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**Richland County Recreation Commission**  
**Regular Board Meeting Minutes**  
**January 25, 2016**  
**6:00PM**

**Commissioners in Attendance:**

J. Marie Green, Chair  
Barbara Mickens, Vice Chair  
Weston A. Furgess, Jr., Secretary  
Wilbert Lewis  
G. Todd Weiss

**RCRC Staff in Attendance:**

James Brown, III  
Tara Dickerson  
Andrea James  
David Stringer  
Robert Hickman  
Tony Cooper  
Cornelia Watts

**1. Call to Order:**

Chair Green called the meeting to order at 6:00pm and welcomed any special guest.

**2. Adoption of Agenda: (Action)**

**Motion to adopt the agenda made by Commissioner Furgess, second by Commissioner Mickens. Motion approved unanimously by all members present: Green, Furgess, Weiss, Mickens and Lewis.**

**3. Approval of Minutes: (Action)**

**Motion to approve the minutes from the December 21, 2015 Special Call and Regular Board Meetings made by Commissioner Furgess, second by Commissioner Mickens. Minutes approved unanimously by all members present; Green, Furgess, Lewis, Mickens and Weiss.**

**4. Public Input:**

No public input

## **5. Financial Report: (Information)**

Ms. Andrea James reviewed financial reports included in the Board's packet.

Commissioner Weiss questioned damage at LinRick from the flood and Mr. Brown stated that there was no major damage.

Chair Green stated that Commissioner Furgess asked her to attend a Foundation Board meeting Thursday because he is not able to attend and she was under the impression that the Foundation was not functioning with a Board for the last two years and also she understood that the Board of Commissioners appoint two people to serve on the Board.

Ms. James stated that Ms. Green was right and that we had some Board members to leave and the auditor is aware of this and we were not able to have regularly scheduled Board meetings, however in terms of the finances we do have a Board treasurer who oversees the finances. There are two signatures on the check per the bylaws over a certain dollar amount and Lisa Lewis stays in constant contact and can provide any records that you may need in terms of her contact with the Board members that we do have; however this year it is our goal to get the Board up and functioning to make sure we stay in compliance with the Secretary of State and thus far we have remained compliant; the auditor is aware of the Board resignations that we have had. Ms. James stated that yes, there are two Commissioners that have to be appointed to the Board, Mr. Furgess was going to be one and Mr. Latiff use to be the other; we were going to come together and another Commissioner would have to be appointed. Ms. James reported that everything is in order and documented and Lisa Lewis has two new Board members that she has put out to the current Board members to be voted on to come onto the Board so that there can hopefully have a constant quorum. Ms. James stated that the Foundation Board probably would not meet monthly because there is not much activity so the meetings would be quarterly.

Chair Green acknowledged that she understood what Ms. James reported but the Board would like to decide which members will serve on the Foundation Board.

Ms. James stated that this will be fine.

Commissioner Furgess requested the names of the 2 new members coming on Board and he added that he would not be at the meeting Thursday, so please give the names to Chair Green; he also requested names of past and present members.

Chair Green asked Mr. Brown about the alignment of the Foundation on the organizational chart.

Mr. Brown stated that he questioned David about it and it was shown to him on the chart that the Foundation Executive Director is supposed to report to him. Mr. Brown stated that it is confusing because when Mr. Curtis Wilson was here, he was under the impression that the Foundation was reporting to Curtis and there was some discussion between him, Kenya and David to try and find out what happened; we're trying to figure it out. Chair Green asked that Mr. Brown follow-up with her before the meeting on Thursday.

Chair Weiss stated that the Foundation is a 5013C so by definition of laws to attain that number it has to be at arms' length.

Ms. James stated that she is aware of the confusion but since she has been here, the Foundation has not reported to the Executive Director and she does not know if that is the way that it should have been, but she has not been made aware of it.

#### **6. Policy Updates: (Action)**

Ms. David Stringer presented four policies for action: Policy No. S-098 Grievance Procedure Under the Americans With Disabilities Act, Policy No. S-005 Accessibility and Non-Discrimination Policy, Policy No. 050 Dress Code and Personal Appearance and Policy No. 070 Employment of Relatives.

Mr. Stringer stated that the first two policies are new and deal with the Americans With Disabilities Act which is something that we have been working on as an Agency the last several months in preparation for the upcoming CAPRA visit which are required under CAPRA but something we need to have in place regardless. Mr. Stringer reported that with the complaint procedure, Sabrina Collins, Risk Manager, has been designated as ADA coordinator where all complaints will go in the future. Mr. Stringer stated that Ms. Collins has been to training and is ready to assume the role.

**Motion to approve Policy Numbers S-098 and S-005 as set forth by Staff made by Commissioner Weiss, second by Commissioner Furgess. Motion approved unanimously by all members present; Green, Weiss, Furgess, Lewis and Mickens.**

Mr. Stringer stated that at the December meeting there was discussion about Policy No. 070 Employment of Relatives and Chair Green asked Mr. Stringer to do a thorough review of Policy. Mr. Stringer stated that the Policy was approved in June but in light of some issues, Staff is recommending some changes to Policy- adding an Addendum that is the actual wording from the South Carolina State Ethics Act and adding in item 4 referral to the website [Ethics.sc.gov](http://Ethics.sc.gov) for additional information on how to file a claim.

Commissioner Lewis stated that one of the things he has asked for, that he would like to have seen on this policy is an opinion from the Ethics Commission about our policy.

Mr. Stringer stated that he did talk to an attorney at the Ethics Commission and this was part of their advice but he does not have it in writing.

Discussion among Commissioners and Staff with input from Mr. Rick Morgan, Attorney regarding Policy No. 070 Employment of Relatives resulted in tabling the Policy.

**Motion to table Policy No. 070 Employment of Relatives until such time that we can ask the Ethics Commission to make a ruling, second by Commissioner Lewis. Motion carried 4 to 1 abstained Chair Green.**

Commissioner Lewis stated that particularly when you ask that question, the policy would probably be appropriate for everyone except the Executive Director, his issue is with the Executive Director position so make sure they know that this is focus of his concern.

Mr. Stringer presented updates to Policy No. 050 Dress Code and Personal Appearance stating that Chair Green asked that we tighten up the policy by being more detailed.

Commissioner Lewis asked for a summary of what this policy changes from the previous one to how we designate what's appropriate. Tara Dickerson summarized specific changes per the policy. Commissioner Lewis questioned if we anticipate any problems with the policy changes as written interfering with an individual's religious or cultural beliefs. Mr. Stringer and Ms. Dickerson responded with a no.

**Motion to approve Policy No. 050 Dress Code and Personal Appearance made by Commissioner Furgess, second by Commissioner Mickens. Motion approved unanimously by all members present; Green, Furgess, Mickens, Lewis and Weiss.**

#### **7. Bond Construction Update: (Information)**

Mr. Tony Cooper reviewed Bond Projects listed on the Bond Construction Updates included in the Board's package.

Chair Green questioned the funding for Royal Pine to be moved to Kelly Mill and Mr. Cooper explained that Councilwoman Julie Ann Dixon approved moving the funds since no land could be located in her District. Chair Green asked what will the funds be used for and Mr. Brown stated that the funding will be used to upgrading some things at the Kelly Mill Facility and also maybe upgrading the house on the property so that we can use it as a rental.

Commissioner Weiss congratulated Staff on a great job managing the budget for all the projects.

**8. Executive Director Report: (Information-Handout)**

Mr. James Brown reported Agency Updates as outlined on the handout.

**9. Other Business:**

Commissioner Weiss asked everyone to rise for a moment of silence in honor of Mr. James Bridgett.

**Motion to go into Executive Session to discuss a personnel matter made by Commissioner Lewis, second by Commissioner Weiss. Motion approved unanimously by all members present; Green, Weiss, Lewis, Mickens and Furgess.**

**10. Executive Session**

No votes were taken in Executive Session.

**11. Adjournment:**

The meeting adjourned at 7:10pm.

  
J. Marie Green, Chair

Minutes approved on this 21<sup>st</sup> day of March 2016.

## David Stringer

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**To:** Burchstead, Michael  
**Subject:** RE: Nepotism Policy

**From:** Burchstead, Michael [<mailto:mburchstead@ethics.sc.gov>]  
**Sent:** Monday, February 22, 2016 3:39 PM  
**To:** David Stringer  
**Subject:** RE: Nepotism Policy

1. 8-13-700 addresses, among other things, situations in which public officials use their official position to obtain an economic interest for a family member. Causing a family member to be employed is an action that would fall within 8-13-700, and therefore it needs to be addressed in the policy.
2. 2.1 is an extraordinary circumstance exception that is not supported by the Ethics Act. This should be deleted.
3. 2.3 should be deleted as well. Temporary employees themselves may not be employees subject to the Ethics Act. However, if a person caused a family member to be hired as a temporary employee, this could still violate 8-13-700.

Thanks, and let me know if you have any questions.

Michael  
Michael R. Burchstead  
General Counsel  
SC State Ethics Commission  
5000 Thurmond Mall, Suite 250  
Columbia, SC 29201  
(803) 253-4192  
<http://ethics.sc.gov/>

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**Richland County Recreation Commission  
Regular Board Meeting Minutes  
March 21, 2016  
6:00PM**

**Commissioners in Attendance:**

J. Marie Green, Chair  
Barbara Mickens, Vice Chair  
Weston A. Furgess, Jr., Secretary  
George Martin  
Wilbert Lewis  
Thomas Clark  
Joseph B. Weeks

**RCRC Staff in Attendance:**

James Brown, III  
Kenya Bryant  
Tara Dickerson  
Taurus Lewis  
David Stringer  
Robert Hickman  
Bryan Crider  
Tony Cooper  
Kasey Wilson  
Cornelia Watts

**1. Call to Order:**

Chair Green called the meeting to order at 6:03pm and welcomed Mr. James E. Gray and his family to the meeting for a special presentation.

**2. Adoption of Agenda: (Action)**

**Motion to adopt the agenda made by Commissioner Furgess, second by Commissioner Lewis.  
Motion approved unanimously by all members present: Green, Furgess, Lewis, Weeks,  
Mickens, Clark and Martin.**

**3. Approval of Minutes: (Action)**

Motion to approve the minutes with noted correction, from the March 3, 2016 Special Call Board Meeting and January 25, 2016 Regular Board Meeting made by Commissioner Mickens, second by Commissioner Furgess. Minutes approved unanimously by all members present; Green, Furgess, Mickens, Lewis, Clark, Martin and Weeks.

**4. Public Input:**

No public input.

**5. Recognition of Mr. James E. Gray's Contributions to Killian Park:**

Senator John Scott expressed that it was with honor and pleasure that he pay special tribute to a very good friend who he met more than twenty five years ago.

Senator Scott stated that Mr. Gray is being honored and recognized for his extraordinary service he has provided his community.

Senator Scott presented the Resolution.

Senator Scott stated that this Resolution will be archived in the history of South Carolina's S1021; this is a concurrent resolution not a House resolution.

Chair Green read the inscription under Mr. Gray's portrait and thanked Mr. Gray for his service and contributions. The portrait will be hung at Killian Park.

**6. Financial Report: (Information)**

Kasey Wilson, Financial Operations, reviewed financial reports included in the Board's packet.

**7. Policy Updates: (Action)**

David presented Policy No. 6010 After School Programs, Policy No. 025 Career Development, Policy No. 070 Employment of Relatives, Policy No. 6015 Summer Day Camps and Policy No. 6020 Summer Playground Program included in the Board's packet.

Commissioner Lewis commented that he is glad that he insisted on the review from the Ethics Commission and he's also appreciative of the Board supporting the motion to have it go back before the Ethics Commission and they evidently raised the same issues that he raised in terms of the particular aspects of the policy we were considering. Mr. Lewis added that reflecting back to the minutes of that meeting, he requested particularly that this policy be reviewed in light of the role of the Executive Director and was that brought to their attention that as one Board member, I was primarily concerned that the role of the Executive Director is addressed in whatever policy that we bring forth and put in place.

Mr. Stringer stated that yes, it was and it was the reason we were mainly looking at it and we have gone above and beyond in creating a new internal form, whenever a family member is hired or promoted, the form will be completed and reviewed by HR and also the Chief of Staff for approval.

Commissioner Lewis stated for clarity, what you are bringing back before the Board today, indicates that the Ethics Commission supports the language in the policy that talks about on page 1 of 2 Policy 070, "Richland County Recreation Commission employee directly supervises or manages".

Mr. Stringer responded yes they support that, they had no problem with that and it goes on to say not only directly but it also says manages.

Commissioner Lewis inquired, they were fine from the prospective that he asked in terms of the Executive Director being in that same role, that as long as we define that he is not the direct supervisor or manager, and they support this language. David answered yes, this conforms to the Ethics Act.

**Motion to accept Policies 6010, 025, 070, 6015 and 6020 made by Commissioner Furgess, second by Commissioner Mickens. Motion approved unanimously by all members present; Green, Furgess, Mickens, Martin, Weeks, Lewis and Clark.**

**8. Bond Construction Update: (Information)**

Mr. Tony Cooper reviewed Bond Projects listed on the Bond Construction Updates included in the Board's packet.

Commissioner Furgess stated that a couple of years ago at Caughman Road, the community questioned the refurbishing of the tennis courts.

Mr. Cooper reported that under the Bond we did fencing replacement under that project but there were no plans for tennis court resurfacing. Commissioner Furgess asked if there were any plans in the future for the project and Tony stated at this point, not that he is aware of.

Mr. Bryant added that we did St. Andrews last year and looking at Parklane next.

Chair Green asked for a repeat regarding tennis courts.

Mr. Cooper stated that tennis courts were resurfaced at Parklane and Mr. Brown made a correction stating the courts were replaced at St. Andrews and in the near future we will replace the ones on Parklane.

Chair Green questioned if there were any future plans for Caughman Road and Mr. Brown stated that we would have to look at funding in the near future.

**9. Construction Auction List: (Action)**

Mr. Crider reviewed the handout of the Property Management Equipment and Vehicles for auction. Mr. Crider stated that per our policy, he is requesting to send to listed items to South Carolina Surplus Auction.

**Motion to accept the recommendation of Administration for Property Management Equipment and Vehicles for auction made by Commissioner Lewis, second by Commissioner Clark. Motion approved unanimously by all members present; Green, Lewis, Clark, Martin, Mickens, Weeks and Furgess.**

**10. Executive Director Report: (Information-Handout)**

Mr. James Brown reported Agency Updates as outlined on the handout.

Commissioner Lewis questioned a target date for the work to be finished at Pine Grove and Mr. Brown stated by the end of April.

**11. Other Business:**

Ms. Tara Dickerson recapped the 2014-15 Annual Report and The Team Times Newsletter.

**Motion to go into Executive session to discuss a personnel issue made by Commissioner Mickens, second by Commissioner Furgess. Motion approved unanimously by all members present; Green, Furgess, Mickens, Martin, Lewis, Weeks and Clark.**

**12. Executive Session**

Commissioner Furgess stated that no actions were taken in Executive Session.

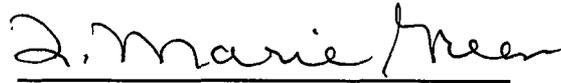
**Motion to come out of Executive Session made by Commissioner Mickens, second by Commissioner Clark. Motion approved unanimously by all members present; Green, Mickens, Clark, Lewis, Furgess, Weeks and Martin.**

Chair Green stated that no decisions were made in Executive Session and a Special Called Meeting has been scheduled for April 4, 2016 at 6:00pm to discuss personnel matter.

**Motion to adjourn made by Commissioner Mickens, second by Commissioner Furgess. Motion approved unanimously by all members present; Green, Furgess, Mickens, Martin, Weeks, Lewis and Clark.**

**13. Adjournment:**

The meeting adjourned at 8:58pm.



J. Marie Green, Chair

Minutes approved on this 18<sup>th</sup> day of April 2016.

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## IMPORTANT NOTICE

NOTHING CONTAINED IN THIS POLICY CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE AND APPROVED BY VOTE OF THE BOARD.



## **Employment of Relatives**

Human Resources  
Policy No. 070

Review Date: March 21, 2016  
Last Revised: June 15, 2015

### Policy Statement

Relatives, Household or Close Family members of current Richland County Recreation Commission employees may not be hired, promoted or reassigned to a position in which the current Richland County Recreation Commission employee directly supervises or manages. This policy is adopted to prevent the appearance of favoritism by a supervisor and to prevent potential safety, security and employee morale issues.

#### **1. Definition of Relative, Household or Close Family Member:**

A relative, Household or Close Family member is an individual who is a spouse, parent, brother or sister (and their spouse or children), child (and their spouse), mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent or grandchild, first cousin, or step-parents or step-children of a current Richland County Recreation Commission employee. Additionally, unrelated associates residing together or otherwise engaged in an apparently romantic relationship (such as a domestic partner, co-habitant or significant other) are treated as being Close Family members for purposes of this policy.

