

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**ALLEN, DORIS A**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/16/14 2:42 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) ALLEN, DORIS A		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 309 North Pinckney Street, Timmonsville, South Carolina 29161		
<b>HOME PHONE:</b> (843) 230-5662	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> milesda2@email.sc.edu
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC <b>Number:</b> [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$42,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time, Per Diem	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, On Call (as needed)	
<b>OBJECTIVE:</b> Motivated social work profession with proven leadership experience and notable qualifications in helping people with disabilities increase their independence and and achieve self-sufficiency.	

**EDUCATION**

<b>DATES:</b> From: 6/2013 To: 5/2014	<b>SCHOOL NAME:</b> University of South Carolina - College of Social Work	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 27 - Semester
<b>MAJOR:</b> Social Work		
<b>DATES:</b> From: 1/2010 To: 5/2013	<b>SCHOOL NAME:</b> University of South Carolina - College of Social Work	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 133 - Semester
<b>MAJOR:</b> Social Work		

**WORK EXPERIENCE**

<b>DATES:</b> From: 2/2014 To: 4/2014	<b>EMPLOYER:</b> Office of the Governor - South Carolina Developmental Disabilities Council	<b>POSITION TITLE:</b> Social Work Intern
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1205 Pendleton Street, Columbia, South Carolina 29201		<b>COMPANY URL:</b> <a href="http://www.sccddc.state.sc.us/index.html">http://www.sccddc.state.sc.us/index.html</a>
<b>PHONE NUMBER:</b> (803) 734-0215	<b>SUPERVISOR:</b> Valarie Bishop - Executive Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 8	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Assist in the development of the council's 2014 Executive Summary for the Governor of South Carolina. Participate in on-site grant monitoring to ensure grant compliance, provide grantee support and technical assistance, and ensure relationship continuity. Review grant applications, contracts, and quarterly reports received from grantees that address the council's current objective areas to include Health, Employment, Community Supports, and Self-Advocacy.		
<b>REASON FOR LEAVING:</b> Graduated. Seeking gainful employment.		
<b>DATES:</b> From: 8/2013 To: 4/2014	<b>EMPLOYER:</b> Arc of South Carolina	<b>POSITION TITLE:</b> Social Work Intern
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1202 12th Street, Cayce, South Carolina 29033		<b>COMPANY URL:</b> <a href="http://arcsc.org/">http://arcsc.org/</a>

