



\$9 coun/NSP

Enriching Lives & Connecting Communities

## APPLICATION FOR EMPLOYMENT RICHLAND COUNTY RECREATION COMMISSION

Human Resources Department

7473 Parklane Road, Columbia, SC 29223

Phone: 803-741-RCRC (7272) • Fax: 803-741-2495 • Jobline Website: [richlandcountyrecreation.com](http://richlandcountyrecreation.com)

DATE: 5/26/15

POSITION APPLIED FOR: Counselor

### 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, Jenai, A.</u>		
LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER: <u>[REDACTED]</u>		
MAILING ADDRESS: <u>301 Shamley Green Drive</u>		
CITY: <u>Columbia</u>	STATE: <u>SC</u>	ZIP CODE: <u>29229</u> COUNTY: <u>Richland</u>
HOME PHONE #: <u>(803) 479-4585</u>	CELL PHONE #: <u>(803) 241-3156</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>Jeffrey Brown (Father); James Brown III (Uncle)</u>		
WHAT DEPARTMENT(S): <u>AAC (Father); Corporate Office (Uncle)</u>		
DO YOU POSSESS A VALID S.C. DRIVERS LICENSE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> NUMBER: _____ 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	Ridge View HS Columbia, SC		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Diploma (2015)
College/Universtiy			Yes <input type="checkbox"/> No <input type="checkbox"/>	
College/Universtiy			Yes <input type="checkbox"/> No <input type="checkbox"/>	
College/Universtiy			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? 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 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 CR Counselor From Month June Year 2011 To Month Aug Year 2014

Employer RCRC Phone (803) 691-9790

Address Blythewood Park (206 Boney Rd., Blythewood, SC)

Supervisor's Name Paris Lotts 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

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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	509 Cold Branch Dr. Columbia, SC 29223	(803) 970-4285
Cynthia Williams	220 Whitley Lane Columbia, SC 29223	(803) 447-4331
Jennifer Davis	416 Oak Manor Dr. Columbia, SC 29229	(803) 599-3618

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 RECREATION COMMISSION***

***Human Resources Department***

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## 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 2:00 pm to 9pm and Saturday 9:00am to 2:00pm and Sunday 1:00 pm to 6:00pm or 2:00pm to 8:00pm

☒ 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