**2. Exceptions:**

**2.1 Recruitment - DELETE**

In the extraordinary circumstance that the Director of Human Resources determines that the Richland County Recreation Commission is unable to recruit a qualified individual to fill a particular position, the Executive Director may grant an exception to this policy.

**2.2 Marriage**

If employees marry, become Household or Close Family members after employment and a conflict of interest or a management problem of supervision, safety, security or morale result (determined at the sole discretion of the Richland County Recreation Commission) or, if a reorganization creates such a conflict, reasonable time may be provided to resolve the matter. If resolution is not possible, the Richland County Recreation Commission may require one or both of the employees to transfer or resign.

**2.3 Temporary Employment - DELETE**

Temporary employees or temporary assignment are not within the purview of this policy.

**3. South Carolina Ethics Act:**

The Richland County Recreation Commission complies with all aspects of the South Carolina Ethics Act as it relates to employment of relatives in Section 8-13-750, and any other applicable Sections. See attached Addendum A.

**4. Additional information**

Additional information regarding the State Ethics Act including how to file a claim can be obtained online at [Ethics.sc.gov](http://Ethics.sc.gov)

ADOPTED BY RICHLAND COUNTY RECREATION COMMISSION BOARD

BOARD MEETING DATE: March 21, 2016  
(Date Approved)

APPROVED: \_\_\_\_\_

## **Employment of Relatives – Addendum A**

Human Resources  
Policy No. 070

Review Date: March 21, 2016  
Last Revised: June 15, 2015

### **1. South Carolina Ethics Act – January 1, 1992. SECTION 8-13-700**

(A) No public official, public member, or public employee may knowingly use his official office, membership, or employment to obtain an economic interest for himself, a family member, an individual with whom he is associated, or a business with which he is associated. This prohibition does not extend to the incidental use of public materials, personnel, or equipment, subject to or available for a public official's, public member's, or public employee's use that does not result in additional public expense.

(B) No public official, public member, or public employee may make, participate in making, or in any way attempt to use his office, membership, or employment to influence a governmental decision in which he, a family member, an individual with whom he is associated, or a business with which he is associated has an economic interest. A public official, public member, or public employee who, in the discharge of his official responsibilities, is required to take an action or make a decision which affects an economic interest of himself, a family member, an individual with whom he is associated, or a business with which he is associated.

### **2. South Carolina Ethics Act – October, 1991. SECTION 8-13-750 Employment, promotion, advancement, or discipline of a family member, of a public official, member, or employee.**

(A) No public official, public member, or public employee may cause or participate in the employment, appointment, promotion, transfer, or advancement of a family member to a state or local office or position in which the public official, public member, or public employee supervises or manages.

(B) A public official, public member, or public employee may not participate in an action relating to the discipline of the public official's, public member's, or public employee's family member.

## David Stringer

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**Subject:** RE: Nepotism Policy

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**Richland County Recreation Commission**  
**Nepotism Policy Checklist/Immediate Family Member Worksheet**

Applicant Name / Immediate Family Member Name: \_\_\_\_\_  
Last First MI

\_\_\_\_\_  
Position

Are you responsible for the decision to hire, or the supervision, direction, evaluation, or salary recommendation of a member of your immediate family listed above?

YES  NO

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

Is an immediate family member responsible for the decision to hire, or the supervision, direction, evaluation, or salary recommendation of a member of your immediate family? If so, please provide the name and relationship of the family member.  YES  NO

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

**I affirm that the above information is true and complete to the best of my knowledge. I accept responsibility for complying with RCRC policies on Nepotism. I assume responsibility for updating this disclosure in the event my situation changes relative to the Nepotism policy.**

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

After signing, please forward to the HR Department

I have reviewed the RCRC Nepotism Policy and the information provided and in my judgment:

- No nepotism exists
- A nepotism concern may exist, but does not appear significant
- A nepotism concern may exist and a written management plan (attached) should be drafted and reviewed regularly
- I recommend the following action:

Signature of HR: \_\_\_\_\_ Date: \_\_\_\_\_

I have reviewed the RCRC Nepotism Policy and the information provided and in my judgment:

- No nepotism exists
- A nepotism concern may exist, but does not appear significant
- A nepotism concern may exist and a written management plan (attached) should be drafted and reviewed regularly
- I recommend the following action:

Signature of COS: \_\_\_\_\_ Date: \_\_\_\_\_

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< CLOSE

HOME RESOURCE

### Regular Pay History

Employer

JB

Brown,  
AACM - Adt  
Home Dept

Show Changes for:  
all

Show as of 10/24/2016

Position

Adult Activity  
Center Manag

Position Start Date  
5/30/2010

Corporate

EFFECTIVE DATE	COMPENSATION..	RATE TYPE	AMOUNT	RATE 2	PAY FREQ..	STAN..	PERCENT CHA..	AMOUNT CHA..	ANNUAL AP
<b>(Current)</b>									
10/01/2015	PAY IN - Pay Incr...	Salary	1,917.70	23.97...	Biweekly		87224	4,000.10	49,860.20
<b>(History)</b>									
07/21/2013	PAY IN - Pay Incr...	Salary	1,763.85	22.04...	Biweekly	8000	150512	5,999.50	45,860.10
05/27/2012	PAY IN - Pay Incr...	Salary	1,533.10		Biweekly	8000	81392	3,000.14	39,860.60
07/01/2011	COST - Cost of L...	Salary	1,417.71		Biweekly	8000	29998	1,073.54	36,860.46
03/06/2011	PAY IN - Pay Incr...	Salary	1,376.42		Biweekly	8000	125841	4,000.10	35,786.92
05/30/2010	NH	Salary	1,222.57		Biweekly	8000	910266	15,146.82	31,786.82
03/19/2010	NH	Hourly	8.0000		Biweekly	8000		16,640.00	16,640.00

Privacy Legal





Enriching Lives &  
Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jeff Brown</b>		2. Job Title: <b>PT Assistant Park Manager</b>	
3. Department Name: <b>Parks Division</b>	4. Job Code: <b>PT</b>	5. Job Grade: <b>N/A</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$8.00</b>	To: <b>\$31,787.70</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Class Code 1 Full-time (1.0 FTE)</b>		
8. Job Code / Title Changes:	New Job Code: <b>545</b>	Salary Class: <b>Exempt</b>	
	New Job Title: <b>Park Manager</b>	New Job Grade: <b>5</b>	
9. Department Change:	Old Dept. Name: <b>Parks Division</b>	New Department Name: <b>Parks Division</b>	
10. Reason for change(s) noted above: <b>Promoted from part time Assistant Park Manager to Park Manager</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>5/30/2010</b> The effective date should coincide with the start date of a payroll period.			

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both**

12. Voluntary or Involuntary? <b>Click Here</b>	13. Effective Date:	14. Proper Notice Given? <b>Click Here</b>
		15. Would you re-employ? <b>Click Here</b>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <b>Click Here</b>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Head Taurus Lewis (please include dept name & telephone number)	<i>Taurus Lewis</i>
Executive Director James Brown (required for pay changes exceeding normal guidelines and terminations)	<i>James Brown</i>
Human Resources Representative	<i>Jiyana White</i>

By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives & Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jeffrey Brown</b>		2. Job Title: <b>Park Manger</b>	
3. Department Name:	4. Job Code: <b>545</b>	5. Job Grade: <b>5</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$31,786.82</b>	To: <b>\$35,786.82</b>	Percentage Increase: <b>13.76%</b>
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	

**D. Reason for change(s) noted above: *Job reclassification/additional duties.***

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: **3/6/2011**  
*Increase / Experience*  
 The effective date should coincide with the start date of a payroll period.

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both**

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>

*For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.*

16. If voluntary resignation, why? If no rehire recommendation, why?

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director	
Division Head	<i>Samuel L. Linn 3/15/11</i>
Assistant Executive Director	<i>Kerisa Bryant 3/15/11</i>
Executive Director	
Human Resources Representative	<i>Keirah Jensen 03/17/11</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.  
 1/2011

**BOARD OF COMMISSIONERS:**

J. Marie Green, Chair  
G. Todd Weiss, Secretary  
C. Todd LaTiff  
Weston A. Furgess, Jr.  
Wilbert Lewis  
George D. Martin, Jr.  
Barbara Mickens



"Enriching Lives, Connecting Communities."

**EXECUTIVE DIRECTOR**

**James Brown, III**  
5819 Shakespeare Road  
Columbia, SC 29223  
Phone: (803) 754-7275  
Fax: (803) 786-2028

Email: [info@rcrc.state.sc.us](mailto:info@rcrc.state.sc.us)  
[www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

**MEMORANDUM**

To: Jeffrey Brown  
From: James Brown, III *SB*  
Executive Director  
Subject: Employment Confirmation  
Date: June 27, 2011

This is to confirm your employment with the Richland County Recreation Commission. Your annual salary for the period of July 1, 2011 – June 30, 2012 with the 3% Cost of Living increase is \$36,860.53.

Employee's Acknowledgment Signature: Jeffrey Brown

Date: 11 July 2011

Please Sign and Return to Keira Session – Human Resources.

**NOTHING CONTAINED IN THIS CONFIRMATION CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT-WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE.**

**CONFIDENTIAL**



Nationally Accredited:  
The Richland County Recreation Commission became South Carolina's first nationally accredited parks and recreation agency in 2006.

Equal Opportunity Statement: The Richland County Recreation Commission is dedicated to the concept of equal opportunity. The Commission will not discriminate on the basis of race, color, religion, sex, age, disability, national origin, or marital status, in its employment practices or in the participation policies for its facilities.



Enriching Lives & Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jeff Brown</b>		2. Job Title: <b>Park Manager</b>	
3. Department Name: <b>Parks</b>	4. Job Code: <b>545</b>	5. Job Grade: <b>5</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$36,860.46</b>	To: <b>\$39,860.46</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	

10. Reason for change(s) noted above: **Pay Increase**

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: [Click Here](#) **05-27-12 DJ**  
 The effective date should coincide with the start date of a payroll period.

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both**

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director	
Department Head	<i>Laura Lunn</i> 6/6/12
Assistant Executive Director	
Executive Director <small>Required for pay changes exceeding normal guidelines and terminations</small>	<i>Jeff Brown</i> 6/6/12
Human Resources Representative	<i>Sandra James</i> 6/7/12

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input checked="" type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jeff Brown</b>		2. Job Title: <b>Park Manager</b>	
3. Department Name: <b>Parks</b>	4. Job Code:	5. Job Grade:	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$0.00</b>	To: <b>\$0.00</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Class Code 2 Regular Part-time</b>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <b>Click Here</b>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name: <b>Blythwood Park</b>	New Department Name: <b>Program Coordinator</b>	
10. Reason for change(s) noted above:			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>09/02/2012</b> The effective date should coincide with the start date of a payroll period.			

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both**

12. Voluntary or Involuntary? <b>Click Here</b>	13. Effective Date:	14. Proper Notice Given? <b>Click Here</b>
		15. Would you re-employ? <b>Click Here</b>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <b>Click Here</b>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director	<i>Louis Arroyo</i>	<b>8/31/12</b>
Department Head	<i>Tawana Lanning</i>	<b>9/4/12</b>
Assistant Executive Director	<i>Cheryl B...</i>	<b>9/4/12</b>
Executive Director <small>Required for pay changes exceeding normal guidelines and terminations</small>	<i>James Brown</i>	<b>9/4/12</b>
Human Resources Representative	<i>Kristal Sessin</i>	<b>09-14-2012</b>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

#### I. Current Information: This section must be completed

1. Employee Name: <b>Jeff Brown</b>		2. Job Title: <b>Program Coordinator</b>	
3. Department Name: <b>Executive</b>	4. Job Code: <b>445</b>	5. Job Grade: <b>5</b>	

#### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: <b>\$39,860.00</b>	To: <b>\$45,860.00</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above: <b>Pay Increase</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>7/21/2013</b> The effective date should coincide with the start date of a payroll period.			

#### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
<b>For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.</b>		
16. If voluntary resignation, why? If no rehire recommendation, why?		

#### IV. Leave of Absence

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

#### V. Signature: & Date

Assistant Executive Director: <i>Kenya Bryant</i>	Date: <i>7/26/13</i>
Executive Director: <i>James Brown</i>	Date: <i>7/26/13</i>
Human Resources Representative: <i>Keirel Sessin</i>	Date: <i>07-26-13</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jeff Brown</b>		2. Job Title: <b>Program Coordinator</b>	
3. Department Name: <b>Executive</b>	4. Job Code: <b>445</b>	5. Job Grade: <b>5</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From:	To:	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Class Code 1 Full-time (1.0 FTE)</b>		
8. Job Code / Title Changes:	New Job Code: <b>405</b>	Salary Class: <b>Exempt</b>	
New Job Title: <b>Program Manager</b>		New Job Grade: <b>6</b>	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above: <b>Job Title Change</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>11/24/2013</b> The effective date should coincide with the start date of a payroll period.			

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both**

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Assistant Executive Director: <i>Kenya V Bryant</i>	Date: 12/02/2013
Executive Director: <i>James Brown III</i>	Date: 12/03/2013
Human Resources Representative: <i>Keriel J. Sessin</i>	Date: 12/02/2013

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input checked="" type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jeffery A. Brown</b>		2. Job Title: <b>Program Manager</b>	
3. Department Name: <b>Facility Operations</b>	4. Job Code: <b>405</b>	5. Job Grade: <b>6</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From:	To:	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Class Code 2 Regular Part-time</b>		
8. Job Code / Title Changes:	New Job Code: <b>405</b>	Salary Class: <b>Exempt</b>	
New Job Title: <b>Manager - Adult Activity Center Parklane</b>		New Job Grade: <b>6</b>	
9. Department Change:	Old Dept. Name: <b>Denny Terrace</b>	New Department Name: <b>Adult Activity Center - Parklane</b>	
10. Reason for change(s) noted above: <b>Restructuring: Job Transfer / Title Change</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>Click Here</b> The effective date should coincide with the start date of a payroll period.			

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both**

12. Voluntary or Involuntary? <b>Click Here</b>	13. Effective Date:	14. Proper Notice Given? <b>Click Here</b>
		15. Would you re-employ? <b>Click Here</b>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <b>Click Here</b>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director	<i>[Signature]</i>	10/21/14
Department Head	<i>[Signature]</i>	10/22/14
Assistant Executive Director	<i>[Signature]</i>	10/22/14
Executive Director <small>(required for pay changes exceeding normal guidelines and terminations)</small>	<i>[Signature]</i>	10/22/14
Human Resources Representative	<i>[Signature]</i>	10/27/2014

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jeffrey Brown</b>		2. Job Title: <b>Program Coordinator</b>	
3. Department Name: <b>Programmin</b>	4. Job Code: <b>505</b>	5. Job Grade: <b>5</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$45,860.10</b>	To: <b>\$49,860.20</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Class Code 1 Full-time (1.0 FTE)</b>		
8. Job Code / Title Changes:	New Job Code: <b>625</b>	Salary Class: <b>Exempt</b>	
New Job Title: <b>Site Manager - AAC</b>		New Job Grade: <b>5</b>	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above: <b>Promotion</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>09/13/2015</b> The effective date should coincide with the start date of a payroll period.			

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both**

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director	<i>[Signature]</i>	9/14/15
Department Head	<i>[Signature]</i>	9/14/2015
Assistant Executive Director	<i>[Signature]</i>	10/19/15
Executive Director	<i>[Signature]</i>	
<small>Required for pay changes exceeding normal guidelines and terminations</small>		
Human Resources Representative	<i>[Signature]</i>	10/19/15

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.

*In Payroll*

16



< CLOSE

HOME RESOURCE

### Regular Pay History

Show Changes for  
all

	EFFECTIVE DATE	COMPENSATION..	RATE TYPE	AMOUNT	RATE 2	PAY FREQ..	STAN..	PERCENT CHA..	AMOUNT CHA..	ANNUAL AMT	
(Current)	06/09/2013	PROMO Promo	Salary	2 692 31 33 65		Biweekly		206897	12,000 04	70,000 06	N
(History)	11/13/2011	PAY IN Pay Incr	Salary	2 230 77		Biweekly	80 00	173135	8,559 88	58,000 02	N
	07/01/2011	COST Cost of L	Salary	1 901 54		Biweekly	80 00	2 9997	1,439 88	49,440 04	N
	01/09/2011	PROMO Promo	Salary	1 846 16		Biweekly	80 00	39 6247	13,622 18	48,000 16	N
	07/01/2009	COST Cost of L	Salary	1 322 23		Biweekly	80 00	2 9999	1,001 26	34,377 98	N
	06/14/2009	PROMO Promo	Salary	1,283 72		Biweekly	80 00	5 0000	1,589 38	33,376 72	N
	03/08/2009	PAY IN Pay Incr	Salary	1,222 59		Biweekly	80 00	16 1297	4,415 06	31,782 34	N
	01/13/2008	PAY IN Pay Incr	Salary	1 052 78		Biweekly	80 00	5 0595	1,318 20	27,372 28	N

Rows Per Page 10 1 - 11

Officer/Owner

Corporate

Business Unit

Benefits Eligibility Class

Home Department  
Full Time Facility/Com

Home Cost Number

Change Reason  
DBLOAD

Privacy Legal



Enriching Lives &  
Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>James A. Brown</b>		2. Job Title: <b>Athletics Coordinator</b>	
3. Department Name: <b>Athletics</b>	4. Job Code: <b>505</b>	5. Job Grade: <b>5</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$34,377.98</b>	To: <b>\$48,000.00</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
	New Job Title: <b>Director of Programming</b>		New Job Grade: <b>7</b>
9. Department Change:	Old Dept. Name: <b>Athletics</b>	New Department Name: <b>Programs</b>	

10. Reason for change(s) noted above: **Promotion**

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: **1/9/2011**  
The effective date should coincide with the start date of a payroll period.