<b>PHONE NUMBER:</b> (803) 748-5020	<b>SUPERVISOR:</b> Margie Williamson - Executive Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 16	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Provide targeted case management for individuals and families who qualify to receive support services through SC Department of Disabilities and Special Needs. Ensure that clients have access to a full array of services to address medical, social, educational needs, or other support services needed. Complete assessments and support plans, build collaborative relationships with other agencies, and maintain client records. Review and manage complex cases through establishing interdisciplinary teams and inter-agency collaborations and staffing/consulting with team members/agencies. Review and revise Service Coordination Procedures Manual. Attend and participate in Arc of SC Board of Director's meetings. Assisted Board in the development of by-laws. Creating/drafting policy and procedures for agency. Directs the agency's accreditation/certification process in Standards for Excellence program. Board of Director's member representative on the Mayor's Committee on Employment of People with Disabilities.		
<b>REASON FOR LEAVING:</b> Graduated. Seeking gainful employment.		
<b>DATES:</b> From: 1/2013 To: 8/2013	<b>EMPLOYER:</b> USC School of Medicine- Center for Disability Resources	<b>POSITION TITLE:</b> Program Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 8301 Farrow Road, Columbia, South Carolina 29208		<b>COMPANY URL:</b> <a href="http://uscm.med.sc.edu/cdrhome/">http://uscm.med.sc.edu/cdrhome/</a>
<b>PHONE NUMBER:</b> (803) 935-5231	<b>SUPERVISOR:</b> Susan Rivers - Program Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Initiated first point of contact and conducted telephone interviews/screenings of individuals applying for services through SC Department of Disabilities and Special Needs ID/RD/Autism Division to determine need for eligibility evaluation. Manage and ensure timely retrieval and logging of telephone messages left on the SC Department of Disabilities and Special Needs' statewide Central Referral Center toll free line. Coordinated referral requests to client-selected providers and provided follow up and needed. Researched national, state, and local supports and services available to client systems and provided information and referral to client(s) and families.		
<b>REASON FOR LEAVING:</b> Temporary position		
<b>DATES:</b> From: 1/2012 To: 4/2013	<b>EMPLOYER:</b> USC School of Medicine - Center for Disability Resources: Supported Community Living Initiative	<b>POSITION TITLE:</b> Social Work Intern
<b>ADDRESS:</b> (Street, City, State, Zip Code) 8301 Farrow Road, Columbia, South Carolina 29208		<b>COMPANY URL:</b> <a href="http://uscm.med.sc.edu/supported_living/referrals.asp">http://uscm.med.sc.edu/supported_living/referrals.asp</a>
<b>PHONE NUMBER:</b> (803) 935-5947	<b>SUPERVISOR:</b> Kristi Hartwell - Program Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 16	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Completed training in PATH/Life planning and Supported Employment. Provided counseling services and assisted program participant in developing individualized housing and/or employment plans and financial profile. Facilitate individualized action plan meetings using the Planning Alternative Tomorrows with Hope (PATH) method. Assist program participants implement PATH plans utilizing an established circle of support. Assist program participants establish and ensure progress of the support team activities through group meetings. Assist program participants in navigating community programs and services. Identify and access national, state, and local resources for housing and employment and other applicable community resources; provide information and referral as needed. Maintain a high level of confidentiality at all.		
<b>REASON FOR LEAVING:</b> Graduated with my Bachelor's in Social Work. Internship ended.		
<b>DATES:</b> From: 8/2006 To: 4/2009	<b>EMPLOYER:</b> Praxair Healthcare Services	<b>POSITION TITLE:</b> Supervisor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 181 E Evans Street, Florence, South Carolina 29506		<b>COMPANY URL:</b> <a href="http://www.praxair.com/">http://www.praxair.com/</a>
<b>PHONE NUMBER:</b> (843) 413-0491	<b>SUPERVISOR:</b> Christy Donnely - Area Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,840.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 6
<b>DUTIES:</b> Oversee day to day operations of local branch. Monitor and evaluate the efficiency of customer service, warehouse, and equipment distribution. Created an environment of excellence in serving clients. Responsible for personnel related functions, such as hiring, training, coaching, performance appraisals, disciplining staff, and payroll. Assist account executive and territory managers in developing sales strategies. Ensure weekly and monthly reports were submitted to regional office in a timely manner. Participated in regional conference calls and attended required meetings and training. Ensure that agency operations remain in compliance with federal, state, local, and JCAHO regulations. Responsible for directing and implementing Performance Improvement Process and demonstrated improved outcomes.		
<b>REASON FOR LEAVING:</b> Region restructure- position eliminated. **Praxair Healthcare Services was acquired by Apria Healthcare Services		
<b>DATES:</b> From: 4/2003 To: 6/2006	<b>EMPLOYER:</b> Apria Healthcare Services	<b>POSITION TITLE:</b> Supervisor

<b>ADDRESS:</b> (Street, City, State, Zip Code) 799 N. Cashua Drive, Florence, South Carolina 29501		<b>COMPANY URL:</b> http://www.apria.com/wps/portal/apria/home
<b>PHONE NUMBER:</b> (843) 665-6294	<b>SUPERVISOR:</b> Steve - Region Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,200.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 5
<b>DUTIES:</b> Monitor staffing levels, expenditures, assets, equipment utilization and inventory levels to ensure maximum profit margins/P&L's. Ensure the effective operation and management of all functional areas of the branch such as customer service, accounts receivable/payable, clinical, logistics and distribution. Ensure office procedures are in compliance with company policies as well as federal, state, and local regulations. Assist in developing, interpreting, and implementing new policies. Responsible for hiring, training, and coaching Create an environment of excellence in serving customers.		
<b>REASON FOR LEAVING:</b> Region restructure; position eliminated.		
<b>DATES:</b> From: 3/1998 To: 9/2001	<b>EMPLOYER:</b> McLeod Family Practice	<b>POSITION TITLE:</b> Billing Associate
<b>ADDRESS:</b> (Street, City, State, Zip Code) 755 East Smith Street, Timmonsville, South Carolina 29161		<b>COMPANY URL:</b> www.mcleodhealth.org/
<b>PHONE NUMBER:</b> (843) 346-3900	<b>SUPERVISOR:</b> Debbie - Office Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,900.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Responsible to information gathering and data entry; medical coding and insurance billing (Medicare, Medicaid, commercial insurances, and private pay). Responsible for collections and follow-up. Coordinated and performed billing audits and statistical data collection for reporting.		
<b>REASON FOR LEAVING:</b> Resigned. Went on leave to take care of terminally ill grandmother.		
<b>DATES:</b> From: 8/1994 To: 3/1998	<b>EMPLOYER:</b> McLeod Home Health	<b>POSITION TITLE:</b> Health Information Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 555 East Cheves Street, Florence, South Carolina 29501		<b>COMPANY URL:</b> www.mcleodhealth.org/
<b>PHONE NUMBER:</b> (843) 777- 3050	<b>SUPERVISOR:</b> Debbie Griffin - Health Information Management Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,700.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Verified billing and diagnostic codes for charges assigned to patient records daily. Made adjustments as necessary. Coordinated and participated billing/chart audits. Data entered patient demographic information and collaborated with clinical staff regarding discrepancies.		
<b>REASON FOR LEAVING:</b> Advancement opportunity		
<b>DATES:</b> From: 8/1990 To: 8/1994	<b>EMPLOYER:</b> Blue Cross and Blue Sheild	<b>POSITION TITLE:</b> Service Center Representative
<b>ADDRESS:</b> (Street, City, State, Zip Code) 200 Dozier Blvd., Florence, South Carolina 29501		<b>COMPANY URL:</b> www.bcbs.com/careers
<b>PHONE NUMBER:</b> (843) 665 -7822	<b>SUPERVISOR:</b> Sophia Jefferies - Service Center Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,200.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Accountable for prompt, accurate, thorough and courteous responses to call customer inquiries. Responding to inbound inquiries regarding claims status. Responsible for researching the status of claims submitted by beneficiaries and providers, to ensure accurate and timely processing. Initiated recoupment procedures as necessary. Provided explanation of benefits and features.		
<b>REASON FOR LEAVING:</b> Advancement opportunity		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**Typing:  
Data Entry:**OTHER SKILLS:**Computer- Microsoft office(word,power-point,excel) - Expert - 20 years and 0 months  
Medical Coding and Billing - Skilled - 15 years and 0 months**LANGUAGE(S):****ADDITIONAL INFORMATION**

