. Please s	pecify:		
Have you ever interviewed with	n GCLS?	⊖No	⊖Yes. Please lis	st date(s),	job title(s) c	and location(s):
Do you have any relatives emp	loyed by GCLS?	⊖No	OYes. Please lis	st name(s)) and locati	on(s):
Have you ever been discharge	d or asked to resign from a job	? ()No	⊖Yes. Please e	xplain:		
Have you ever been convicted	of a crime against children?	⊖No	⊖Yes. Please ex	plain:		
Date: Nature of 0	Charge: W	here Con	victed:		Status:	
EDUCATION/TRAINING/QUALIF	ICATIONS					
	Name, City, State		Major Studies	Туре	of Degree	Graduated?
High School						_ OYes ONo
College/University						⊖Yes ⊖No
Graduate/Professional						_ ⊖Yes ⊖No
						- ○Yes ○No
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List Any Job-Related or Professional Certifications, Licenses, or other Special Knowledge, Skills, or Qualifications:

TECHNOLOGY EXPERIENCE

General	Microsoft Word	Microsoft Excel	Internet	
PC				
🗌 Мас	OIntermediate OAdvanced	OIntermediate OAdvanced	OIntermediate OAdvanced	
🗌 Email	Most familiar version:	Most familiar version:	Frequently used search engines:	
What operating systems are you familiar with?		Describe any other com	puter skills you have:	
	ces you use to access the internet and ch as eBooks:	I/or digital		

WORK HISTORY

List all positions held, beginning with your most recent position, including all military service. Additional pages and/or a resume may be attached. (This section must be completed in its entirety even if attaching a resume.)

Employed From	Employer Name	Supervisor Name	Supervisor Telephone	e # OPart Time
Employed To	Employer Address		Starting Salary	Ending Salary
Job Title		How many people	did you supervise?	May we contact?
Duties and Respon	nsibilities			
Reason for Leavin	g			

Employed From	Employer Name	Supervisor Name	Supervisor Telephone	e # Part Time
Employed To	Employer Address		Starting Salary	Ending Salary
Job Title		How many peo	ple did you supervise?	May we contact?
Duties and Respo				
	9			

WORK HISTORY (CONTINUED)

Employed From	Employer Name	Supervisor Name	Supervisor Telephone	e #	OPart Time
Employed To	Employer Address		Starting Salary		Full Time Salary
Job Title		How many peo	 ople did you supervise?	-	e contact?
Duties and Respo	nsibilities				0.14
Reason for Leavin	g				
Employed From	Employer Name	Supervisor Namo	Supervisor Telephone	. #	O Part Time
		Supervisor Name		, π	○Part Time○Full Time
Employed To	Employer Address		Starting Salary	Ending	Salarv

Employed To	Employer Address	Starting Salary	Ending Salary
Job Title		How many people did you supervise?	May we contact?
Duties and Resp	onsibilities		
Reason for Leavi	ing		

PROFESSIONAL REFERENCES

List three (3) references who are not relatives that you have known for at least two (2) years. Complete mailing addresses are required.

Name	Address	Telephone #	Email Address
Name	Address	Telephone #	Email Address
Name	Address	Telephone #	Email Address

APPLICATION FOR EMPLOYMENT

The following points are very important. Please read carefully before signing this application.

I understand that information I provide in my application/resume and interview(s) may be checked for accuracy by the Greenville County Library System.

I authorize the Greenville County Library System to make investigations and inquiries of my personal, employment, education and related matters as may be necessary in arriving at its employment decision. I release employers, schools, governmental agencies and persons contacted from all liability in responding to inquiries in connection with my application for employment.

I understand that, depending upon the position for which I am applying, a background investigation of my criminal, credit and/ or driving history may be made. I understand that I have the right to make a written request within a reasonable period of time to receive detailed information about the nature and scope of this background investigation.

Criminal record checks require date of birth, which I will be asked for upon offer of employment. Such an offer will be conditional based on results of the check. I understand all such reports will be held in strictest confidence.

I understand that, if hired, this document shall serve as authorization for the Greenville County Library System to conduct background investigations at any time during my employment period.

I hereby acknowledge that I understand, unless otherwise defined by applicable law, **any employment relationship with the Greenville County Library System is of an "at will" nature, which means that either the employer or employee can terminate the employment relationship at any time with or without cause and with or without notice.** The employment-at-will status of each employee cannot be altered by any oral statement or representation, but can only be changed by a written contract, which must be signed by the Executive Director of the Greenville County Library System.

In the event of my employment, I understand that false or misleading information given in my application, accompanying documents or interview(s) may result in discharge, regardless of the time elapsed after discovery. I also understand that I am required to abide by all rules and regulations of the Greenville County Library System.

CERTIFICATE OF APPLICATION

I, _______, hereby certify that all statements made in this application and any attachments are true. I understand that any misstatement, misrepresentation or omission of facts may be cause for my application not to be considered; or, if I have been employed, may be cause for my immediate dismissal. I authorize the Greenville County Library System or its designee(s) to verify information contained in this application and all attachments. I further authorize anyone having such information to release it.

Date Application Submitted

If submitting application through mail, fax, or hand delivery, please sign/date below prior to submission.

If submitting application through email, please leave this section blank. An authentic signature certifying the application will be required in this section if you are selected for an interview.

Signature of Applicant

Date Application Signed

HOW TO SUBMIT APPLICATION

Email: cquinn@greenvillelibrary.org

Mail: Greenville County Library System, Attn: Human Resources, 25 Heritage Green Place, Greenville, SC 29601 Fax: 864-235-8375

Hand deliver: Library administration at the Hughes Main Library on Heritage Green in downtown Greenville, Monday-Friday,
9:00 a.m. - 5:00 p.m. Branch libraries do not accept applications for employment. Additional information may be found at www.greenvillelibrary.org