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge): Choose only one, not both**

12. Voluntary or involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
<b>For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.</b>		
16. If voluntary resignation, why? If no retire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director	
Division Head	
Assistant Executive Director	
Executive Director	<i>James Lewis</i>
Human Resources Representative	<i>Kerayla Bryard</i>
	<i>Kerayla Bryard 01/10/11</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.

**BOARD OF COMMISSIONERS:**

Marie Green, Chair  
G. Todd Weiss, Secretary  
C. Todd LaTiff  
Weston A. Furgess, Jr.  
Wilbert Lewis  
George D. Martin, Jr.  
Barbara Mickens



**EXECUTIVE DIRECTOR**

James Brown, III  
5819 Shakespeare Road  
Columbia, SC 29223  
Phone: (803) 754-7275  
Fax: (803) 786-2028  
Email: info@rcrc.state.sc.us  
www.richlandcountyrecreation.com

**MEMORANDUM**

To: James Brown  
From: James Brown, III *J B III*  
Executive Director  
Subject: Employment Confirmation  
Date: June 27, 2011

This is to confirm your employment with the Richland County Recreation Commission. Your annual salary for the period of July 1, 2011 - June 30, 2012 with the 3% Cost of Living increase is \$49,440.16.

Employee's Acknowledgment Signature: \_\_\_\_\_ *[Signature]*

Date: 6-28-2011

Please Sign and Return to Keira Session - Human Resources.

**NOTHING CONTAINED IN THIS CONFIRMATION CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT-WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE.**

**CONFIDENTIAL**



Nationally Accredited:  
The Richland County Recreation Commission became South Carolina's first nationally accredited parks and recreation agency in 2006.

Equal Opportunity Statement: The Richland County Recreation Commission is dedicated to the concept of equal opportunity. The Commission will not discriminate on the basis of race, color, religion, sex, age, disability, national origin, or marital status, in its employment practices or in the participation policies for its facilities



Enriching Lives &  
Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>James A. Brown</b>			2. Job Title: <b>Director, Programming</b>		
3. Department Name: <b>Programming</b>		4. Job Code: <b>250</b>	5. Job Grade: <b>7</b>		

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$49,440.00</b>	To: <b>\$58,000.00</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
	New Job Title:	New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	

10. Reason for change(s) noted above: **Adjustment for Promotion to Director of Programming**

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: **11/13/2011**  
The effective date should coincide with the start date of a payroll period.

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge) - Choose only one, not both**

12. Voluntary or involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director		
Division Head	<i>James Brown</i>	<i>11/24/11</i>
Assistant Executive Director	<i>Keays Bryant</i>	<i>11/18/11</i>
Executive Director	<i>James Brown</i>	
Human Resources Representative	<i>Kenneth Benson</i>	<i>11/22/2011</i>

When approval is e-mailed: By typing my name in the appropriate area above I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input checked="" type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

#### I. Current Information: This section must be completed

1. Employee Name: <b>James A Brown</b>		2. Job Title: <b>Director of Programming</b>	
3. Department Name: <b>Programming</b>	4. Job Code: <b>250</b>	5. Job Grade: <b>7</b>	

#### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: <b>\$58,000.00</b>	To: <b>\$70,000.00</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title: <b>Director of Recreation</b>		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	

D. Reason for change(s) noted above: **New Position With Increased Responsibilities**

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: **06/09/2013**  
The effective date should coincide with the start date of a payroll period.

#### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

#### IV. Leave of Absence

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

#### V. Signatures & Date

Department Director	
Department Head	<i>Layton Lewis 6/5/13</i>
Assistant Executive Director	<i>Kerna Bryant 6/5/13</i>
Executive Director	<i>Gene Brown JR 6/5/13</i>
Human Resources Representative	<i>Kerolyn Seaton 06-11-2013</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.

# James Anthony Brown

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## Summary

Experienced professional skilled in achieving operational efficiency and increasing revenue with over 18 years of experience in the Parks & Recreation industry. Results oriented, decisive leader with proven success in providing programming, external/internal fundraising, and securing sponsorships all while providing a stellar service to the community. Instrumental in developing policies and procedures to improve processes.

## Education

### WEBSTER UNIVERSITY

- Masters of Arts in Management and Leadership June 2016 Columbia, SC
- 3.22 Cumulative GPA

### BENEDICT COLLEGE

- Bachelors of Science in Community Recreation May 2001 Columbia, SC
- Minor in Therapeutic Recreation
- Awarded 4-year Baseball Scholarship

## Work Experience

### RICHLAND COUNTY RECREATION COMMISSION

Director of Recreation May 2013 - Present

- Supervises the athletic department which organizes and oversees all youth and adult leagues.
- Supervises tennis professionals that manage county courts and tennis centers.
- Oversees the Linrick golf course supervisor that manages all staff and course maintenance.
- Plan, organize, and oversee all Kelly Mill Sports Complex operations.  
(Softball/Baseball tournaments, Canteen operations, field maintenance etc.)
- Manages field rentals and all community league field leases.
- Responsible for monitoring and managing the department's budget for programs/events.

Director of Programs Jan. 2011 – May 2013

- Supervised the programming department that manages the operation of all of the after-school and summer camp programs.
- Supervised the adaptive recreation department supervisor that manages all patient day programs, adaptive sports, and summer camps.
- Supervised all community center staff that oversee all facility rentals, and senior programs.

Athletic Coordinator March 2010 – Jan. 2011

- Organized, implemented, and supervised all adult and youth leagues.
- Served as a liaison between RCRC and the community leagues who lease the athletic fields.
- Assisted park staff with in-house programs, camps, and workshops.

**Grant Writer**

Aug 2009 – March 2010

- Gathered documentation and fulfilled necessary requirements of various funding bodies to formally seek funding on behalf of the agency.
- Secured grants for projects, agency improvements, and program scholarships assigned by the Executive Director of the Richland County Recreation Foundation.

**Athletic Compliance Officer**

March 2009 – Aug 2010

- Acted as an independent review and evaluation body to ensure that all external and internal athletic programs are following policies/procedures.
- Ensure that compliance issues with external and internal athletic leagues are being appropriately evaluated, investigated, and resolved.

**Assistant Park Director**

Aug 2002 – March 2009

- Organized, planned, and implemented programs for youth and adults.
- Organized, planned, and implemented community awareness programs.
- Assisted the Park Director with day to day operations.
- Managed facility rental schedules.
- Supervised part-time employees, and managed part-time schedules.

**Accomplishments**

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- Secured a sponsorship from a national brand for 12k annually to be used for mentor groups, program, and athletic sponsorships.
- Established a Golf Tournament that raises between 5k – 7k annually for scholarships and course exposure in addition to donating funds to a pre-selected foundation in an effort to support their awareness.
- Created and implemented a policy change that increased community organization lease revenue over 350% while keeping the fee scale fair and competitive.
- Secured a partnership that provided hot meals for afterschool and summer camp programs.
- Established a volunteer initiative to nourish the agency's volunteer coaches pool to increase quality participation.
- Established a partnership with nationally recognized baseball/softball organizations to bring tournaments to increase hospitality traffic to boost economic growth in Richland County.
- Created a girl's mentor group that operated with a softball foundation that was geared toward helping them create and maintain social relationships while participating in community service projects, workshops, and team bonding activities.

# EMPLOYMENT APPLICATION

**RICHLAND COUNTY RECREATION COMMISSION**  
 5819 SHAKESPEARE ROAD  
 COLUMBIA, SOUTH CAROLINA 29223  
 Phone 754-PARK

POSITIONS APPLIED FOR	DO NOT WRITE IN THIS SPACE
Counselor	

This is your application for employment with the Richland County Recreation Commission. Please prepare it accurately and neatly. Willful falsification of any information may result in rejection of your application or in your dismissal if you are employed by the Recreation Commission.

The Richland County Recreation Commission does not discriminate on the basis of race, sex, national origin, age or handicap.

Date: 5/11/99 (TYPE OR PRINT IN INK)

**A. NAME** BROWN James Anthony  
 (Last) (First) (Middle)

**ADDRESS** [REDACTED] Columbia SC 29223  
 (Number and Street or R.F.D.) (City) (County) (State) (Zip Code)

**Social Security Number** [REDACTED] **Telephone Number (Home)** [REDACTED]

---

**B. State the salary which you are willing to accept** 17.50 **When could you begin work?** 12AP

Check type of employment you would accept: Part-time  Full-time

(Hours Preferred) 8-4

Do you possess a valid S.C. Driver's License? Yes Chauffeur's License? \_\_\_\_\_ Number \_\_\_\_\_

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**C. PRESENT DRAFT CLASSIFICATION:** Have you served in the U.S. Armed Forces? Yes  No

Branch of Service: Army  Navy  Marines  Air Force  Other \_\_\_\_\_

Date Entered \_\_\_\_\_ Date Discharged or Separated \_\_\_\_\_ Type of Discharge \_\_\_\_\_

Highest Rank Attained \_\_\_\_\_

RESERVE STATUS: National Guard  Inactive  Ready Reserve  Standby Reserve  Non-Member

ARE YOU REQUIRED TO ATTEND: Summer Training? Yes  No  Weekly or Monthly Drills? Yes  No

Date Active Reserve Obligation Will End \_\_\_\_\_ Military Branch and Name of Reserve Unit \_\_\_\_\_

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**D. In Case of Emergency Notify** Annie L. Young [REDACTED] [REDACTED] Grandmother  
 (Name) (Address) (Phone) (Relationship)

Have you every been employed by the Richland County Recreation Commission? Yes  No

If yes, dates \_\_\_\_\_

Were you a member of the South Carolina Retirement System? Yes  No

If yes, Retirement Number \_\_\_\_\_

AN EQUAL OPPORTUNITY EMPLOYER

E. Have you ever been convicted of any violation of law other than minor traffic violations? Yes  No

If yes, give details below:

Where Arrested	Date	Nature of Charge	Disposition

F. EDUCATION	Name and Location of School	Course of Study	Years Attended From To	Circle Last Year Completed	Did You Graduate?	Certificate or Degree Received
Elementary	Greenview Elementary School		83 to 89	1 2 3 4 <u>5</u> 6 7 8	Yes No	
High	Alexander High School		92 to 96	9 10 11 <u>12</u>	Yes No	Diploma
Business, Technical or Trade School				1 2 3 4	Yes No	
College		Recreation	96 to Present	1 2 <u>3</u> 4	Yes No	
Graduate School				1 2 3 4	Yes No	
Other Studies					Yes No	

G. PROFESSIONAL CERTIFICATES OR LICENSES

Profession	Date of Current License or Registration	State Issuing License or State in Which Registered	Date of First License or Registration	Check Exam. Reciprocity
				Yes No <input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>

H. List any professional honors, awards, publications, etc.


I. Give details of any special skills, training or apprenticeship Coaching young children, serve meal with kids  
 Indicate types of machines you have operated:  Adding Machine  Bookkeeping Machine  Calculating Machine  Dictaphone  
 Mimeograph  Other Machines (Type) \_\_\_\_\_ Shorthand Speed \_\_\_\_\_ Typing Speed 50 wpm

J. REFERENCES

Give names and addresses of three persons, not relatives, who have known you for at least one year.

Name <u>Vance King</u>	Address <u>1 Quailway Court</u>	Occupation <u>Baseball Coach</u>
Name <u>Vikki Scadden</u>	Address <u>516 Danbury Dr.</u>	Occupation <u>Administrative Asst.</u>
Name <u>Marlene Moten</u>	Address <u>914 Johnsonway Dr.</u>	Occupation <u>Wedding Arranger</u>

K. Have you any objections to this agency making inquiry of your PRESENT employer regarding your character, qualifications, etc.?

Yes  No

Have you ever been discharged or forced to resign for misconduct or unsatisfactory service from any job?  Yes  No

EXPERIENCE: Begin with your present or last job and describe in detail all periods of employment, including self-employment. Include military service and part-time employment. Account for your time during any intervals of unemployment other than those when you were attending school. Use additional sheet if necessary.

Name of Employer <u>Hope Deegan/Nations Bank Control Center</u>	From (Mo.) <u>July</u> (Yrs.) <u>98</u>
Address of Employer _____	To (Mo.) <u>October</u> (Yrs.) <u>98</u>
Your Job Title <u>Point Counter</u>	Full-time <input type="checkbox"/> Part-time <input checked="" type="checkbox"/>
Specific Duties <u>validate check and Billions amounts</u>	Starting Salary <u>\$5.25</u>
_____	Last Salary <u>\$6.00</u>
Reason for Leaving <u>Husband Susan Started</u>	Supervisor's Name <u>Henry B. ...</u>
_____	Title _____
Name of Employer <u>Peggy Wigg</u>	From (Mo.) <u>September</u> (Yrs.) <u>97</u>
Address of Employer _____	To (Mo.) <u>January</u> (Yrs.) <u>98</u>
Your Job Title <u>Sticker</u>	Full-time <input type="checkbox"/> Part-time <input checked="" type="checkbox"/>
Specific Duties <u>stick sleeves</u>	Starting Salary <u>\$5.00</u>
_____	Last Salary <u>\$5.75</u>
Reason For Leaving <u>Still (Real) Down</u>	Supervisor's Name <u>Ernest Belden</u>
_____	Title <u>Store Manager</u>
Name of Employer <u>Michelin Tire Factory</u>	From (Mo.) <u>May</u> (Yrs.) <u>97</u>
Address of Employer _____	To (Mo.) <u>July</u> (Yrs.) <u>97</u>
Your Job Title <u>Bill Machine Worker</u>	Full-time <input checked="" type="checkbox"/> Part-time <input type="checkbox"/>
Specific Duties <u>Ran Rubber through machine &amp; inspect</u>	Starting Salary <u>\$10.00</u>
_____	Last Salary <u>\$10.00</u>
Reason For Leaving <u>Got Sick from turning frames</u>	Supervisor's name <u>Neil Hunter</u>
_____	Title <u>Section Supervisor</u>

A RESUME OF YOUR EMPLOYMENT WILL NOT BE ACCEPTED IN LIEU OF THE ABOVE INFORMATION.

**APPLICANT'S REMARKS**

(List any other information that would be pertinent or helpful.)

I hope to work with kids and I'm sure this job could help me play a role in a child's life. Also I am in the Recreational Program in college this fall I think this job could give me the skill and experience I need in future endeavors.

**CERTIFICATE OF APPLICANT — READ CAREFULLY BEFORE SIGNING**

I hereby certify that all statements made in this application are true, and I agree and understand that any willful misstatements of material facts herein will cause forfeiture on my part of all rights to any employment in this agency. The Richland County Recreation Commission is authorized to request a transcript where necessary to verify my education record and make whatever background investigation necessary for employment purposes. I have no objections to being fingerprinted and having my record cleared through the F.B.I. I further agree to a physical examination if such examination is required as a condition of employment by an agency.

Applicant's Signature

*Laura G. Brown*

Date

5/11/99

**INTERVIEWER'S REMARKS**

Interviewed By

Date

17

Richland County



Recreation  
COMMISSION

5819 Shakespeare Road  
Columbia, SC 29223  
(803) 754-7275

POSITIONS APPLIED FOR	DO NOT WRITE IN THIS SPACE
Counselor	

The Richland County Recreation Commission does not discriminate on the basis of race, sex, national origin, age or handicap.

### EMPLOYMENT APPLICATION

This is your application for employment with the Richland County Recreation Commission. Please prepare it accurately and neatly. Willful falsification of any information may result in rejection of your application or in your dismissal if you are employed by the Recreation Commission.

All qualified applications will be referred to the department where the vacancy is located. That department head is responsible for the review and evaluation of applications and recommending the most qualified applicants to be selected for an interview.