**Professional Memberships**

National Association of Social Workers  
American Case Management Association

**Professional Associations**

2013 South Carolina Leadership in Neurodevelopmental and Related Disabilities (LEND) Trainee

**Professional Associations**

Partner's in Policy-making - Pro-Parents of South Carolina graduate - Class 16  
Southeast Technical Assistance Continuing Education Center (TACE)

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Susan Davis	<b>POSITION:</b> Program Coordinator - Supported Employment
<b>ADDRESS:</b> (Street, City, State, Zip Code) 8301 Farrow Road, Columbia, South Carolina 29208		
<b>EMAIL ADDRESS:</b> Susan.Davis@uscmed.sc.edu		<b>PHONE NUMBER:</b> (803) 606-3815
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Dr. Nicholas Cooper-Lewter, LISW-CP	<b>POSITION:</b> Licensed Psychotherapist, Executive Life Coach
<b>ADDRESS:</b> (Street, City, State, Zip Code) Cooper Lewter Consulting, LLC, 120 Wildewood Park Drive, Columbia, South Carolina 29223		
<b>EMAIL ADDRESS:</b> cooperlewter@bellsouth.net		<b>PHONE NUMBER:</b> (803) 462 - 7181
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Dr. Susan Parlier	<b>POSITION:</b> BSW & Social Work Minor Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) University of South Carolina, College of Social Work, Columbia, South Carolina 29208		
<b>EMAIL ADDRESS:</b> parlier@mailbox.sc.edu		<b>PHONE NUMBER:</b> (803) 777-6259

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
Yes
8. **If yes, please explain.**  
Region restructure  
Position elimination
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Dr. Susan Parlier  
University of South Carolina  
College of Social Work  
Columbia, SC 29203  
  
Susan Davis  
8301 Farrow Road  
Columbia, SC 29208
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I have several years of experience as a Health Information Management Coordinator. I collected sensitive information from patients and entered the information into the agency's database. For reporting and billing audits, I retrieved information for review.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by DORIS A ALLEN on 10/16/14 2:42 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Bailey, Michael B**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/16/14 2:43 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Bailey, Michael B		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2490 Fish Hatchery Road, B6, West Columbia, South Carolina 29172		
<b>HOME PHONE:</b> 803-514-7238	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> Baileym3@citadel.edu
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC <b>Number:</b>	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$42,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b> I am seeking to find a supervisory/management level position inside of a dynamic and challenging company that will allow me to further utilize my management, leadership, and organization and planning skill set. I am also seeking longevity which an agency that has room for internal growth.	

