

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer: All applicants will receive equal consideration for employment regardless of race, color, age, religion, gender, national origin, marital status, veteran status, the presence of a non-job-related medical condition or disability, or other legally protected status.

PERSONAL DATA

Full Name _____ Today's Date _____

Present Address _____

City _____ State _____ Zip Code _____

Previous Address _____

(if less than three years at current address)

Telephone Number () _____ Social Security Number _____

TYPE OF EMPLOYMENT

For what position(s) are you interested in applying? _____

Type of position: Full-time Part-time Morning Afternoon Evening Other _____

Approximate salary expected: _____ Hours available for work: From _____ to _____

If offered a position, when would you be able to start? _____

APPLICATION EMPLOYMENT AGREEMENT

Thank you for your interest in employment with South Carolina Student Loan. Please read the following agreement and sign your name in the appropriate place. Before submitting your application for employment, please review each section to insure that all areas have been completed properly.

AGREEMENT

I certify that answers given on this form are true, accurate and complete to the best of my knowledge; any false or misleading information may result in my being disqualified for employment or my being discharged once employed.

I authorize South Carolina Student Loan to make such investigations and inquiries of all statements contained in this application for employment as may be necessary in arriving at an employment decision and to investigate and inquire in to my credit and criminal history. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

If accepted for employment, I understand that I will be required to abide by all orders, rules, and regulations of the Employer. I UNDERSTAND THAT NEITHER THIS DOCUMENT NOR ANY OFFER OF EMPLOYMENT FROM THE EMPLOYER CONSTITUTES AN EMPLOYMENT CONTRACT UNLESS A SPECIFIC DOCUMENT TO THAT EFFECT IS EXECUTED BY THE EMPLOYER AND EMPLOYEE IN WRITING, AND THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT REASON, AT ANY TIME AND AT EITHER MY OR THE EMPLOYER'S OPTION. Should my employment be terminated, the Employer may supply, in confidence, to any prospective employer my complete record of active employment with the Employer, with no responsibility in connection therewith attaching to the Employer or any member of its staff.

Signature of Applicant

Date

EDUCATION

Name and location of schools attended	Number of Years Completed	Did You Graduate?	Diploma or Degree Received	Area of Concentration
High School:				
Business or Tech School:				
College or University:				
Post-graduate:				
Other:				

EMPLOYMENT HISTORY

List all previous employers starting with your present or most recent. Include self-employment, summer and part-time jobs. *Please indicate in each employer section the name used during that employment if different from your present name. You may exclude organization names or matters which indicate race, color, religion, gender, national origin, disability or other protected status.

*	From (mo/yr)	To (mo/yr)	Rate of Pay	Supervisor's Name and Title	Reason for Leaving
Employer: _____					
Address: _____					
Telephone: () _____					
Job Title:	Describe Duties:				

*	From (mo/yr)	To (mo/yr)	Rate of Pay	Supervisor's Name and Title	Reason for Leaving
Employer: _____					
Address: _____					
Telephone: () _____					
Job Title:	Describe Duties:				

*	From (mo/yr)	To (mo/yr)	Rate of Pay	Supervisor's Name and Title	Reason for Leaving
Employer: _____					
Address: _____					
Telephone: () _____					
Job Title:	Describe Duties:				

(If you need to include additional employers, attach a separate sheet.)

If you are presently employed, may we inquire with your current employer? Yes No

EMPLOYMENT RECORD

Account for all periods of unemployment of three months or more, from the time you left school to the present. You may exclude matters which indicate race, color, religion, gender, national origin, disability, or other protected status.

From (mo/yr)	To (mo/yr)	State What You Were Doing

SKILLS

Indicate below the skills in which you have had training or experience:

Computer Skills: _____

Other skills that you think qualify you for a position with SCSL: _____

Skills You would like to develop further: _____

PERSONAL REFERENCES

List three personal references. Do not list relatives or previous employers.

Name _____

Address _____

Phone () _____

Occupation _____

Number of years known _____

Name _____

Address _____

Phone () _____

Occupation _____

Number of years known _____

Name _____

Address _____

Phone () _____

Occupation _____

Number of years known _____

PERSONAL QUESTIONNAIRE

Do you have or did you previously have a loan with South Carolina Student Loan ? Yes No

Have you ever defaulted on a student loan? Yes No

Do you know anyone that works at South Carolina Student Loan? Yes No

Name _____ Relationship _____

What source prompted you to apply for a position with South Carolina Student Loan?

- Newspaper advertisement
- Referred by employee Name of employee _____
- Referred by school Name of school _____
- Other Explanation _____

If offered employment, can you provide evidence that you are authorized to work in the U.S.? Yes No
(Proof of citizenship or immigration status will be required upon employment.)

Have you ever been convicted of a felony or a misdemeanor which resulted in imprisonment within the last seven years?

Yes No If yes, please explain _____

(A conviction will not necessarily result in the denial of employment.)

FOR EMPLOYER USE ONLY

Interviewer(s): _____ Date: _____

Remarks: _____

Employment Date: _____ Salary: _____

Classification: _____ Friday Off Schedule: _____

Type of employment FT PT TF TP Other _____

Department: _____ Hours/Week: _____ Supervisor: _____

Approved: _____