Date: May 18, 2010 (TYPE OR PRINT IN INK)

1. Name Brown Jewel Ariel  
(Last) (First) (Middle)

Address [REDACTED]  
(Number and Street or RFD) (City) (County) (State) (Zip Code)

Social Security Number [REDACTED] Telephone Number (Home) [REDACTED]

2. State the salary which you are willing to accept \$ \_\_\_\_\_ When could you begin work? June 7, 2010

Check type of employment you would accept: Part-Time  Full-Time

Hours Preferred 7:30am - 5:30pm

Do you possess a valid S. C. Driver's License? Yes What class? D Number [REDACTED]

3. Have you served in the U.S. Armed Forces? Yes  No

Branch of Service: Army  Navy  Marines  Air Force  Other \_\_\_\_\_

Date Entered \_\_\_\_\_ Date Discharged or Separated \_\_\_\_\_ Type of Discharge \_\_\_\_\_

Highest Rank Attained \_\_\_\_\_

Reserve Status: National Guard  Inactive  Ready Reserve  Standby Reserve  Non-Member

Are you required to attend: Summer Training? Yes  No  Weekly or monthly drills? Yes  No

Date Active Reserve Obligation Will End \_\_\_\_\_

Military Branch and Name of Reserve Unit \_\_\_\_\_

4. In case of emergency notify Jackie Brown  
(Name) (Address) (Phone)

Relationship to you Mother

Have you ever been employed by the Richland County Recreation Commission? Yes  No

If yes, dates \_\_\_\_\_

Were you a member of the South Carolina Retirement System? Yes  No

If yes, Retirement Number \_\_\_\_\_

Please Print  
Brown  
Jewel

5. Have you pled no contest or been convicted of any violation of law other than minor traffic violations? Yes  No

\*\*If yes, give details below:

Where Arrested	Date	Nature of Charge	State	Disposition/Status

\*\*NOTE: Report criminal offenses including felonies, misdemeanors and summary offenses. EXAMPLES: Driving under the influence of intoxicating beverages, drugs, fraudulent or bad checks, disturbing the peace, leaving the scene of an accident, robbery, etc. Omit minor vehicle violations and any offense committed before your 17<sup>th</sup> birthday, which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not a bar to employment in all cases. The nature, severity and date of the offense in relation to the position for which you are applying are considered. Failure to accurately report offenses will be considered a serious offense by the Recreation Commission and will be grounds for disqualification from consideration and/or termination if employed.

School	Name and Location of School	Course of Study	Years Attended		Circle Last Year Completed	Did you Graduate?		Certificate or Degree Received
			From	To		Yes	No	
Elementary / Middle	Pine Creek / Summit Parkway		12	3 4 5 6 7 8	1 2 3 4	Yes	No	
High	Ridge View		9	10 11 (12)	1 2 3 4	Yes	No	Will graduate June 20
Business, Technical or Trade School					1 2 3 4	Yes	No	
College					1 2 3 4	Yes	No	
Graduate School					1 2 3 4	Yes	No	
Other Studies						Yes	No	

7. Professional Certificate or Licenses

Profession	Date of Current License or Registration	State Issuing License or State in Which Registered	Date of First License or Registration

8. List any professional honors, awards, publications, etc.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Give details of any special skills, training or apprenticeship

Indicate type of machines you have operated  Calculator  Dictaphone  Computer  Heavy Construction Equipment

Light Construction Equipment

List any computer software with which you are familiar Microsoft Word, Excel, Power Point

Shorthand Speed \_\_\_\_\_ Typing Speed \_\_\_\_\_

10. References - Please provide names, addresses and phone number of three people, not relatives, who have known you for at least one year.

Name	Ms. Doris P. Waddell	Address	[Redacted]	Phone	[Redacted]	Occupation	Teacher
Name	Ms. Donya Atwood	Address	[Redacted]	Phone	[Redacted]	Occupation	Human Svcs. Specialist
Name	Mrs. Cynthia Kelly	Address	[Redacted]	Phone	[Redacted]	Occupation	Financial Deputy

11. Have you ever been discharged or forced to resign from any job for misconduct or unsatisfactory service?  Yes  No  
 Have you any objections to this agency making inquiry of your present employer regarding your character, qualifications, etc.? (circle one) Yes  No

EXPERIENCE: Begin with your present or last job and describe in detail all periods of employment, including self employment. Include military service and part-time employment. Account for your time during any intervals or unemployment other than those when you were attending school. Use additional sheet if necessary.

Name of Employer V.V. Reid Dance Program  
 Address of Employer 1005 David St., Col. SC 29203  
 Phone Number of Employer 803-319-3828  
 Your Job Title Assistant Teacher (Dance)  
 Specific Duties Assist dance teacher with ballet classes; help prepare classes for end of year recitals  
 Reason for Leaving \_\_\_\_\_

From (Mo.) \_\_\_\_\_ (Yr.) 2006  
 To (Mo.) \_\_\_\_\_ (Yr.) 2008  
 Full-Time  Part-Time   
 Starting Salary Volunteer  
 Last Salary \_\_\_\_\_  
 Supervisor's Name Ms. Wendi Nance  
 Supervisor's Title Dance Program Director

Name of Employer S.C. Boys + Girls Club  
 Address of Employer 2016 Sumner Street Col. SC 29201  
 Phone Number of Employer 231-3300  
 Your Job Title Jr. Counselor Volunteer  
 Specific Duties Assist with youth participating in summer camp  
 Reason for Leaving Summer Only

From (Mo.) Summer (Yr.) 2006  
 To (Mo.) \_\_\_\_\_ (Yr.) \_\_\_\_\_  
 Full-Time  Part-Time   
 Starting Salary Volunteer  
 Last Salary \_\_\_\_\_  
 Supervisor's Name Mrs. Vanessa Hall  
 Supervisor's Title Camp Director

Name of Employer A+A Youth Community + Learning Center  
 Address of Employer 6920 N. Main St Suite 1 Col. SC 29203  
 Phone Number of Employer 735-7671 or 466-9628  
 Your Job Title Jr. Staff Member  
 Specific Duties Assisting youth camp members field trips; camp activities  
 Reason for Leaving Summer Only

From (Mo.) Summer (Yr.) 2005  
 To (Mo.) \_\_\_\_\_ (Yr.) \_\_\_\_\_  
 Full-Time  Part-Time   
 Starting Salary \_\_\_\_\_  
 Last Salary \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_  
 Supervisor's Title \_\_\_\_\_

**A RESUME OF YOUR EMPLOYMENT WILL NOT BE ACCEPTED IN LIEU OF THE ABOVE INFORMATION**

**EQUAL EMPLOYMENT OPPORTUNITY REPORTING AND PERSONNEL RESEARCH**

NOTE: The information requested in this section is not used to evaluate your application. This information is needed to satisfy equal opportunity reporting and personnel research requirements.

Name Brown Jewel Ariel  
 LAST FIRST MIDDLE  
 Date 5/18/2010

Social Security Number [REDACTED] Sex: Male  Female

Date of Birth 2/3/1992 Age 18

Race (Please check one) White/Non-Hispanic  African American  Asian or Pacific Islander   
 Native American or Alaskan Native  Hispanic

Position applied for Counselor

12. APPLICANTS PLEASE COMPLETE (This tab is detached by the EEO before application is forwarded for review and evaluation.)

13. List any information that you think would be pertinent or helpful. Please use additional sheets if necessary.

I have worked with several summer camps in the past. I have experience working with youth from ages 5-12 as I have volunteered as a cheerleading coach with the Ruth C. Simons Basketball League; volunteered with the S.C. Boys and Girls Club and other programs. I am also an active member of the Youth Ministry at my church where I serve in several leadership roles.

14. CERTIFICATE OF APPLICATION - READ CAREFULLY BEFORE SIGNING

I hereby certify that all statements made in this application are true, and I agree and understand that any willful misstatements of material facts herein will cause forfeiture on my part of all rights to any employment in this agency. The Richland County Recreation Commission (RCRC) is authorized to request a transcript where necessary to verify my education record and make whatever background investigation necessary for employment purposes. I have no objections to being fingerprinted and having my record cleared through the FBI and/or the South Carolina Law Enforcement Division (SLED). I further agree to a physical examination and/or a pre-employment drug-screening test, if such examination is required as a condition of employment by the agency.

I hereby consent to authorized representatives of RCRC contacting any of my former employers or educational institutions that I have attended and any other person or organization they determine may have information concerning my past and present work. I understand this would include my official personnel files, attendance records, background information, evaluations, educational records, military service, law enforcement records and/or any personal records deemed necessary. I also understand RCRC may make inquiries of third parties such as credit bureaus. I further release the organization, educational entity, present and former employers, law enforcement organizations and all third parties from any and all claims, of whatever nature, that I may have, as a result of any inquiry or response to such inquiries, made in connection with my application for employment. I understand that any information obtained by RCRC in the course of those contacts will be treated with the strictest confidence. However, I understand it is not possible to guarantee total confidentiality.

Applicant's Signature

*Paul Gerson*

Date

5/18/10

Interviewer's Remarks

Interviewed By

Date

11. Have you ever been discharged or forced to resign from any job for misconduct or unsatisfactory service?  Yes  No  
 Have you any objections to this agency making inquiry of your present employer regarding your character, qualifications, etc.? (circle one) Yes No  
**EXPERIENCE:** Begin with your present or last job and describe in detail all periods of employment, including self employment. Include military service and part-time employment. Account for your time during any intervals or unemployment other than those when you were attending school. Use additional sheet if necessary.

Name of Employer <u>V.V. Reid Dance Program</u> Address of Employer <u>6005 David St. Col. SC 29920-3</u> Phone Number of Employer <u>317-3828</u> Your Job Title <u>Assistant Teacher</u> Specific Duties <u>Assist dance teacher with ballet classes; help prepare classes for end of year recitals</u> Reason for Leaving _____	From (Mo.) _____ (Yr.) <u>2006</u> To (Mo.) _____ (Yr.) <u>2008</u> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Starting Salary <u>Volunteer</u> Last Salary _____ Supervisor's Name <u>Ms. Wendi Nance</u> Supervisor's Title <u>Dance Program Director</u>
---	--

Name of Employer <u>S.C. Boys + Girls Club of Col.</u> Address of Employer <u>Sumter Street, Col. SC</u> Phone Number of Employer _____ Your Job Title <u>Jr. Counselor Volunteer</u> Specific Duties <u>Assist with youth participating in summer camp</u> Reason for Leaving <u>Summer only</u>	From (Mo.) <u>Summer</u> (Yr.) <u>2006</u> To (Mo.) _____ (Yr.) _____ Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Starting Salary _____ Last Salary _____ Supervisor's Name <u>Mr. Allen Smith, Sr.</u> Supervisor's Title <u>Owner, Director</u>
--	---

Name of Employer <u>A+A Youth Community + Learning Center</u> Address of Employer <u>North Main St., Col. SC</u> Phone Number of Employer _____ Your Job Title _____ Specific Duties _____ Reason for Leaving _____	From (Mo.) <u>Summer</u> (Yr.) <u>2005</u> To (Mo.) _____ (Yr.) _____ Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Starting Salary _____ Last Salary _____ Supervisor's Name _____ Supervisor's Title _____
--	--

**A RESUME OF YOUR EMPLOYMENT WILL NOT BE ACCEPTED IN LIEU OF THE ABOVE INFORMATION**

12. **EQUAL EMPLOYMENT OPPORTUNITY REPORTING AND PERSONNEL RESEARCH**

NOTE: The information requested in this section is not used to evaluate your application. This information is needed to satisfy equal opportunity reporting and personnel research requirements.

Name Brown Jewel 6/7/10  
LAST FIRST MIDDLE

Social Security Number [REDACTED] Sex: Male  Female

Date of Birth 2/3/92 Age 18

Race (Please check one) White/Non-Hispanic  African American  Asian or Pacific Islander   
 Native American or Alaskan Native  Hispanic

Position applied for COLLECTOR

APPLICANTS PLEASE COMPLETE (This tab is detached by the HRD before application is forwarded for review and evaluation.)



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

#### I. Current Information: This section must be completed

1. Employee Name: Jewel Brown		2. Job Title: Counselor
3. Department Name: Programming	4. Job Code: 100015	5. Job Grade:

#### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: \$8.00	To: \$8.00	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code: 100066	Salary Class: <a href="#">Click Here</a>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name: Blythewood Park	New Department Name: Blythewood Park	
10. Reason for change(s) noted above:			

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: 02/19/2012  
The effective date should coincide with the start date of a payroll period

#### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>

**For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.**

16. If voluntary resignation, why? If no rehire recommendation, why?

#### IV. Leave of Absence

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a 5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

#### V. Signatures & Date

Department Director		2-7-2012
Department Head		2/8/12
Assistant Executive Director		2/10/12
Executive Director		
Human Resources Representative		02/10/2012

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jewel Brown</b>		2. Job Title: <b>Counselor</b>	
3. Department Name: <b>Programming</b>	4. Job Code: <b>551</b>	5. Job Grade: <b>N/A</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Schedule/Hours**

6. Salary Change:	From: <b>\$8.00</b>	To: <b>\$9.50</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	

10. Reason for change(s) noted above:

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: **05/27/2012**  
The effective date should coincide with the start date of a payroll period.

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge) - Choose only one, not both**

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director		7/9/12
Department Head		7/9/12
Assistant Executive Director		
Executive Director <small>(required for pay changes exceeding normal guidelines and terminations)</small>		
Human Resources Representative		

When approval is e-mailed, By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current information: This section must be completed**

1. Employee Name: <b>Jewel Brown</b>		2. Job Title: <b>Asst. Director</b>	
3. Department Name: <b>Programming</b>	4. Job Code: <b>100015</b>	5. Job Grade:	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$9.50</b>	To: <b>\$10.50</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above:			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <a href="#">Click Here</a> <b>6/22/14</b> The effective date should coincide with the start date of a payroll period.			

**III. Resignations (Voluntary Discharge) and Termination (Involuntary Discharge): Choose only one, not both**

12. Voluntary or involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehke recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director	<i>Jenetra A. Gooden</i>	<b>6/18/14</b>
Department Head	<i>Raymond Lewis</i>	<b>6/18/14</b>
Assistant Executive Director	<i>Kenya V. Bryant</i>	<b>6/18/14</b>
Executive Director <small>(required for pay changes exceeding normal guidelines and termination)</small>	<i>Jewel Brown</i>	<b>6/18/14</b>
Human Resources Representative	<i>D. P. Stith</i>	<b>7/2/14</b>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives & Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Jewel Brown</b>		2. Job Title: <b>Assistant Director</b>	
3. Department Name: <b>Programming</b>	4. Job Code: <b>554</b>	5. Job Grade: <b>N/A</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$10.50</b>	To: <b>\$11.50</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <b>Non-Exempt</b>	
New Job Title: <b>After School / Summer Camp Director</b>		New Job Grade: <b>N/A</b>	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above: <b>Promotion from Assistant Director to Director</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>05/24/2015</b> The effective date should coincide with the start date of a payroll period.			

**III. Designation (Voluntary Dismissal and Termination/Involuntary Dismissal) - Choose only one, not both**

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signature & Date**

Department Director		
Department Head	<i>Jawana Lewis</i>	5/8/15
Assistant Executive Director	<i>Kenneth V. Bryant</i>	5/8/15
Executive Director	<i>Gina Busur</i>	5/8/15
Human Resources Representative	<i>Debra Shupp</i>	5/15/15

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.

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## EDUCATION

Starting with High School, provide COMPLETE information on all schools attended, including special courses or schools.

	School/Institution and Location	Major/Minor Subject Areas	Graduate	Degree/Diploma
High School or Equivalent	Ridge View High School (Columbia, SC)		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Diploma (2015)
College/Universtiy			Yes ___ No ___	
College/Universtiy			Yes ___ No ___	
College/Universtiy			Yes ___ No ___	
Technical School			Yes ___ No ___	

## SKILLS

DO YOU HAVE PERSONAL COMPUTER/SOFTWARE SKILLS?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
DO YOU HAVE WORD PROCESSING SKILLS? WPM:	YES	<input checked="" type="radio"/> NO
DO YOU HAVE DATA ENTRY SKILLS?	YES	<input checked="" type="radio"/> NO
SUPERVISORY EXPERIENCE/TRAINING?	YES	<input checked="" type="radio"/> NO
TECHNICAL EXPERIENCE/TRAINING?	YES	<input checked="" type="radio"/> NO
MILITARY EXPERIENCE/TRAINING?	YES	<input checked="" type="radio"/> NO

LIST ANY EQUIPMENT, SOFTWARE OR MACHINES, WITH WHICH YOU ARE PROFICIENT, RELATED TO THE POSITION FOR WHICH YOU ARE APPLYING:

Microsoft Office Word, Power Point, Publisher,  
Google Chrome Applications, Web Page Design

LIST ANY PROFESSIONAL LICENSES OR CERTIFICATIONS:

PROFESSION/CRAFT:	CERTIFICATION OR LICENSE NUMBER:	DATE OF CERTIFICATION:	EXPIRATION DATE:
	CPR	February 2014	February 2016

## EMPLOYMENT DATA

TYPE OF EMPLOYMENT YOU WILL ACCEPT:	<u>FULL-TIME</u>	PART-TIME
WILL YOU ACCEPT A POSITION WITH VARYING SHIFTS?	<u>YES</u>	NO
		IF NO, LIST HOURS PREFERRED:
MINIMUM SALARY YOU WILL ACCEPT:	PER	EARLIEST DATE YOU COULD BEGIN WORK: <u>JUNE 2, 2015</u>

## EMPLOYMENT RECORD

List ALL work history starting with your present or last position. List any self-employment, temporary, and military jobs. Account for ALL periods of unemployment. This section must be accurate and complete. If more space is needed, attach additional sheets in the same format, including your name and social security number on each sheet. DO NOT SUBSTITUTE A RESUME FOR AN APPLICATION.