**EDUCATION**

<b>DATES:</b> From: 8/2014 To: Present	<b>SCHOOL NAME:</b> University of South Carolina	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Public Health - Policy Management		
<b>DATES:</b> From: 8/2009 To: 8/2013	<b>SCHOOL NAME:</b> The Citadel, The Military College of South Carolina	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Charleston, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 123 - Semester
<b>MAJOR:</b> Health and Wellness		

**WORK EXPERIENCE**

<b>DATES:</b> From: 12/2013 To: Present	<b>EMPLOYER:</b> Department of Mental Health - Division of Inpatient Services	<b>POSITION TITLE:</b> Human Resource Manager I/Recruitment And Employment Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,960.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 7

**DUTIES:**

- Currently leading the centralization of recruitment and employment for the following state run hospitals and programs: Richard M. Campbell Veterans' Nursing Home, Patrick B. Harris Psychiatric Hospital, G. Werber Bryan Adult Psychiatric Hospital, William S. Hall Psychiatric Institute, Morris Village Alcohol and Drug Addiction Treatment Center, Morris Village Infirmary, Sexually Violent Predators Treatment Program, Veterans' Victory House Services, Tucker Nursing Care Center, and other DIS Central Programs/Departments.
- Directs a team of 2 processing managers and 5 specialists in order to successfully develop staffing processes that support "Full Life Cycle Recruitment" business goals for Clinical and other disciplines.
  - Creates and approves job descriptions and online announcement/job postings.
  - Ensures the establishment of new positions, the placement of new staff, the replacement of old staff and reclassification of vacant and occupied positions and classifications.
  - Manages NeoGov, a Taleo based replica, in order to track applicant progress throughout the full cycle recruitment process.
  - Promotes workplace diversity through diversity hiring initiatives based off EEO & OFCCP data collection.
  - Utilizes a wide variety of communication methods to direct program managers and executive leadership on change management

principals and procedures needed for the successful centralization of the previously mentioned inpatient facilities.

- Cultivates and maintains strong working relationship with the public, outside agencies, and contract companies in order to provide permanent and temporary employee placement.
- Creates and utilizes PowerPoint presentations, technical manuals and other training materials needed to successfully conduct training for directors, program managers, project managers and their supporting administrative personnel on policies and procedures.
- Organized summer nursing internship and co-op program to recruit and retain future candidates.
- Monitors all incoming actions and or requests and delegates those actions as necessary.
- Organizes new orientation list for educational/orientation department.
- Combined state approved staffing standards with organizational charts and work schedules rules to create the agency's first real time staffing board.
- Provides recommendations to program managers and directors on new hires on SLED reports.
- Provides preliminary class and compensation ranges for interview purposes and hiring purposes.
- Collects and assigns Employment Performance Management System (EPMS) reports for processing.
- Monitors employee attendance, ensures efficiency in interdepartmental work flow, and provides counseling/coaching in times of poor performance or employee relation issues.
- Provides advice and guidance to management regarding employee relation issues including but not limited to FMLA, leave without pay, extended leave, suspensions, terminations, grievances, appeals, warning notices and disciplinary actions processes.
- Accesses South Carolina Enterprise Information System (SCEIS) to Human Resource related duties.
- Schedules interviews, arranges candidate travel, and supervises the preparation of offer letters,
- Aggressively recruits for various discipline using social media, Boolean string searches and internal candidate referral lists.
- Acts as appointed designee in the absence of human resource director.

#### Impacts/Accomplishments

- Created historical workforce data reports for the South Carolina Senate to review during the annual finance review.
- Designed, created and implemented the 2014 Hiring/Recruitment Pilot Program Initiative, an accelerated hiring program used to expedite the interview and hiring processes for selections made across the state.
- Designed, created and implemented an interdepartmental routing system to accommodate the centralized restructuring.
- Created a successful agency wide tracking log/spreadsheet to track full life cycle recruitment across all DIS facilities and hospital via the use of pivot tables, data validation lists, and milestone timeline options.
- Decreased high priority vacancy rates for classifications mandated by Joint Commission from that of 45% to 11% in a time span of 8 months.
- Assisted in the successful implementation of various nursing and nursing related initiatives to help combat salary inequities across the division, standardize experience equivalencies, and raise salaries in an effort to compete against private hospitals and medical facilities.
- Created and implemented real-time Staffing/Board Standards for centralized inpatient facilities.

#### REASON FOR LEAVING:

Still employed.

<b>DATES:</b> From: 8/2012 To: 12/2013	<b>EMPLOYER:</b> Chipton-Ross Inc.	<b>POSITION TITLE:</b> Account Manager/Recruiter
<b>ADDRESS:</b> (Street, City, State, Zip Code) 6926 Rivers Ave, North Charleston, South Carolina 29406		<b>COMPANY URL:</b> www.Chiptonross.com
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Chris Connoway - Southeast Branch Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,333.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 30

#### DUTIES:

- Account Executive/Recruiter
- Managed all live vacancies for delegated accounts.
  - Worked closely with company appointed point of contact to ensure that the candidate pipeline remained full.
  - Advertised newly established vacancies and monitored existing announcements/job advertisements.
  - Pre-screened candidates prior to submitting applicants and/or profiles.
  - Coordinated with vendor to arrange interviews and secure travel accommodations if needed.
  - Confirmed agency-vendor mark-ups and negotiated offers for selected candidates.
  - Maintained professional relationships with all placed contractors.
  - Utilized Applicant Tracking System and Candidate Relationship Management systems.
  - Assisted contractors in the development of quality resume preparation and interviewing skills.
  - Successfully scheduled career fairs and assessment points through Boeing and SC Works.
  - Managed/monitored the quality of work for over 30 placed candidates at multiple work locations.
  - Analyzed local labor market data and employment trends.
  - Maintained previous recruiter duties in support of new role.

