

Serving Victims
of Domestic Violence



FAMILY JUSTICE CENTER

of Georgetown
and Horry Counties

Employment Application

We are an Equal Opportunity organization. Applicants for all positions are welcome and will be considered without regard to race, color, religion, national origin, sex, age, sexual orientation, physical or mental disability, or any other basis protected by state, federal or local law. It is the intent of the FJC to comply with all federal, state and local legislation concerning Equal Opportunity.

To help us learn about your experience, abilities and interests, please complete this application as thoroughly as possible.

Personal Information

Name: (Please PRINT or TYPE)		Social Security Number:	Driver's License Number & State:
Address: (Street Number and Name, City, State, Zip Code)		Number of years at present address?	Contact Number:
Previous Address: (Street Number and Name, City, State, Zip Code)		Number of years at previous address?	Birthday:
Email:		Can you submit verification of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you over 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	If volunteering at FJC, do you have a reliable means of transportation to get here? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of a felony, or for child abuse or sex-related crimes? (Do not include marijuana related convictions that occurred more than two years prior to today's date.) <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, then please briefly explain below.			
In case of emergency, please notify:			
Name: _____		Address:- _____	
Home phone number: _____		Cell: _____	
Who you referred you to FJC?			
Name: _____		Telephone: _____	

U.S. Military Service Data

Branch:
List Special Training or Skills:

Position Desired

POSITION desired:	Date available to start:
Are you presently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state your current employment:	
Title/Role:	
Dates of Employment:	
Current Salary:	
Have you ever volunteered with Family Justice Center before? If Yes, when? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Days and Hours Available

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							
Overnight							

Education and Training

School Name, City and State:	Year Graduated or Last Year Attended:	What Degree?
High School:		
College/University:		
College/University:		
Highest Degree Earned:		
Additional Education, Vocational and/or Professional Information such as special areas of research or study, seminars, etc. If you are familiar with a foreign language, please describe your foreign language skills below.		
Professional memberships, certificates or licenses held.		
Skills: (Please choose as many as applicable.)		

My signature below certifies that I have read and understand the foregoing, and, to the best of my knowledge and belief, the information on this form is true and correct.

My signature below also certifies that I agree to a background check (**including, but not limited to SLED, DSS Central Registry and Driver’s License check**), and that I am bound by the terms and conditions stated in this application. This application contains all the understandings and agreements between myself and Family Justice Center of Georgetown and Horry Counties concerning the nature of my employment, if any. I understand and agree that, except as noted above, no person who is either an agent or employee of Family Justice Center of Georgetown and Horry Counties may modify, delete, vary or contradict, whether orally or in writing, the terms and conditions set forth herein.

Applicant Signature: _____ Date of Application: _____