1. Title of present or recent position Jr. Counselor From Month June Year 2014 To Month Aug Year 2014  
 Employer Richland County Recreation Phone (803) 491-9786  
 Address Blythewood Park, Blythewood, SC  
 Supervisor's Name Parris Coles Title Director May we contact? Yes  
 Hours per week \_\_\_\_\_ Salary ( weekly, monthly, annual) \_\_\_\_\_  
 Name on Employment Record if different from present name \_\_\_\_\_  
 Reason for Leaving Summer camp employment  
 Duties Leading summer camp group in daily activities to include sports games, arts & crafts, field trips, tutoring with reading & math, etc.

2. Title of position \_\_\_\_\_ From Month \_\_\_\_\_ Year \_\_\_\_\_ To Month \_\_\_\_\_ Year \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Hours per week \_\_\_\_\_ Salary ( weekly, monthly, annual) \_\_\_\_\_  
 Name on Employment Record if different from present name \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_  
 Duties \_\_\_\_\_

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### EMPLOYMENT RECORD (continued)

3. Title of position \_\_\_\_\_ From Month \_\_\_\_\_ Year \_\_\_\_\_ To Month \_\_\_\_\_ Year \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Hours per week \_\_\_\_\_ Salary (weekly, monthly, annual) \_\_\_\_\_  
 Name on Employment Record if different from present name \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_  
 Duties \_\_\_\_\_

4. Title of position \_\_\_\_\_ From Month \_\_\_\_\_ Year \_\_\_\_\_ To Month \_\_\_\_\_ Year \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Hours per week \_\_\_\_\_ Salary (weekly, monthly, annual) \_\_\_\_\_  
 Name on Employment Record if different from present name \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_  
 Duties \_\_\_\_\_

### PERSONAL REFERENCES

Give name, address and phone number of three personal references.

Name	Address	Phone Number
Fern Wilson	[REDACTED]	[REDACTED]
Cynthia Williams	[REDACTED]	[REDACTED]
Brenda Branic	[REDACTED]	[REDACTED]

Have you ever been asked or forced to resign from any job? Yes \_\_\_\_\_ No   
 If yes, what position and reason, please explain: \_\_\_\_\_

## APPLICATION CERTIFICATION

1. I affirm and/or understand all statements on this form are true and accurate; and any misrepresentation or omission of facts may result in exclusion from further consideration and/ or if hired, termination or employment. If I have requested that my present employer not be contacted, I understand an offer of employment may be contingent upon information and verification of other former employers, prior to beginning work.
2. I agree to conform to the rules and regulations of the Richland County Recreation Commission. According to the State of South Carolina Law, I understand my employment with the Richland County Recreation Commission will be at-will.
3. I hereby consent to authorized representatives of the Richland County Recreation Commission contacting any of my former employers or education institutions that I have attended and any other person or organization they determine may have information concerning my past and present work. I understand this would include my official personnel files, attendance records, background information, evaluations, educational records, military service, law enforcement records and/or any personnel records deemed necessary. I also understand Richland County Recreation Commission may make inquiries of third parties such as credit bureaus. I further release organizations, educational entities, present and former employers, law enforcement organizations and all third parties from any and all claims, of whatever nature, that I may have, as a result of any inquiry or response to such inquiries, made in connection with my application for employment. I understand that any information obtained by Richland County Recreation Commission in the course of those contacts will be treated with strictest of confidence. However, I understand it is not possible to guarantee total confidentiality.
4. I understand and acknowledge that Richland County Recreation Commission requires all applicants who are tentatively selected for employment to submit to and pass a drug test, failure to take the test, failure to cooperate in taking the test, failure to follow test procedures, or testing positive for the use of illegal drugs or substances will result in disqualification from employment.

The drug test will be urinalysis and if the collector of the test sample believes that there is a reasonable possibility that I have or will tamper with or substitute the urine sample, the sample or an additional sample may be collected under conditions in which a person of the same gender of the applicant may witness the collection.

Signature: Jacda A. Brown Date 5/26/15

The Richland County Recreation Commission is sensitive to the needs of qualified applicants and employees with disabilities. The Richland County Recreation Commission is also willing to make reasonable accommodations to assist such applicant and employee.

## EEO STATEMENT

The Richland County Recreation Commission is an equal opportunity employer, and government policy requires that consideration be given to all applicants without regard to race, color, military status, religion, sex, national origin, age, a legally defined disability to a qualified applicant or other status as protected by law.



***RICHLAND COUNTY RECREATION COMMISSION***

*Human Resources Department*

7473 Parklane Road, Columbia, SC 29223

**Phone:** 803-741-RCRC (7272) • **Fax:** 803-741-9288 • **Jobline Website:** [richlandcountyrecreation.com](http://richlandcountyrecreation.com)

***Applications are accepted and applicants are considered for employment without regard to race, color, military status, religion, sex, national origin, age, a legally defined disability to a qualified applicant or other status as protected by law.***



TERMS OF EMPLOYMENT

Name Jada A. Brown SSN [REDACTED]

Date of Employment or Change in Terms June 4, 2015 Department Code 100015

Position Counselor Full-Time [ ] Part-Time [ ] Seasonal [X]

In compliance with Section 41-10-30 of the South Carolina Code of Law, 1976, as amended, you are hereby notified of the terms of your employment:

1. Method of Payment:

[X] Wages \$ 9.00 per hour [ ] Salary \$ \_\_\_\_\_ per year

- 2. Work Hours: [ ] Monday - Friday 10am to 6pm [ ] Monday - Friday 8:30am to 5pm [ ] Monday - Friday 7:00am to 3:30 [ ] Monday - Friday and Saturday 2:00 pm to 9pm and Sunday 9:00am to 2:00pm or 2:00pm to 8:00pm [ ] Monday - Friday and Sunday 1:00 pm to 6:00pm

[X] Other Monday - Friday 8:00am to 6:00pm

3. Payday is bi-weekly. Day of payment is FRIDAY. (Place of payment is facility where employed)

Time of payment is: [X] 3:00 p.m. (Parks Division) [ ] 5:00 p.m. (All others)

- 4. Annual Leave: Full-time employees receive annual leave at a rate of 1 1/4 days per month to be used as vacation or personal time off. Part-time employees and temporary receive no annual leave.
5. Sick Leave: Full-time employees receive 120 hours of sick leave during the calendar year (January 1 to December 31). Sick leave may be taken for personal illness or illness/death in the immediate family. Part-time employees and temporary employees receive no sick leave.
6. Paid Holidays: Paid holidays for full-time employees are the same as provided by South Carolina Law for State employees. Part-time employees and temporary receive no paid holidays.
7. Severance Pay Policy: Full-time employees will receive any unused annual leave balance up to 360 hours at the time of termination. Part-time employees receive no severance pay.

Any changes in these terms shall be made in writing at least seven calendar days before they become effective.

Jada A. Brown 6/4/2015 Employee's Signature Date Dan DeStyler 6/4/15 Employer's Signature Date

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## EDUCATION

Starting with High School, provide COMPLETE information on all schools attended, including special courses or schools.

	School/Institution and Location	Major/Minor Subject Areas	Graduate	Degree/Diploma
High School or Equivalent	Ridge View HS Columbia, SC		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Diploma (2015)
College/University			Yes <input type="checkbox"/> No <input type="checkbox"/>	
College/University			Yes <input type="checkbox"/> No <input type="checkbox"/>	
College/University			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Technical School			Yes <input type="checkbox"/> No <input type="checkbox"/>	

## SKILLS

DO YOU HAVE PERSONAL COMPUTER/SOFTWARE SKILLS?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
DO YOU HAVE WORD PROCESSING SKILLS? <span style="float: right;">WPM:</span>	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
DO YOU HAVE DATA ENTRY SKILLS?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
SUPERVISORY EXPERIENCE/TRAINING?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
TECHNICAL EXPERIENCE/TRAINING?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
MILITARY EXPERIENCE/TRAINING?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>

LIST ANY EQUIPMENT, SOFTWARE OR MACHINES, WITH WHICH YOU ARE PROFICIENT, RELATED TO THE POSITION FOR WHICH YOU ARE APPLYING:

Microsoft Word, Power Point, Publisher,  
Google Chrome Apps

LIST ANY PROFESSIONAL LICENSES OR CERTIFICATIONS:			
PROFESSION/CRAFT:	CERTIFICATION OR LICENSE NUMBER:	DATE OF CERTIFICATION:	EXPIRATION DATE:
	CPR	Feb. 2014	

## EMPLOYMENT DATA

TYPE OF EMPLOYMENT YOU WILL ACCEPT:	<u>FULL-TIME</u>	PART-TIME
WILL YOU ACCEPT A POSITION WITH VARYING SHIFTS?	<u>YES</u> NO	IF NO, LIST HOURS PREFERRED:
MINIMUM SALARY YOU WILL ACCEPT:	PER	EARLIEST DATE YOU COULD BEGIN WORK: <u>June 10, 2015</u>

## EMPLOYMENT RECORD

List ALL work history starting with your present or last position. List any self-employment, temporary, and military jobs. Account for ALL periods of unemployment. This section must be accurate and complete. If more space is needed, attach additional sheets in the same format, including your name and social security number on each sheet. DO NOT SUBSTITUTE A RESUME FOR AN APPLICATION.

1. Title of present or recent position C. Counselor From Month June Year 2011 To Month July Year 2014  
 Employer DCRC Phone (803) 691-9790  
 Address Blythewood Park (206 Boney Rd., Blythewood, SC)  
 Supervisor's Name PAUL LOTS Title Director May we contact? Yes  
 Hours per week \_\_\_\_\_ Salary ( weekly, monthly, annual) \_\_\_\_\_

Name on Employment Record if different from present name \_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
 Duties Providing fun and educational activities for the campers to assist the counselors

2. Title of position \_\_\_\_\_ From Month \_\_\_\_\_ Year \_\_\_\_\_ To Month \_\_\_\_\_ Year \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Hours per week \_\_\_\_\_ Salary ( weekly, monthly, annual) \_\_\_\_\_

Name on Employment Record if different from present name \_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
 Duties \_\_\_\_\_

## EMPLOYMENT RECORD (continued)

3. Title of position \_\_\_\_\_ From Month \_\_\_\_\_ Year \_\_\_\_\_ To Month \_\_\_\_\_ Year \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact? \_\_\_\_\_

Hours per week \_\_\_\_\_ Salary (weekly, monthly, annual) \_\_\_\_\_

Name on Employment Record if different from present name \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Duties \_\_\_\_\_

4. Title of position \_\_\_\_\_ From Month \_\_\_\_\_ Year \_\_\_\_\_ To Month \_\_\_\_\_ Year \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact? \_\_\_\_\_

Hours per week \_\_\_\_\_ Salary (weekly, monthly, annual) \_\_\_\_\_

Name on Employment Record if different from present name \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Duties \_\_\_\_\_

### PERSONAL REFERENCES

Give name, address and phone number of three personal references.

Name	Address	Phone Number
Brenda Branic	[REDACTED]	[REDACTED]
Cynthia Williams	[REDACTED]	[REDACTED]
Jennifer Davis	[REDACTED]	[REDACTED]

Have you ever been asked or forced to resign from any job? Yes \_\_\_\_\_ No

If yes, what position and reason, please explain: \_\_\_\_\_

## APPLICATION CERTIFICATION

1. I affirm and/or understand all statements on this form are true and accurate; and any misrepresentation or omission of facts may result in exclusion from further consideration and/ or if hired, termination or employment. If I have requested that my present employer not be contacted, I understand an offer of employment may be contingent upon information and verification of other former employers, prior to beginning work.
2. I agree to conform to the rules and regulations of the Richland County Recreation Commission. According to the State of South Carolina Law, I understand my employment with the Richland County Recreation Commission will be at-will.
3. I hereby consent to authorized representatives of the Richland County Recreation Commission contacting any of my former employers or education institutions that I have attended and any other person or organization they determine may have information concerning my past and present work. I understand this would include my official personnel files, attendance records, background information, evaluations, educational records, military service, law enforcement records and/or any personnel records deemed necessary. I also understand Richland County Recreation Commission may make inquiries of third parties such as credit bureaus. I further release organizations, educational entities, present and former employers, law enforcement organizations and all third parties from any and all claims, of whatever nature, that I may have, as a result of any inquiry or response to such inquiries, made in connection with my application for employment. I understand that any information obtained by Richland County Recreation Commission in the course of those contacts will be treated with strictest of confidence. However, I understand it is not possible to guarantee total confidentiality.
4. I understand and acknowledge that Richland County Recreation Commission requires all applicants who are tentatively selected for employment to submit to and pass a drug test, failure to take the test, failure to cooperate in taking the test, failure to follow test procedures, or testing positive for the use of illegal drugs or substances will result in disqualification from employment.

The drug test will be urinalysis and if the collector of the test sample believes that there is a reasonable possibility that I have or will tamper with or substitute the urine sample, the sample or an additional sample may be collected under conditions in which a person of the same gender of the applicant may witness the collection.

Signature: Jenei A. Brown Date 5/26/15

The Richland County Recreation Commission is sensitive to the needs of qualified applicants and employees with disabilities. The Richland County Recreation Commission is also willing to make reasonable accommodations to assist such applicant and employee.

### EEO STATEMENT

The Richland County Recreation Commission is an equal opportunity employer, and government policy requires that consideration be given to all applicants without regard to race, color, military status, religion, sex, national origin, age, a legally defined disability to a qualified applicant or other status as protected by law.

Richland County 



*Enriching Lives & Connecting Communities*

***RICHLAND COUNTY RECREATION COMMISSION***

***Human Resources Department***

**7473 Parklane Road, Columbia, SC 29223**

**Phone: 803-741-RCRC (7272) • Fax: 803-741-9288 • Jobline Website: [richlandcountysc.com/recreation.com](http://richlandcountysc.com/recreation)**

***Applications are accepted and applicants are considered for employment without regard to race, color, military status, religion, sex, national origin, age, a legally defined disability to a qualified applicant or other status as protected by law.***



**TERMS OF EMPLOYMENT**

Name Jenai A. Brown SSN [REDACTED]

Date of Employment or Change in Terms June 4, 2015 Department Code 100015

Position Counselor Full-Time  Part-Time  Seasonal

In compliance with Section 41-10-30 of the South Carolina Code of Law, 1976, as amended, you are hereby notified of the terms of your employment:

**1. Method of Payment:**

Wages \$ 9.00 per hour  Salary \$ \_\_\_\_\_ per year

2. **Work Hours:**  Monday – Friday 10am to 6pm  Monday – Friday 8:30am to 5pm  Monday - Friday 7:00am to 3:30
- Monday – Friday and Saturday 2:00 pm to 9pm and Sunday 9:00am to 2:00pm or 2:00pm to 8:00pm  Monday - Friday and Sunday 1:00 pm to 6:00pm

Other Monday – Friday 8:00am to 6:00pm

**3. Payday is bi-weekly. Day of payment is FRIDAY. (Place of payment is facility where employed)**

Time of payment is:  3:00 p.m. (Parks Division)  
 5:00 p.m. (All others)

4. **Annual Leave:** Full-time employees receive annual leave at a rate of 1 ¼ days per month to be used as vacation or personal time off. Part-time employees and temporary receive no annual leave.
5. **Sick Leave:** Full-time employees receive 120 hours of sick leave during the calendar year (January 1 to December 31). Sick leave may be taken for personal illness or illness/death in the immediate family. Part-time employees and temporary employees receive no sick leave.
6. **Paid Holidays:** Paid holidays for full-time employees are the same as provided by South Carolina Law for State employees. Part-time employees and temporary receive no paid holidays.
7. **Severance Pay Policy:** Full-time employees will receive any unused annual leave balance up to 360 hours at the time of termination. Part-time employees receive no severance pay.

Any changes in these terms shall be made in writing at least seven calendar days before they become effective.