#### Talent Acquisition/ Recruiter

- Followed full life cycle recruitment which including cold calling, pre-screening, referring candidates, tracking interviews, conducting clearance verification, processing hires, and terminating/ending employment.
- Managed contractor issues including but not limited to: counseling, tracking attendance, raise requests, payroll issues, etc.
- Maintained recruiter-contractor relationship during and after contracts to retain quality contractor pool.
- Worked closely alongside account managers, FSO team, candidates and operations team to ensure organizational efficiency and quality assurance.
- Trained and managed new administrative staff until self-sufficient.
- Negotiated salaries, hourly rates, Per Diem splits, and relocation packages to finalize offers for managed contractors.
- Contributed to Social Media Focus Team to help generate additional traffic.
- Aided in a companywide migration from WinSearch recruiting software to Ultra Staff recruiting software by administering additional training for any internal employees in need.
- Successfully placed and managed contractors at The Aircraft Company, Boeing, Honeywell, Northrop Grumman and L3 Communications.
- Applicant Tracking System and Candidate Relationship Management experience.
- Promoted to Account Manager.

#### Operations Assistant

- Assisted operation team with on-boarding paper work and processes including but not limited to: I-9 Verification paperwork, drug screen visits, benefits paperwork, etc.
- Revised in-house payroll distribution process for southeast branch.
- Organized branch events for over 200+ employees
- Routed calls via switch board for east coast branch in addition to west coast in absence of central office administrative personnel, directed walk-in traffic, scheduled meetings and conference room availability.
- Tracked all incoming correspondence via excel spreadsheets and other Microsoft Office programs.
- Promoted to Recruiter.

**REASON FOR LEAVING:**

Now that I've acquired my degree I'm looking to further develop my management and leadership skills.

<b>DATES:</b> From: 6/2013 To: 11/2013	<b>EMPLOYER:</b> The Medical University of South Carolina (MUSC), HR Center of Expertise	<b>POSITION TITLE:</b> Center of Excellence/Human Resources Intern
<b>ADDRESS:</b> (Street, City, State, Zip Code) 261 Calhoun Street, MSC 617, Charleston, South Carolina 29425		<b>COMPANY URL:</b> www.musc.edu
<b>PHONE NUMBER:</b> 843-792-7964	<b>SUPERVISOR:</b> Francis Glanville - Manager, HR Center of Expertise	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 6	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

- Assisted in the coordination of staff training for various databases such as the FAIR CV module and REDCap.
- Conducted internal audits to monitor hospital compliance and adherence to state regulations in an effort to maintain an active license and accreditation.
- Displayed/presented audit findings via excel based data validation lists and interchangeable pivot tables.
- Updated "Scope of Practice" profiles to ensure proper coverage was provided for Nurse Practitioners.
- Created and revised technical manuals for in-house employees on policies and procedures.
- Conducted interviews alongside human resource personnel to fill vacant FTEs and other positions.
- Provided assistance in H-1B and J-1 Visa processing using InsZoom.
- Subject matter consultant for Marketplace Open Enrollment.
- Knowledge of university and college human resource policies and procedures.

**REASON FOR LEAVING:**

Internship: Acquired necessary experience/expertise.

<b>DATES:</b> From: 7/2007 To: 8/2009	<b>EMPLOYER:</b> "A" Bail For You Bail Bonding Inc.	<b>POSITION TITLE:</b> Front Desk Attendant/ Operations
<b>ADDRESS:</b> (Street, City, State, Zip Code) 24024 Dorchester Road, North Charleston, South Carolina 29409		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 843-532-1760	<b>SUPERVISOR:</b> Michael Heyward - Business Partner/Co-Owner	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,566.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

- Provided excellent customer service within a high volume environment.
- Used Microsoft Suite to carry out administrative duties such as basic accounting, scheduling of court dates, and filling contracts and other paperwork.
- Managed payroll distribution and payroll information via QuickBooks 2007.
- On boarded new employees and scheduled training/certification classes with SLED.
- Reported employee relation issues.
- Assisted in monitoring electronic monitor/ankle monitor.
- Entrusted with confidential paperwork and other sensitive material.
- Conducted data entry tasks upon request. Effectively communicated messages and memos.
- Frequently communicated with dispatch operators for various detention and correctional centers to receive up to date information on inmate processing, codes, charges and bond amounts.
- Assisted in the creation of surety and personal bond paperwork.
- Assisted owner and business managers with other duties as assigned.

