

# APPLICATION FOR EMPLOYMENT



RETURN COMPLETED APPLICATIONS TO:

Sumter Habitat for Humanity  
812 South Guignard Drive  
Sumter, SC 29150

## **AT-WILL DISCLAIMER**

**ALL EMPLOYEES OF SUMTER HABITAT FOR HUMANITY ARE EMPLOYED "AT-WILL", MEANING THAT EITHER YOU OR SUMTER HABITAT FOR HUMANITY CAN TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY OR NO REASON, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, SUBJECT TO RESTRICTIONS UNDER ANY APPLICABLE LAW. NOTHING IN ANY OF SUMTER HABITAT FOR HUMANITY'S RULES, POLICIES, HANDBOOK, PROCEDURES OR OTHER DOCUMENTS RELATED TO EMPLOYMENT, INCLUDING THIS EMPLOYMENT APPLICATION AND ITS RELATED DOCUMENTS, CREATES ANY EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT OR ALTERS, IN ANY WAY, THE "AT-WILL" EMPLOYMENT STATUS OF SUMTER HABITAT FOR HUMANITY EMPLOYEES. "AT-WILL" EMPLOYMENT MEANS NO CONTRARY STATEMENT BY ANY HABITAT FOR HUMANITY EMPLOYEE SHALL HAVE ANY FORCE OR EFFECT, UNLESS IT IS IN WRITING, STATES THAT IT IS A "CONTRACT OF EMPLOYMENT," AND IS SIGNED BY THE EXECUTIVE DIRECTOR OF SUMTER HABITAT FOR HUMANITY.**

Sumter Habitat for Humanity provides equal employment opportunities to all employees and applicants for employment without regard to race, color, religion, sex, sexual orientation, gender identity, genetic information, national origin, age, physical or mental disability including pregnancy and childbirth (or related medical conditions, including but not limited to lactation), political affiliation, military service or other non merit based factors.

**Please Print All Responses.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position(s) Applying For: \_\_\_\_\_

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Is this a cell phone? \_\_\_\_\_

Alternate Telephone: \_\_\_\_\_  
Optional

Only U.S. Citizens or Aliens who have a legal right to work in the U.S. are eligible for employment with Sumter Habitat for Humanity. Upon employment, can you provide genuine documentation establishing your identity and eligibility to be legally employed in the United States?  
\_\_\_\_ Yes, \_\_\_\_ No.

On what date would you be available to begin employment? \_\_\_\_\_

## EMPLOYMENT HISTORY

May we contact your present employer? \_\_\_\_ Yes, \_\_\_\_ No.

Please provide an accurate record of your previous full-time and part-time employment, beginning with your most recent employer. Include military and any relevant volunteer experience. Attach additional sheets if needed.

Present or Most Recent Employer:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

Your Job Title: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Describe the work you performed and your basic job responsibilities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your Immediate Supervisor:

Title: \_\_\_\_\_

-----  
Preceding Employer:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

Your Job Title: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Describe the work you performed and your basic job responsibilities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your Immediate Supervisor:

Title: \_\_\_\_\_

Preceding Employer:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Your Immediate Supervisor:

\_\_\_\_\_

Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Describe the work you performed and your basic job responsibilities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Preceding Employer:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Your Immediate Supervisor:

\_\_\_\_\_

Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Describe the work you performed and your basic job responsibilities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Explain any period between jobs.**

**EDUCATION:**

High School \_\_\_\_\_  
Name / City, State \_\_\_\_\_ Diploma? \_\_\_\_\_

College \_\_\_\_\_  
Name / City, State \_\_\_\_\_ Degree \_\_\_\_\_

College \_\_\_\_\_  
Name / City, State \_\_\_\_\_ Degree \_\_\_\_\_

Graduate/Professional \_\_\_\_\_  
Name / City, State \_\_\_\_\_ Degree \_\_\_\_\_

Attach additional sheets if needed.  
Describe your course of study for each school.

**SPECIAL SKILLS AND QUALIFICATIONS:**

Summarize any special skills and qualifications you have.

**ADDITIONAL INFORMATION:**

State any additional information you feel may be helpful in considering your application. Attach additional pages if needed. Do not include any information regarding your race, color, religion, sex, sexual orientation, gender identity, genetic information, national origin, age, physical or mental disability including pregnancy and childbirth (or related medical conditions, including but not limited to lactation), political affiliation or other non merit based factors. Indicate any military experience or training you would like considered with your application for employment.

**REFERENCES:**

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_  
Home / Business Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
How Long Known: \_\_\_\_\_

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_  
Home / Business Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
How Long Known: \_\_\_\_\_

NOTIFICATION:

Please read before signing.

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE AND COMPLETE; I UNDERTAND THAT THE FALSIFICATION, MISREPRESENTATION OR OMMISSION OF FACT ON THIS EMPLOYMENT APPLICATION (OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS) WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

I AUTHORIZE THE INVESTIGATION OF ALL STATEMENTS AND INFORMATION CONTAINED IN THIS EMPLOYMENT APPLICATION. I RELEASE FROM ALL LIABILITY ANYONE SUPPLYING SUCH INFORMATION AND I ALSO RELEASE THE EMPLOYER FROM ALL LIABILITY THAT MIGHT RESULT FROM MAKING AN INVESTIGATION.

IN CONSIDERATION FOR MY EMPLOYMENT, I AGREE TO ABIDE BY THE RULES AND POLICIES OF SUMTER HABITAT FOR HUMANITY, WHICH MAY BE CHANGED, WITHDRAWN, OR ADDED AT ANY TIME, AT THE COMPANY'S SOLE DISCRETION AND WITHOUT NOTICE TO ME.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND HEREBY GRANT PERMISSION TO CONFIRM THE INFORMATION SUPPLIED ON THIS EMPLOYMENT APPLICATION BY ME.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_