Jenai A. Brown 6/4/15  
Employee's Signature Date

[Signature] 6/4/15  
Employer's Signature Date

20



Receipt @ Tech Center  
PT \$10

### APPLICATION FOR EMPLOYMENT RICHLAND COUNTY RECREATION COMMISSION

Human Resources Department  
5819 Shakespeare Road  
Columbia, SC 29223

Ph: 803-754-7275 . Fax: 803-786-2028 . Website: [www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

DATE: 12 9 10

POSITION APPLIED FOR: T.C. Administrative Assistant

#### INSTRUCTIONS TO APPLICANT

Please type or print in ink all information except signature. Incomplete applications will not be accepted. Applications must have all sections completed and the form signed by the applicant. A separate application must be completed for each vacancy. A resume may be attached but must not be substituted for completing the application. All qualified applications will be referred to the department where the vacancy exists. The department head is responsible for the review and evaluation of applications and recommending the most qualified applicants to be selected for an interview. Applications will remain active until the vacancy is filled. If you wish to remain informed of positions available at the Richland County Recreation Commission, please visit our website at [www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com).

Thank you for your interest in the Richland County Recreation Commission.

#### PERSONAL DATA

NAME (Last, First, MI) <u>Brown, Tiffani L</u>		
LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER: XXX-XX- <u>[REDACTED]</u>		
MAILING ADDRESS: <u>[REDACTED]</u>		
CITY: <u>Columbia</u>	STATE: <u>SC</u>	ZIP CODE: <u>29206</u> COUNTY: <u>Richland</u>
HOME PHONE # <u>[REDACTED]</u>	CELL PHONE <u>[REDACTED]</u>	Email: <u>[REDACTED]</u>
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
DO YOU HAVE RELATIVES EMPLOYED BY THE RICHLAND COUNTY RECREATION COMMISSION? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
IF YES, NAME(S) / RELATION: <u>James Brown III (father) James A. Brown (brother)</u>		
WHAT DEPARTMENT(S): <u>Clerk</u>		
DO YOU POSSESS A VALID S.C. DRIVERS LICENSE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> NUMBER: <u>[REDACTED]</u> EXP. DATE: _____		
HAVE YOU BEEN CONVICTED OR PLED NO CONTEST TO A CRIME OTHER THAN A MINOR TRAFFIC VIOLATION (E.g. Parking Ticket)? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
**IF YES: CHARGES: _____		
WHERE CONVICTED	DATE	DISPOSITION STATUS

**\*\*NOTE:** Criminal Offenses include felonies, misdemeanors, and summary offenses. Examples include but are not limited to: driving under the influence of intoxicating beverages or drugs; fraudulent or bad checks, disturbing the peace; leaving the scene of an accident, robbery, etc. (omit minor vehicle violations and any offenses committed before your 17<sup>th</sup> birthday, which was ultimately adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not a bar of employment in all cases. The nature, severity and date of the offenses in relation to the position for which you are applying are considered. Failure to accurately report offenses will be considered seriously by the Commission and grounds for disqualification from consideration and/or termination if employed.

## EDUCATION

Starting with High School, provide COMPLETE information on all schools attended, including special courses or schools.

	School/Institution and Location	Major/Minor Subject Areas	Graduate	Degree/ Diploma
High School or Equivalent	W J Keenan	General Studies Diploma	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	diploma
College/University	Strayer Univ.	Accounting	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
College/University			Yes <input type="checkbox"/> No <input type="checkbox"/>	
College/University			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Technical School			Yes <input type="checkbox"/> No <input type="checkbox"/>	

## SKILLS

DO YOU HAVE PERSONAL COMPUTER/SOFTWARE SKILLS?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
DO YOU HAVE WORD PROCESSING SKILLS? <i>yes</i> WPM: <i>34</i>	<input checked="" type="radio"/> YES	<input type="radio"/> NO
DO YOU HAVE DATA ENTRY SKILLS?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
SUPERVISORY EXPERIENCE/TRAINING?	<input type="radio"/> YES	<input checked="" type="radio"/> NO
TECHNICAL EXPERIENCE/TRAINING?	<input type="radio"/> YES	<input checked="" type="radio"/> NO
MILITARY EXPERIENCE/TRAINING?	<input type="radio"/> YES	<input checked="" type="radio"/> NO

LIST ANY EQUIPMENT, SOFTWARE OR MACHINES, WITH WHICH YOU ARE PROFICIENT, RELATED TO THE POSITION FOR WHICH YOU ARE APPLYING:

*Microsoft Word, Excel, Powerpoint, Office  
Fax, Telephone, Copier*

LIST ANY PROFESSIONAL LICENSES OR CERTIFICATIONS:

PROFESSION/CRAFT:	CERTIFICATION OR LICENSE NUMBER:	DATE OF CERTIFICATION:	EXPIRATION DATE:

## EMPLOYMENT DATA

TYPE OF EMPLOYMENT YOU WILL ACCEPT:	FULL-TIME <input checked="" type="checkbox"/>	PART-TIME <input checked="" type="checkbox"/>	
WILL YOU ACCEPT A POSITION WITH VARYING SHIFTS?	YES	NO	IF NO, LIST HOURS PREFERRED:
MINIMUM SALARY YOU WILL ACCEPT:	PER	EARLIEST DATE YOU COULD BEGIN WORK:	

## EMPLOYMENT RECORD

List ALL work history starting with your present or last position. List any self-employment, temporary, and military jobs. Account for ALL periods of unemployment. This section must be accurate and complete. If more space is needed, attach additional sheets in the same format, including your name and social security number on each sheet. DO NOT SUBSTITUTE A RESUME FOR AN APPLICATION.

1. Title of present or recent position Act Services From Month 07 Year 09 To Month 07 Year 10  
Employer Handstad at Colonial Life Phone 803 798 7000  
Address Colonial Life Blvd. Columbia, SC 29210  
Supervisor's Name LISA EVANS Title Manager May we contact? yes  
Hours per week 40 Salary (weekly, monthly, annual) 25,000 Annually

Name on Employment Record if different from present name \_\_\_\_\_

Reason for Leaving temporary assignment

Duties balancing group payroll, data entry, obtain info from plan administrators

2. Title of position Customer Service Rep From Month 03 Year 08 To Month 05 Year 09  
Employer Venzon Wireless Phone \_\_\_\_\_  
Address Forest Drive Columbia, SC 29204  
Supervisor's Name Chryster Warren Title CS supervisor May we contact? yes  
Hours per week 40 Salary (weekly, monthly, annual) 28,000 Annually

Name on Employment Record if different from present name \_\_\_\_\_

Reason for Leaving Sick child

Duties assisted customers with billing inquiries and calling plans.

**EMPLOYMENT RECORD (continued)**

3. Title of position Customer Service Rep From Month 01 Year 2006 To Month 02 Year 2008  
 Employer SBC Aetna Phone \_\_\_\_\_  
 Address 321 Dawson Rd. Cula SC 29223.  
 Supervisor's Name Angie Link Title CS Manager May we contact? Yes  
 Hours per week 40 Salary (weekly, monthly, annual) 26,000 Annually  
 Name on Employment Record if different from present name \_\_\_\_\_  
 Reason for Leaving department phased out  
 Duties Assisted providers as well as customers with health plan info.

4. Title of position \_\_\_\_\_ From Month \_\_\_\_\_ Year \_\_\_\_\_ To Month \_\_\_\_\_ Year \_\_\_\_\_  
 Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ May we contact? \_\_\_\_\_  
 Hours per week \_\_\_\_\_ Salary (weekly, monthly, annual) \_\_\_\_\_  
 Name on Employment Record if different from present name \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_  
 Duties \_\_\_\_\_

**PERSONAL REFERENCES**

Give name, address and phone number of three personal references.

Name	Address	Phone Number
Iris Rosa	[REDACTED]	[REDACTED]
Debra Brown	[REDACTED]	[REDACTED]
Annie Young	[REDACTED]	[REDACTED]

Have you ever been asked or forced to resign from any job? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, what position and reason, please explain: \_\_\_\_\_

## APPLICANT CERTIFICATION

1. I affirm and/or understand all statements on this form are true and accurate; and any misrepresentation or omission of facts may result in exclusion from further consideration and/or, if hired, termination or employment. If I have requested that my present employer not be contacted, I understand an offer of employment may be contingent upon information and verification of other former employers, prior to beginning work.
2. I agree to conform to the rules and regulations of the Richland County Recreation Commission. According to the State of South Carolina Law, I understand my employment with the Richland County Recreation Commission will be at-will.
3. I hereby consent to authorized representatives of the Richland County Recreation Commission contacting any of my former employers or education institutions that I have attended and any other person or organization they determine may have information concerning my past and present work. I understand this would include my official personnel files, attendance records, background information, evaluations, educational records, military service, law enforcement records and/or any personnel records deemed necessary. I also understand Richland County Recreation Commission may make inquiries of third parties such as credit bureaus. I further release organizations, educational entities, present and former employers, law enforcement organizations and all third parties from any and all claims, of whatever nature, that I may have, as a result of any inquiry or response to such inquiries, made in connection with my application for employment. I understand that any information obtained by Richland County Recreation Commission in the course of those contacts will be treated with strictest of confidence. However, I understand it is not possible to guarantee total confidentiality.
4. I understand and acknowledge that Richland County Recreation Commission requires all applicants who are tentatively selected for employment to submit to and pass a drug test, failure to take the test, failure to cooperate in taking the test, failure to follow test procedures, or testing positive for the use of illegal drugs or substances will result in disqualification from employment.

The drug test will be urinalysis and if the collector of the test sample believes that there is a reasonable possibility that I have or will tamper with or substitute the urine sample, the sample or an additional sample may be collected under conditions in which a person of the same gender of the applicant may witness the collection.

Signature: Jymani Brown

Date 12-9-10

The Richland County Recreation Commission is sensitive to the needs of qualified applicants and employees with disabilities. The Richland County Recreation Commission is also willing to make reasonable accommodations to assist such applicant and employee.

## EEO STATEMENT

The Richland County Recreation Commission is an equal opportunity employer, and government policy requires that consideration be given to all applicants without regard to race, color, military status, religion, sex, national origin, age, a legally defined disability to a qualified applicant or other status as protected by law.



***RICHLAND COUNTY RECREATION COMMISSION***

***Human Resources Department***

**5819 Shakespeare Road**

**Columbia, SC 29223**

**Ph: 803-754-7275 . Fax: 803-786-2028 . Jobline Website: [richlandcountyrecreation.com](http://richlandcountyrecreation.com)**

**Applications are accepted and applicants are considered for employment without regard to race, color, military status, religion, sex, national origin, age, a legally defined disability to a qualified applicant or other status as protected by law.**



## TERMS OF EMPLOYMENT

Name Tiffani L. Brown SSN [REDACTED]

Date of Employment or Change in Terms January 9, 2011

Position Technology Center Administrative Coordinator Full-Time  Part-Time

In compliance with Section 41-10-30 of the South Carolina Code of Law, 1976, as amended, you are hereby notified of the terms of your employment:

- Method of Payment:**  Wages \$ 10.00 per hour  
 Salary \$ \_\_\_\_\_ per year
- Payday is bi-weekly. Day of payment is FRIDAY.** (Place of payment is facility where employed)  
Time of payment is:  3:00 p.m. (Parks Division)  
 5:00 p.m. (All others)

**Vacation:** Full-time employees receive Annual Leave at a rate of 1 1/4 days per month to be used as vacation or personal time off. Part-time employees receive no annual leave.

- Sick Leave Policy:** Full-time employees receive 120 hours of sick leave during the calendar year (January 1 to December 31). Sick leave may be taken for personal illness or illness/death in the immediate family. Part-time and temporary employees receive no sick leave.

**Verification:** The use of sick leave shall be subject to verification. When there is reason to believe that sick leave is being abused, the supervisor may, before approving the use of sick leave require the certification of a physician or other acceptable documentation describing the disability and giving the inclusive dates.

Any employee taking (3) or more consecutive days of sick leave may be required to provide a written doctor's statement. If a written doctor's statement is required, failure to do so upon request may result in termination. Sick leave may not be used for vacation and there is no sick leave severance pay.

- Paid Holidays:** Paid holidays for full-time employees are the same as provided by South Carolina Law for State employees. Part-time employees receive no paid holidays.
- Severance Pay Policy:** Full-time employees will receive any **unused** annual leave pay at the time of termination. Part-time employees receive no severance pay.

Any changes in these terms shall be made in writing and at least seven (7) days before they become effective.

T. Brown  
Employee's Signature

1/5/2011  
Date

Keirall Session  
Employer's Signature

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

#### I. Current Information: This section must be completed

1. Employee Name: Tiffani Brown		2. Job Title: Part-Time Administrative Coordinator
3. Department Name: Community Relations	4. Job Code: 552	5. Job Grade: NA

#### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: \$19/hr	To: \$25,000.00	Percentage Increase: NA
7. Class Code Change:	New Class Code: Class Code 1 Full-time (1.0 FTE)		
8. Job Code / Title Changes:	New Job Code: 115	Salary Class: Non-Exempt	
New Job Title: Administrative Assistant		New Job Grade: 4	
9. Department Change:	Old Dept. Name: NA	New Department Name: NA	
10. Reason for change(s) noted above: Promotion to full-time			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: 6/12/2011 The effective date should coincide with the start date of a payroll period.			

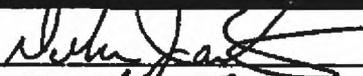
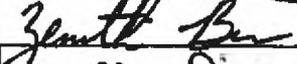
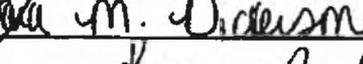
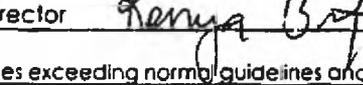
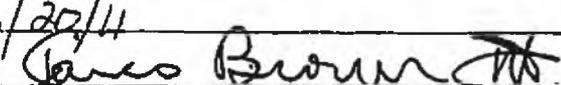
#### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

#### IV. Leave of Absence

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

#### V. Signatures & Date

Supervisor / Manager	
Department Director	
Division Head	
Assistant Executive Director	
Executive Director (required for pay changes exceeding normal guidelines and terminations)	 6/22/11

**BOARD OF COMMISSIONERS:**

*J. Marie Green, Chair  
G. Todd Weiss, Secretary  
C. Todd LaTiff  
Weston A. Furgess, Jr.  
Wilbert Lewis  
George D. Martin, Jr.  
Barbara Mickens*



**EXECUTIVE DIRECTOR**

**James Brown, III**  
5819 Shakespeare Road  
Columbia, SC 29223  
Phone: (803) 754-7275  
Fax: (803) 786-2028  
Email: [info@rcrc.state.sc.us](mailto:info@rcrc.state.sc.us)  
[www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

**MEMORANDUM**

**To:** Tiffani Brown  
**From:** James Brown, III *J. Brown*  
Executive Director  
**Subject:** Employment Confirmation  
**Date:** June 27, 2011

This is to confirm your employment with the Richland County Recreation Commission. Your annual salary for the period of July 1, 2011 – June 30, 2012 with the 3% Cost of Living increase is \$25,750.00.

Employee's Acknowledgment Signature: *J. Brown*

Date: 10/30/11

Please Sign and Return to Keira Session – Human Resources.

**NOTHING CONTAINED IN THIS CONFIRMATION CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT-WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE.**

**CONFIDENTIAL**



*Nationally Accredited:  
The Richland County Recreation Commission  
became South Carolina's first nationally  
accredited parks and recreation agency in 2006.*

*Equal Opportunity Statement: The Richland County Recreation Commission is dedicated to the concept of equal opportunity. The Commission will not discriminate on the basis of race, color, religion, sex, age, disability, national origin, or marital status, in its employment practices or in the participation policies for its facilities.*



Enriching Lives &  
Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. CURRENT EMPLOYEE** This section must be completed

1. Employee Name: <b>Tiffani Brown</b>		2. Job Title: <b>Admin Assistant</b>	
3. Department Name: <b>Facilities</b>	4. Job Code: <b>115</b>	5. Job Grade: <b>4</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$25,750.14</b>	To: <b>\$28,750.14</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title:	New Job Grade:		
9. Department Change:	Old Dept. Name:	New Department Name:	
Reason for change(s) noted above: <b>Pay increase</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <a href="#">Click Here</a>		<b>05-27-12 DS</b>	

The effective date should coincide with the start date of a payroll period.

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge):** Choose only one, not both

12. Voluntary or involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>

For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.