**REASON FOR LEAVING:**

Enrolled into The Citadel, The Military College of South Carolina.

**CERTIFICATES AND LICENSES**

<b>TYPE:</b> CPR/AED Certified	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>

**Skills**

<b>OFFICE SKILLS:</b> Typing:62 Data Entry:0
<b>OTHER SKILLS:</b>
<b>LANGUAGE(S):</b>

**ADDITIONAL INFORMATION**

**Additional Information**

## Volunteer Work

Burke High School –Mentor - Charleston, SC

Crisis Ministries – Kitchen Volunteer - Charleston, SC

Habitat for Humanity – Construction Volunteer - Berkeley County, SC

MUSC Healthy Heart Fitness Volunteer – Fitness Instructor/Volunteer - Charleston, SC

The Citadel, Military College of South Carolina Paws Program – Speaker/Volunteer – Charleston, SC

## Clubs and Organizations

South Carolina Department of Mental Health Awards Committee Appointment - 2014

(State Association) SC Public Health Association – Chair, Health and Human Services Section - 2014

(State Association) SC Public Health Association – Young Professionals Committee Appointment - 2014

## Scholastic Achievements

Two Time National Nominee and Representative for the NBSLD Conference - 2011/2012

One of five cadets nominated and selected out of a pool of over 2,500 students to represent The Citadel, The Military College of South Carolina at the NBSLD national leadership conference for two consecutive years.

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Spencer Miller	<b>POSITION:</b> Human Resource Manager, SC Budget & Control Board
<b>ADDRESS:</b> (Street, City, State, Zip Code) 8301 Parklane Road, Columbia, South Carolina 29223		
<b>EMAIL ADDRESS:</b> smiller@ohr.sc.gov		<b>PHONE NUMBER:</b> (803) 896-5300
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Christopher Connaway	<b>POSITION:</b> Branch Manager - Chipton Ross, Inc.
<b>ADDRESS:</b> (Street, City, State, Zip Code) North Charleston, South Carolina		
<b>EMAIL ADDRESS:</b> cconaway@chiptonross.com		<b>PHONE NUMBER:</b> (843)554-5800 x 186

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
South Carolina Department of Mental Health, Division of Inpatient Services
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Chris Connaway - (800) 927-9318 (Chipton-Ross) (Manager)  
Andrew Bettis - (843) 876-2259 (MUSC)
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Currently leading the centralization of recruitment and employment for the following state run hospitals and programs: Richard M. Campbell Veterans' Nursing Home, Patrick B. Harris Psychiatric Hospital, G. Werber Bryan Adult Psychiatric Hospital, William S. Hall Psychiatric Institute, Morris Village Alcohol and Drug Addiction Treatment Center, Morris Village Infirmary, Sexually Violent Predators Treatment Program, Veterans' Victory House Services, Tucker Nursing Care Center, and other DIS Central Programs/Departments.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Michael B Bailey on 10/16/14 2:43 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Brummett, Tara C**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/27/14 5:06 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Brummett, Tara C		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 457 Cape Jasmine Way, Lexington, South Carolina 29073		
<b>HOME PHONE:</b> (803) 422-2986	<b>ALTERNATE PHONE:</b> (803) 898-4258	<b>EMAIL ADDRESS:</b> tbonej8@hotmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$32,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time, Part Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Weekends	
<b>OBJECTIVE:</b> The objective for Tara C. Brummett is to obtain employment in order to support herself and her two children. It is preferable to find a position where helping others is a daily mission.	

**EDUCATION**

<b>DATES:</b> From: 1/1998 To: 12/2002	<b>SCHOOL NAME:</b> University of South Carolina	
<b>LOCATION:</b> (City, State) Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Media Arts/Film	<b>UNITS COMPLETED:</b> 15 - Semester	