16. If voluntary resignation, why? If no retire recommendation, why?

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director		
Department Head	<i>James Lewis</i>	6/6/12
Assistant Executive Director		
Executive Director	<i>Jess Brown</i>	6/6/12
<small>Used for pay changes exceeding normal guidelines and terminations</small>		
Human Resources Representative	<i>Sandra James</i>	6/7/12

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input checked="" type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

#### I. Current Information: This section must be completed

1. Employee Name: <b>Tiffani Brown</b>		2. Job Title: <b>Administrative Assistant Clyburn Technology Center</b>	
3. Department Name: <b>Community Relations</b>	4. Job Code: <b>115</b>	5. Job Grade: <b>4</b>	

#### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: <b>\$28,750.00</b>	To: <b>\$36,000.00</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Class Code 1 Full-time (1.0 FTE)</b>		
8. Job Code / Title Changes:	New Job Code: <b>405</b>	Salary Class: <b>Exempt</b>	
New Job Title: <b>Technology Center Manager</b>		New Job Grade: <b>6</b>	
9. Department Change:	Old Dept. Name: <b>Community Relations</b>	New Department Name: <b>Community Relations</b>	
10. Reason for change(s) noted above: <b>job promotion</b>			

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: ~~2/1/2013~~ **07/01/2013** *YMD*  
 The effective date should coincide with the start date of a payroll period. *KVB JWA JBA*

#### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge) - Choose only one, not both

12. Voluntary or Involuntary? Click Here	13. Effective Date:	14. Proper Notice Given? Click Here
		15. Would you re-employ? Click Here
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

#### IV. Leave of Absence

17. Leave type: Click Here	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

#### V. Signatures & Date

Department Director	<i>Zant K</i>	<i>6/28/13</i>
Department Head	<i>Don M. Duro</i>	<i>6/28/13</i>
Assistant Executive Director	<i>Kenya Bryant</i>	<i>6/28/13</i>
Executive Director	<i>John Beaman</i>	<i>6/28/13</i>
Human Resources Representative	<i>Keinell Jensen</i>	<i>06-28-2013</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature  
02/2013



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

#### I. Current Information: This section must be completed

1. Employee Name: <b>Tiffany Brown</b>		2. Job Title: <b>Technology Center Manager - Gamers Ferry</b>	
3. Department Name: <b>Facility Operations</b>	4. Job Code: <b>625</b>	5. Job Grade: <b>5</b>	

#### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: <b>\$36,000.12</b>	To: <b>\$42,000.14</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Click Here</b>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <b>Click Here</b>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above: <b>Pay Increase</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>02/01/2015</b> The effective date should coincide with the start date of a payroll period.			

#### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge): Choose only one, not both

12. Voluntary or Involuntary? <b>Click Here</b>	13. Effective Date:	14. Proper Notice Given? <b>Click Here</b>
		15. Would you re-employ? <b>Click Here</b>
<i>For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.</i>		
16. If voluntary resignation, why? If no rehire recommendation, why?		

#### IV. Leave of Absence

17. Leave type: <b>Click Here</b>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

#### V. Signatures & Date

Assistant Executive Director	<i>Kerna V. Bryant</i>	<i>2/18/15</i>
Human Resources Representative	<i>David Strump</i>	<i>2/18/15</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.

21

Dear Mr. Lewis Leopard

Robert Davis here, this is an official letter stating that I accept the position as assistant Center Director at Eastover Park. I would like to thank you for the opportunity to work for Richland County Recreation Commission.

Robert Davis 5/1/08

Richland County



Recreation  
COMMISSION

5819 Shakespeare Road  
Columbia, SC 29223  
(803) 754-7275

POSITIONS APPLIED FOR	DO NOT WRITE IN THIS SPACE
Recreational Coordinator	
Recreational Director / Assistant	

RECEIVED  
NOV 16 2007

The Richland County Recreation Commission does not discriminate on the basis of race, sex, national origin, age or handicap.

BY: .....

RECEIVED  
FEB 04 2008

EMPLOYMENT APPLICATION

BY: .....

This is your application for employment with the Richland County Recreation Commission. Please prepare it accurately and neatly. Willful falsification of any information may result in rejection of your application or in your dismissal if you are employed by the Recreation Commission.

All qualified applications will be referred to the department where the vacancy is located. That department head is responsible for the review and evaluation of applications and recommending the most qualified applicants to be selected for an interview.

Date: \_\_\_\_\_ (TYPE OR PRINT IN INK)

1. Name DAVIS Robert I  
 (Last) (First) (Middle)

Address \_\_\_\_\_  
 (Number and Street or RFD) (City) (County) (State) (Zip Code)

Social Security Number \_\_\_\_\_ Telephone Number (Home) \_\_\_\_\_

2. State the salary which you are willing to accept \$ 26,858 When could you begin work? ASAP

Check type of employment you would accept: Part-Time  - Full-Time   
 Hours Preferred \_\_\_\_\_

Do you possess a valid S. C. Driver's License? Yes What class? D Number 011414575

3. Have you served in the U.S. Armed Forces? Yes  No

Branch of Service: Army  Navy  Marines  Air Force  Other \_\_\_\_\_

Date Entered \_\_\_\_\_ Date Discharged or Separated \_\_\_\_\_ Type of Discharge \_\_\_\_\_

Highest Rank Attained \_\_\_\_\_

Reserve Status: National Guard  Inactive  Ready Reserve  Standby Reserve  Non-Member

Are you required to attend: Summer Training? Yes  No  Weekly or monthly drills? Yes  No

Date Active Reserve Obligation Will End \_\_\_\_\_

Military Branch and Name of Reserve Unit \_\_\_\_\_

4. In case of emergency notify IVY DAVIS \_\_\_\_\_  
 (Name) (Address) (Phone)

Relationship to you Mother

Have you ever been employed by the Richland County Recreation Commission? Yes  No

If yes, dates \_\_\_\_\_

Were you a member of the South Carolina Retirement System? Yes  No

If yes, Retirement Number \_\_\_\_\_

Robert  
First Name

DAVIS  
Last Name

Please Print

5. Have you pled no contest or been convicted of any violation of law other than minor traffic violations? Yes  No

\*\*If yes, give details below:

Where Arrested	Date	Nature of Charge	State	Disposition/Status

\*\*NOTE: Report criminal offenses including felonies, misdemeanors and summary offenses. EXAMPLES: Driving under the influence of intoxicating beverages, drugs, fraudulent or bad checks, disturbing the peace, leaving the scene of an accident, robbery, etc. Omit minor vehicle violations and any offense committed before your 17<sup>th</sup> birthday, which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not a bar to employment in all cases. The nature, severity and date of the offense in relation to the position for which you are applying are considered. Failure to accurately report offenses will be considered a serious offense by the Recreation Commission and will be grounds for disqualification from consideration and/or termination if employed.

6. EDUCATION						
School	Name and Location of School	Course of Study	Years Attended From To	Circle Last Year Completed	Did you Graduate?	Certificate or Degree Received
Elementary	Hopkins Elementary			1 2 3 4 5 6 7 8	Yes No	
High	Lower Richland		1999-2003	9 10 11 12	Yes No	
Business, Technical or Trade School				1 2 3 4	Yes No	
College	S.C. State University		2006-2007	1 2 3 4	Yes No	B.A. Physical Ed/Activity
Graduate School				1 2 3 4	Yes No	Mg.
Other Studies					Yes No	

7. Professional Certificate or Licenses

Profession	Date of Current License or Registration	State Issuing License or State in Which Registered	Date of First License or Registration

8. List any professional honors, awards, publications, etc.

300 hours of Pre-Professional Experience. 96 hours of Professional hours at Lower Richland high school.

9. Give details of any special skills, training or apprenticeship

Indicate type of machines you have operated  Calculator  Dictaphone  Computer  Heavy Construction Equipment  Light Construction Equipment

List any computer software with which you are familiar Microsoft Word, excel, Powerpoint, digital Media and Graphics.

Shorthand Speed \_\_\_\_\_ Typing Speed \_\_\_\_\_

10. References - Please provide names, addresses and phone number of three people, not relatives, who have known you for at least one year.

Name <u>Commissioner J. Marie Green</u>	Address <u>[REDACTED]</u>	Phone <u>[REDACTED]</u>	Occupation <u>Commissioner</u>
Name <u>Judge Miller</u>	Address <u>[REDACTED]</u>	Phone <u>[REDACTED]</u>	Occupation <u>Supervisor</u>
Name <u>Martin Keston</u>	Address <u>[REDACTED]</u>	Phone <u>[REDACTED]</u>	Occupation <u>Employer</u>

11. Have you ever been discharged or forced to resign from any job for misconduct or unsatisfactory service?  Yes  No  
 Have you any objections to this agency making inquiry of your present employer regarding your character, qualifications, etc.? (circle one) Yes  No

EXPERIENCE: Begin with your present or last job and describe in detail all periods of employment, including self employment. Include military service and part-time employment. Account for your time during any intervals or unemployment other than those when you were attending school. Use additional sheet if necessary.

Name of Employer Square D Company  
 Address of Employer Gilman's Ferry Rd  
 Phone Number of Employer (803) 726-7500  
 Your Job Title Supply Associate III  
 Specific Duties My responsibilities are ordering and loading  
materials after inventory. I mainly do ordering and  
loading for 221 Stecker and gravel lines.  
 Reason for Leaving \_\_\_\_\_

From (Mo.) January (Yr.) 2007  
 To (Mo.) Present (Yr.) \_\_\_\_\_  
 Full-Time  Part-Time   
 Starting Salary \$12.09 hourly  
 Last Salary \$16.00 hourly  
 Supervisor's Name Judie Miller  
 Supervisor's Title Supply Chain  
Manager

Name of Employer South Carolina State University  
 Address of Employer 200 Collier St Orangeburg SC  
 Phone Number of Employer (803) 536-7000  
 Your Job Title Work Study Student for Physical Ed. department  
 Specific Duties Classical Lunch, and Assistant Director  
of Intramural Activities  
 Reason for Leaving \_\_\_\_\_  
helped with office duties as well as  
help implement intramural activities for students

From (Mo.) August (Yr.) 2006  
 To (Mo.) May (Yr.) 2007  
 Full-Time  Part-Time   
 Starting Salary 5.15 hourly  
 Last Salary 5.15 hourly  
 Supervisor's Name \_\_\_\_\_  
 Supervisor's Title Ertha Mastey  
De Frye

Name of Employer \_\_\_\_\_  
 Address of Employer \_\_\_\_\_  
 Phone Number of Employer \_\_\_\_\_  
 Your Job Title \_\_\_\_\_  
 Specific Duties \_\_\_\_\_  
 Reason for Leaving \_\_\_\_\_

From (Mo.) \_\_\_\_\_ (Yr.) \_\_\_\_\_  
 To (Mo.) \_\_\_\_\_ (Yr.) \_\_\_\_\_  
 Full-Time  Part-Time   
 Starting Salary \_\_\_\_\_  
 Last Salary \_\_\_\_\_  
 Supervisor's Name \_\_\_\_\_  
 Supervisor's Title \_\_\_\_\_

A RESUME OF YOUR EMPLOYMENT WILL NOT BE ACCEPTED IN LIEU OF THE ABOVE INFORMATION

13. List any information that you think would be pertinent or helpful. Please use additional sheets if necessary.

**14. CERTIFICATE OF APPLICATION - READ CAREFULLY BEFORE SIGNING**

I hereby certify that all statements made in this application are true, and I agree and understand that any willful misstatements of material facts herein will cause forfeiture on my part of all rights to any employment in this agency. The Richland County Recreation Commission (RCRC) is authorized to request a transcript where necessary to verify my education record and make whatever background investigation necessary for employment purposes. I have no objections to being fingerprinted and having my record cleared through the FBI and/or the South Carolina Law Enforcement Division (SLED). I further agree to a physical examination and/or a pre-employment drug-screening test, if such examination is required as a condition of employment by the agency.

I hereby consent to authorized representatives of RCRC contacting any of my former employers or educational institutions that I have attended and any other person or organization they determine may have information concerning my past and present work. I understand this would include my official personnel files, attendance records, background information, evaluations, educational records, military service, law enforcement records and/or any personal records deemed necessary. I also understand RCRC may make inquiries of third parties such as credit bureaus. I further release the organization, educational entity, present and former employers, law enforcement organizations and all third parties from any and all claims, of whatever nature, that I may have, as a result of any inquiry or response to such inquiries, made in connection with my application for employment. I understand that any information obtained by RCRC in the course of those contacts will be treated with the strictest confidence. However, I understand it is not possible to guarantee total confidentiality.

Applicant's Signature

*Robert D. Davis*

Date

10/9/07

**Interviewer's Remarks**

Interviewed By

Date

SECOND INTERVIEW QUESTIONS

Robert Davis  
3-20-08  
MA, Gere, Taunus

1. How do you determine or evaluate success? Give me an example of one of your successful accomplishments.

Success is made when you accomplish a goal.  
Overcoming growing up in tough area.  
Obtain education + give back to community.

2. Tell me about a time when you had to go above and beyond the call of duty in order to get a job done.

At Square D - trouble with NW breaker -  
I stayed over + waited for truck to come  
+ unload it.

3. You are the Director at \_\_\_\_\_ Park. You have ten children registered and paid for Ballet class all of the children/parents arrive for class at 4PM the instructor does not show up for class, how do you handle the situation.

Try to contact instructor - it doesn't show -  
I don't have background in ballet - come up with  
something - refund money.

4. Give me a specific example of something you did that helped build enthusiasm in others.

Substitute teacher - music class - kids singing song -  
little boy I put with deep voice - he sat down  
because he wanted to sing with higher voices -  
I apologized + let him sing with higher voices.  
I encouraged him.

Page 2  
Second Interview Questions

5. We can sometimes identify a small problem and fix it before it becomes a major problem. Give an example(s) of how you have done this.

2 guys argue during <sup>bball</sup> game - I blow whistle - take them to side

6. Recall a time from your work experience when your manager or supervisor was unavailable and a problem arose. What was the nature of the problem? How did you handle the situation? How did that make you feel?

Park lift truck - breakers fell off - I called supervisor & reported it.

7. Tell of the most difficult customer service experience that you have ever had to handle - perhaps an angry or irate customer. Be specific and tell what you did and what was the outcome.

Food Lion in high school. Guy came in was real nasty. He threw money at cashier. I was the bigger. He told me not to touch groceries. manager told me you can't let people like that get you down to their level.

Holladay HS/College  
and Sports  
English Educ CC - Spoken D

Kobeit Davis  
3-11-08

## INTERVIEW QUESTIONS

- 1. Before we get started, could you tell me your impressions or idea of what this job is about?**  
Asst. Vice Director / Director over site everything  
Asst. Director implement Program to include D  
of duties / Park run smooth.  
Deal someone youth/adult at Park
- 2. Tell me about your education. What subjects did you enjoy/dislike?**  
Degree PE/PE Mgt Undergrad 4 years  
Recreational course  
Like Sports Market  
Kinestology did not enjoy more Study + focus
- 3. Describe the primary job responsibilities of your present job/most current position?**  
Line Leader - NW teacher - Breaker or Pull order  
good Breaker since Park lost + load on to line  
line works part also components on side.  
Child times on Breaker.
- 4. If you were hiring someone for this position what qualities would you look for?**  
Person - Qualified Educator  
Appearance - No person esp deal w/ children
- 5. Tell me about a specific situation where you prevented a problem?**  
Substitute in morning / Sp D at night /  
Last week kids walk blind line in gym  
start walking / playing pushed student into wall /  
unsafe situation.
- 6. You are supervising the park; two yond men begin to argue about a foul called during a basketball game (pick up game - no referee). How would you handle the situation?**  
Adults common same older whether - Stop get  
attention and come to side & resolve situation  
act accordingly ask to leave - want gone  
to prevent.
- 7. A park patron has a complaint concerning your weekend part time employee. The patron claims that the employee was rude and impolite while enforcing the gymnasium rules. How would you handle this situation?**  
Growth with w/ parent / PT individual deal w/ certain  
appeal to her rules Reg of KCKC accidents  
Sometimes parents sensation be relief &  
PT always bad reports deal on it. situation will  
better.
- 8. Do you set goals for yourself?**  
Yes, I want to achieve my goals  
working, what does best time in gym  
What have you done to reach them?  
I want to work for the  
community  
Change the way students out today need a role model  
American dream home, family  
workout, run, eat healthy. Not perfect

Interview Questions  
Page 2

9. Define Cooperation - Skill motivated they  
work w/ individual follow direction  
+ every going
10. Why are you interested in the field of recreation? I want to  
work with the younger generation. I want to  
be a part of a comfortable environment w/ growth nationwide  
community. Good mentality.
11. How do you take direction? vision of play under faculty of FCS  
I think well, Coaching implement all seven over to come to  
attention, manner. Successful goal + horizon.  
Play stays focus. Job seriously do what is asked. Also  
from parents.
12. What kinds of things bother you most about your job? from parents.  
Lot of issues with broken parts malfunctioning  
knows but we continue many units but seven  
Sealant is bad. Why just check off brand 300 units  
w/ the sealant should need to be reworked. Not make money  
instead of
13. In what ways do you think you can make a contribution to the Richland County Recreation Commission? Increase revenue  
Revenue children money to commission safety  
Learn about body, fit good procedure check  
who can be successful in recreation. Job - Commission  
des so much for me. I want to grow I want to be  
president. One day at a time  
younger elite
14. Describe your "dream" job. Coach of NFL Team  
Best job ever since I've  
There is sweets go out to job how part are being working  
with sports.
15. What person do you most admire and why? Daddy - about of people my family is family oriented  
United, never left coaching, own on business give  
my family something they never had.
16. What are your future plans? Success in job start family  
Successful career live American dream  
Cough man was

Telephone Reference Verification Form

Applicant Robert Davis

Reference #1 J. Marie Green Person queried [Redacted]

Applicant Authorization to Contact  Yes  No  
 Years Known all his life  Yes  No  
 Relationship Nephew  Yes  No  
 Strengths #1 College good  Yes  No  
 Would you hire in a similar position Sure definitely  Yes  No

3/20/08

Notes: Very smart, College worked full time  
good manners, Respect, Clean,  
Dependable, Organized, Sport, Honest  
good ment, judgement, Skill, asset to Company

Reference #2 Jackie Miller Person queried [Redacted]

Applicant Authorization to Contact  Yes  No  
 Years Known 2006  Yes  No  
 Relationship Immediate Supervisor  Yes  No  
 Strengths dedicated reliable  Yes  No  
 Would you hire in a similar position Can not answer  Yes  No

3/20/08

Notes: he doesn't question assignments  
will be a good person to have

"Since I do not know what the position entails"  
Sure, asked if this was a full time position

Reference #3 Martin Kershaw Person queried [Redacted] X 776 726

Applicant Authorization to Contact  Yes  No  
 Years Known 1-2 years at work  Yes  No  
 Relationship Co-worker  Yes  No  
 Strengths put up things quickly  Yes  No  
 Would you hire in a similar position yes sure  Yes  No

3/20/08  
3/21/08 Plant closed  
3/24/08

Notes: Self motivated / reliable  
Shows up to work, pleasant + R  
respectful of authority  
any questions he will ask

Contacted by: Dedlin Date 3/24/08



< CLOSE

HOME RESOURCE

Employer

### Regular Pay History

RD Davis, J  
SM - Site M  
Home Dept

Show Changes for  
all

Show as of

Position

Site Manager

Position Start Date  
3/1/2015

Job Function

Job Change Reason  
DBLOAD

Job Class

Job Sta

MAICS Workers' Comp  
Club / Community Cen

EE Occasion

Officer/Owner

Corporate

Business Unit

Benefits Eligibility Class

Home Department  
Full Time Facility/Cam

Home Cost Number

Change Reason  
DBLOAD

4

Privacy Legal

EFFECTIVE DATE	COMPENSATION..	RATE TYPE	AMOUNT	RATE 2	PAY FREQ..	STAN..	PERCENT CHA..	AMOUNT CHA..	ANNUAL AI
09/01/2013	PROMO Prom	Salary	538.47	19.23	Bweekly		119156	4,258.80	40,000.22 N
05/27/2012	PAY N Pay Incr	Salary	374.67		Bweekly	8000	91632	3,000.14	35,741.42 N
07/01/2011	COST Cost FL	Salary	1,259.28		Bweekly	8000	30002	953.68	32,741.28 N
01/24/2011	PAY IN Pay Incr	Salary	1,222.6		Bweekly	8000	135275	3,787.68	31,787.60 N
08/09/2009	PAY N Pay Incr	Salary	1,076.92		Bweekly	8000	20294	556.92	27,999.92 N
07/01/2009	COST Cost of	Salary	1,055.50		Bweekly	8000	29997	799.24	27,443.00 N
06/14/2009	PROMO Promo	Salary	1,024.76		Bweekly	8000	50002	1,268.80	26,643.76 N
08/06/2008	DBLOAD	Salary	975.96		Bweekly	8000		25,374.96	25,374.96 N
04/29/2008	DBLOAD				Bweekly	8000		0.00	0.00 N

**BOARD OF COMMISSIONERS:**

Rev. Charles E. Epps, Chair  
Delano R. Boulware, Vice Chair  
J. Marie Green, Secretary  
Wilbert Lewis  
George D. Martin, Jr.  
Barbara Mickens  
Lynn E. Roth



*"Enriching Lives & Connecting Communities"*

**Executive Director**  
Lewis B. Leopard, CGBA  
5819 Shakespeare Road  
Columbia, SC 29223  
Phone: 803.754.7275  
Fax: 803.786.2828  
Email: [info@rcrc.state.sc.us](mailto:info@rcrc.state.sc.us)  
[www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

**MEMORANDUM**

To: Robert I. Davis

From: Lewis Leopard, CGBA  
Executive Director 

Subject: Employment Confirmation

Date: April 21, 2008

This will confirm your employment as an Assistant Recreation Center Director with the Richland County Recreation Commission (RCRC) effective April 21, 2008. Your position is in a pay band 4 and your annual salary is \$24,636.00 for the fiscal year of 2007-2008.

As a new employee you are required to serve a one year introductory period which begins effective April 21, 2008.

Congratulations!

Employee's Signature



Date

5/1/08

**CONFIDENTIAL**



**Nationally Accredited:**  
The Richland County Recreation Commission became South Carolina's first nationally accredited parks and recreation agency in 2006.

**Equal Opportunity Statement:**  
The Richland County Recreation Commission is dedicated to the concept of equal opportunity. The Commission will not discriminate on the basis of race, color, religion, sex, age, disability, national origin, or marital status in its employment practices or in the participation policies for its facilities.

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*"Enriching Lives & Connecting Communities"*

**Executive Director**  
Lewis B. Leopard, CGBA  
5819 Shakespeare Road  
Columbia, SC 29223  
Phone: 803.754.7275  
Fax: 803.786.2028  
Email: [info@rec.state.sc.us](mailto:info@rec.state.sc.us)  
[www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

**MEMORANDUM**

To: Davis, Robert I.  
From: David Stringer  
Human Resources Director  
Subject: Employment Confirmation  
Date: July 16, 2008

This is to confirm your employment as a Asst Recreation Center Director with the Richland County Recreation Commission. Your annual salary for the fiscal year 2008-2009, as approved by our Board is \$25374.96.

Employee's Acknowledgment Signature Robert Davis  
Date 7/22/08

P.S. Is it 25,374.96?

After signing and dating this acknowledgment, please return in the envelope provided.

**CONFIDENTIAL**



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## Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input checked="" type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other

### I. Current Information: This section must be completed

1. Employee Name: <b>Robert I. Davis</b>		2. Job Title: <b>Assistant Park Manager</b>	
3. Department Name: <b>Park Operations</b>	4. Job Code:	5. Job Grade:	

### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: <b>\$25,374.96</b>	To: <b>\$26,643.70</b>	Percentage Increase: <b>n/a</b>
7. Class Code Change:	New Class Code: <b>Class Code 1 Full-time (1.0 FTE)</b>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <b>Exempt</b>	
	New Job Title: <b>Park Manager</b>		New Job Grade:
9. Department Change:	Old Dept. Name:	New Department Name:	

Reason for change(s) noted above: **Restructuring**

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: **6/14/2009**  
 The effective date should coincide with the start date of a payroll period.

### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge): Choose only one, not both

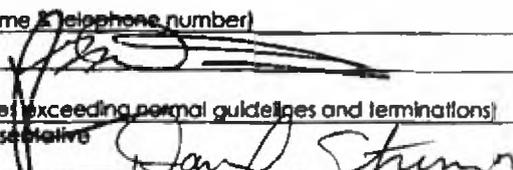
12. Voluntary or involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

### IV. Leave of Absence

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

### V. Signatures & Date

Department Head <small>(Please include dept name &amp; telephone number)</small>
Chief of Staff
Executive Director <small>(required for pay change exceeding normal guidelines and terminations)</small>
Human Resources Representative



By typing my name in the appropriate area above, I certify this to be my electronic signature.

**BOARD OF COMMISSIONERS:**

*Delano R. Boulware, Chair  
J. Marie Green, Vice Chair  
Charles Epps, Secretary  
Wilbert Lewis  
George D. Martin, Jr.  
Barbara Mickens  
G. Todd Weiss*



*"Enriching Lives & Connecting Communities"*

5819 Shakespeare Road  
Columbia, SC 29223  
Phone: 803.754.7275  
Fax: 803.786.2028  
Email: [info@rcrc.state.sc.us](mailto:info@rcrc.state.sc.us)  
[www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

**MEMORANDUM**

To: Robert I. Davis  
From: David Stringer  
Human Resources Director  
Subject: Employment Confirmation  
Date: July 1, 2009

This is to confirm your employment the Richland County Recreation Commission (RCRC).

Position: Park Manager

Your annual salary for the fiscal year 2009-2010, as approved by our Board will be:  
\$27,443.00

If you have any questions regarding this letter please notify Human Resources or Payroll.

I Acknowledge the Receipt of This Letter (Employee Signature):

Date:

7/26/09

**NOTHING CONTAINED IN THIS CONFIRMATION CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT-WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE.**

After signing and dating this acknowledgement, please return to:

Tiyana White, Human Resources  
Human Resources Manager



**Nationally Accredited:**  
The Richland County Recreation Commission became South Carolina's first nationally accredited parks and recreation agency in 2006.

**Equal Opportunity Statement:**  
The Richland County Recreation Commission is dedicated to the concept of equal opportunity. The Commission will not discriminate on the basis of race, color, religion, sex, age, disability, national origin, or marital status in its employment practices or in the participation policies for its facilities

## Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other

### I. Current Information: This section must be completed

1. Employee Name: <b>Robert I. Davis</b>			2. Job Title: <b>Park Manager</b>	
3. Department Name: <b>Park Operations</b>		4. Job Code: <b>Pending</b>	5. Job Grade: <b>Pending</b>	

### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: <b>\$27,443.01</b>	To: <b>\$28,000.00</b>	Percentage increase: <b>n/a</b>
7. Class Code Change:	New Class Code: <b>Class Code 1 Full-time (1.0 FTE)</b>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <b>Exempt</b>	
	New Job Title:	New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	

10. Reason for change(s) noted above: *Increase in minimum starting pay for Park Manager position*

11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: **8/9/2009**  
The effective date should coincide with the start date of a payroll period.

### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge) - Choose only one, not both

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

### IV. Leave of Absence

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

### V. Signatures & Date

Department Head (please include dept name & telephone number)	<i>James Brown</i>
Chief of Staff	<i>[Signature]</i>
Executive Director (required for pay changes exceeding normal guidelines and terminations)	<i>6 Aug 2009</i>
Human Resources Representative	

By typing my name in the appropriate area above, I certify this to be my electronic signature.

Richland County



Recreation  
COMMISSION

"Enriching Lives & Connecting Communities"

**BOARD OF COMMISSIONERS:**

- Delano R. Boulware, Chairman*
- Marie Green, Vice Chairman*
- Rex Charles E. Epps, Secretary*
- Wilbert Lewis*
- George D. Martin, Jr.*
- Barbara Mickens*
- G. Todd Weiss*

**EXECUTIVE DIRECTOR**

**Brian J. Devost, M.S.E.**  
 5819 Shakespeare Road  
 Columbia, SC 29223  
 Phone: (803) 754-7275  
 Fax: (803) 786-2028  
 Email: [info@rcrc.state.sc.us](mailto:info@rcrc.state.sc.us)  
[www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

**MEMORANDUM**

**To:** Robert Davis

**From:** David Stringer  
Human Resources Director

**Re:** Employment Confirmation

**Date:** January 6, 2010

At the December 21, 2009 Board meeting, the Board approved new State of South Carolina pay band minimums for all positions. Those employees falling below the minimum are being brought up to the minimum of the newly established pay band.

Position: Park Manager      Current Annual Salary: \$28,000.00

New Pay band: 5

Your new annual salary effective January 24, 2010, as approved by our Board will be:  
\$31,787.70

If you have any questions regarding this letter please notify Human Resources or Payroll.

I Acknowledge the Receipt of This Letter (Employee Signature): *Robert Davis*

Date: 1/19/10

**NOTHING CONTAINED IN THIS CONFIRMATION CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT-WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE.**

After signing and dating this acknowledgement, please return to:

Tiyana White, Human Resources  
 Human Resources Coordinator



*Nationally Accredited:*  
 The Richland County Recreation Commission became South Carolina's first nationally accredited parks and recreation agency in 2006.

*Equal Opportunity Statement: The Richland County Recreation Commission is dedicated to the concept of equal opportunity. The Commission will not discriminate on the basis of race, color, religion, sex, age, disability, national origin, or marital status, in its employment practices or in the participation policies for its facilities*

**BOARD OF COMMISSIONERS:**

J. Marie Green, Chair  
G. Todd Weiss, Secretary  
C. Todd LaTuff  
Weston A. Furgess, Jr.  
Wilbert Lewis  
George D. Martin, Jr.  
Barbara Mickens



**EXECUTIVE DIRECTOR**

**James Brown, III**  
5819 Shakespeare Road  
Columbia, SC 29223  
Phone: (803) 754-7275  
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Email: [info@rcrc.state.sc.us](mailto:info@rcrc.state.sc.us)  
[www.richlandcountyrecreation.com](http://www.richlandcountyrecreation.com)

**MEMORANDUM**

To: Robert Davis  
From: James Brown, III *JB*  
Executive Director  
Subject: Employment Confirmation  
Date: June 27, 2011

This is to confirm your employment with the Richland County Recreation Commission. Your annual salary for the period of July 1, 2011 – June 30, 2012 with the 3% Cost of Living increase is \$32,741.23.

Employee's Acknowledgment Signature: *Robert Davis*

Date: 6/29/11

Please Sign and Return to Keira Session – Human Resources.

**NOTHING CONTAINED IN THIS CONFIRMATION CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT-WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE.**

**CONFIDENTIAL**



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Enriching Lives & Connecting Communities

**Richland County Recreation Commission**

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

**I. Current Information: This section must be completed**

1. Employee Name: <b>Robert Davis</b>		2. Job Title: <b>Park Manager</b>	
3. Department Name: <b>Parks</b>	4. Job Code: <b>545</b>	5. Job Grade: <b>5</b>	

**II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours**

6. Salary Change:	From: <b>\$32,741.28</b>	To: <b>\$35,741.28</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <a href="#">Click Here</a>		
8. Job Code / Title Changes:	New Job Code:	Salary Class: <a href="#">Click Here</a>	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above: <b>Pay Increase</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <a href="#">Click Here</a> <b>05-27-12 DL</b> The effective date should coincide with the start date of a payroll period.			

**III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge): Choose only one, not both**

12. Voluntary or Involuntary? <a href="#">Click Here</a>	13. Effective Date:	14. Proper Notice Given? <a href="#">Click Here</a>
		15. Would you re-employ? <a href="#">Click Here</a>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

**IV. Leave of Absence**

17. Leave type: <a href="#">Click Here</a>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

**V. Signatures & Date**

Department Director		
Department Head	<i>Samuel Sam</i>	<i>6/6/12</i>
Assistant Executive Director		
Executive Director <small>(required for pay changes exceeding normal guidelines and terminations)</small>	<i>Gives Brown</i>	<i>6/6/12</i>
Human Resources Representative	<i>Sandra James</i>	<i>6/7/12</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.



Enriching Lives &  
Connecting Communities

### Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

#### I. Current Information: This section must be completed

1. Employee Name: <b>Robert I. Davis</b>		2. Job Title: <b>Park Manager</b>	
3. Department Name: <b>Parks</b>	4. Job Code: <b>545</b>	5. Job Grade: <b>5</b>	

#### II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: <b>\$35,741.42</b>	To: <b>\$40,000.00</b>	Percentage Increase:
7. Class Code Change:	New Class Code: <b>Click Here</b>		
8. Job Code / Title Changes:	New Job Code: <b>505</b>	Salary Class: <b>Click Here</b>	
New Job Title: <b>Program Coordinator - GFAAC</b>		New Job Grade: <b>5</b>	
9. Department Change:	Old Dept. Name: <b>Eastover Park</b>	New Department Name: <b>Gamers Ferry AAC</b>	
10. Reason for change(s) noted above: <b>Change in Position</b>			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: <b>9/1/2013</b> The effective date should coincide with the start date of a payroll period.			

#### III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge) - Choose only one, not both

12. Voluntary or Involuntary? <b>Click Here</b>	13. Effective Date:	14. Proper Notice Given? <b>Click Here</b>
		15. Would you re-employ? <b>Click Here</b>
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

#### IV. Leave of Absence

17. Leave type: <b>Click Here</b>	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

#### V. Signatures & Date

Department Director	<i>[Signature]</i>	<b>9/3/13</b>
Department Head	<i>[Signature]</i>	<b>8/3/13</b>
Assistant Executive Director	<i>[Signature]</i>	<b>9/3/13</b>
Executive Director <small>(required for pay changes exceeding normal guidelines and terminations)</small>	<i>[Signature]</i>	<b>9/3/13</b>
Human Resources Representative	<i>[Signature]</i>	<b>09-04-2013</b>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.