**WORK EXPERIENCE**

<b>DATES:</b> From: 12/2011 To: 7/2014	<b>EMPLOYER:</b> South Carolina Department of Social Services	<b>POSITION TITLE:</b> Foster Home Licensing Consultant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1535 Confederate Avenue, Columbia, South Carolina 29202		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 898-4258	<b>SUPERVISOR:</b> Jacqueline Shuler - Program Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**  
Responsible for daily functions involving both county and private agency foster home licensing. Duties include but are not limited to completing the required regulatory process for licensure and relicensure of foster and adoptive homes throughout the state of South Carolina. Knowledge of policies, procedures and laws regarding foster home licensure in the state of South Carolina as well as revisions made to policy. Provide technical assistance, training, and consultation related to policies, procedures, laws and regulatory issues regarding foster home licensure to county licensing staff. Develop and provide training and materials to enhance the foster home licensing process and employee performance. Management of informational databases regarding foster home licensure. Responsible for meeting deadlines as they pertain to licensure and responsible for distribution of requests for necessary forms and information regarding current and former foster homes. Maintain working relationships with county foster home licensing workers and supervisors as well as South Carolina Fire Marshal, DHEC and SLED entities.

<b>REASON FOR LEAVING:</b> Seeking a change.		
<b>DATES:</b> From: 1/2008 To: 12/2011	<b>EMPLOYER:</b> Lexington County Department of Social Services	<b>POSITION TITLE:</b> Human Services Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1070 South Lake Drive, Suite A, Lexington, South Carolina 29073		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 785-2945	<b>SUPERVISOR:</b> Rebecca Carrier - Program Coordinator I	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>HOURS PER WEEK:</b> 50	<b>SALARY:</b> \$1,650.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> The position began as a Volunteer position in January 2008 and quickly became a full-time position in Foster Home Licensing. Responsibilities include recruiting, assessment, licensing and overall maintenance of foster home licenses for Lexington County, South Carolina. Performed orientation for prospective foster families, initiated licensing and processed licenses from intake to completion to include written homestudies (Certified Investigator #982-095). Responsible for locating initial placement for children that enter foster care. Completed in-home visits quarterly for foster care facilities. Manage a caseload of fifty (50) or more foster homes at any given time. Implement resolutions to issues and/or problems reported by foster parents. Located recruiting resources via local events (Peach Festival, Lexington Oktoberfest, etc.). Initiate and maintain charitable relationships in regards to community donations for children in foster care in Lexington County. Act as liaison to the Lexington County Foster and Adoptive Parent Association (LCFAPA) and produced monthly newsletter for licensed foster parents. Proficient in CAPSS, Microsoft Word, and Publisher. Completed Basic Child Welfare, MEPA, Civil Rights.		
<b>REASON FOR LEAVING:</b> Took a position with State Office Foster Home Licensing		
<b>DATES:</b> From: 9/2000 To: 2/2007	<b>EMPLOYER:</b> Michaels Arts and Crafts	<b>POSITION TITLE:</b> Frame Shop Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) 112 Harbison Blvd, Columbia, South Carolina 29212		<b>COMPANY URL:</b> www.michaels.com
<b>PHONE NUMBER:</b> (803) 407-7913	<b>SUPERVISOR:</b> Jeffrey Croom912-927-3692/Lori Hanlon 462-0624 - Store Manager/Assistant Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Immediate supervision of a minimum of 20 employees at any given time. Responsible for meeting deadlines set by in store management and corporate offices while maintaining a close working relationship with store GM, assistant manager, Divisional GM. Duties included but not limited to customer service and assistance, perpetual stock ordering, cash and credit auditing, relationship upkeep with distributors and vendors, multitasking in a fast paced environment.		
<b>REASON FOR LEAVING:</b> Better opportunity to increase earning potential.		
<b>DATES:</b> From: 2/2006 To: 12/2006	<b>EMPLOYER:</b> Webb Rawls Galleries	<b>POSITION TITLE:</b> General Manager/Framer
<b>ADDRESS:</b> (Street, City, State, Zip Code) 619 Harden Street, Columbia, South Carolina 29205		<b>COMPANY URL:</b> www.webrawls.com
<b>PHONE NUMBER:</b> (803) 407-6946	<b>SUPERVISOR:</b> Kim Lemasters - General Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,200.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> General customer service, helping with framing choices, completing customer framing work within deadlines, cash auditing, general maintenance, computer software.		
<b>REASON FOR LEAVING:</b> The owner of the business set forth policies and guidelines to be followed to ensure the safety and perfection of customer artwork, but did not follow them herself. Additionally, the building needed updating as it contained asbestos tiling on the ceiling and mold in the walls. Health complaints on my part went ignored.		
<b>DATES:</b> From: 2/2004 To: 2/2005	<b>EMPLOYER:</b> Wings and Ale of Lexington	<b>POSITION TITLE:</b> General Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) 145 Ellis Avenue, Lexington, South Carolina 29073		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 359-4475	<b>SUPERVISOR:</b> Danny Hunter - Owner Operator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 70	<b>SALARY:</b> \$1,400.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Complete customer service and business operations. Responsible for general house stock (liquor supply, bar stock items, food supply, office supply, staff implements), hiring and dismissal of staff, payroll, office management, staff managements, bank deposits, perpetual cash accounting, credit card auditing, multitasking. Overall responsibility for total function of business and customer relations		
<b>REASON FOR LEAVING:</b> Hours were too long.		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**Typing:40  
Data Entry:0**OTHER SKILLS:**

Microsoft Office Products - Skilled - 20 years and 0 months

**LANGUAGE(S):****ADDITIONAL INFORMATION**

**Honors & Awards**

Continually participate in the South Carolina State Fair Professional division for print Photography. Prior award recipient.

**REFERENCES**

<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Pamela Ferrara	<b>POSITION:</b> Director, Savannah Law Library
<b>ADDRESS:</b> (Street, City, State, Zip Code) 128 Sycamore Crossing, Savannah, Georgia 31410		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (912) 429-8865
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Daniel Turner	<b>POSITION:</b> Home Furniture Installations/Michaelis Furniture
<b>ADDRESS:</b> (Street, City, State, Zip Code) 111 Santa Barbara Court, West Columbia, South Carolina 29170		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 397-7860
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Rene Sharkey	<b>POSITION:</b> Pro-Parents, Training Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 272 Conrad Circle, Columbia, South Carolina 29212		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 603-6114
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Christine Mervine	<b>POSITION:</b> Special Needs Foster Care Provider
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2905 Neely Wingard 70Road, Leesville, South Carolina 29070		
<b>EMAIL ADDRESS:</b> Cmervine@yahoo.com		<b>PHONE NUMBER:</b> (803) 767-7190
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Charles Jeremias	<b>POSITION:</b> Mack Truck/Volvo America Sr. Engine Systems Analyst
<b>ADDRESS:</b> (Street, City, State, Zip Code) SC Highway 395 Box 395, Newberry, South Carolina 29108		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 940-0514
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Michael Farris	<b>POSITION:</b> Home Depot Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1060 Pulpit Lane, Vinton, Virginia 24179		
<b>EMAIL ADDRESS:</b> michael_farris@ymail.com		<b>PHONE NUMBER:</b> (540) 394-1690

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
No
- 4. If so, in which agency do you currently work?**
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Rene Sharkey 803-603-6114  
272 Conrad Circle, Columbia, SC  
  
Christine Mervine 803-767-7190  
2905 Neely Wingard Road  
Leesville, SC 29070
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Database experience with foster families, collection of information from applicants, determination of appropriateness of applicants, dissemination of information for consideration of applicants.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Tara C Brummett on 10/27/14 5:06 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Campbell, Emma J**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/31/14 9:20 AM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Campbell, Emma J		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 105 Nonna Lane, Seneca, South Carolina 29678		
<b>HOME PHONE:</b> (864) 324-9052	<b>ALTERNATE PHONE:</b> (864) 982-8129	<b>EMAIL ADDRESS:</b> ejcampbell433@hotmail.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$50,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b> To obtain a responsible and challenging position that will utilize my educational skills, expand my knowledge and offer opportunities for personal and professional growth.	

**EDUCATION**

<b>DATES:</b> From: 4/2008 To: 11/2010	<b>SCHOOL NAME:</b> Walden University	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Baltimore, Maryland	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 66 - Quarter
<b>MAJOR:</b> Public Administration		
<b>DATES:</b> From: 8/2005 To: 8/2007	<b>SCHOOL NAME:</b> Limestone College	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Gaffney, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Business Administration		
<b>DATES:</b> From: 1/1999 To: 8/2001	<b>SCHOOL NAME:</b> Tri-County Technical College	<b>DEGREE RECEIVED:</b> Associate's
<b>LOCATION:(City, State)</b> Pendleton, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 66 - Semester
<b>MAJOR:</b> Office Systems/Business Administration		
<b>DATES:</b> From: 9/1978 To: 5/1981	<b>SCHOOL NAME:</b> Seneca High School	<b>DEGREE RECEIVED:</b> High School Diploma
<b>LOCATION:(City, State)</b> Seneca, SC 29678, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

**WORK EXPERIENCE**

<b>DATES:</b> From: 7/2013 To: Present	<b>EMPLOYER:</b> Tri-County Technical College	<b>POSITION TITLE:</b> Program Director
<b>ADDRESS:</b> (Street, City, State, Zip Code) 7900 Highway 76, Pendleton, South Carolina 29670		<b>COMPANY URL:</b> www.tctc.edu
<b>PHONE NUMBER:</b> 864-646-1516	<b>SUPERVISOR:</b> Dan Averrette - Dean	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37.5	<b>SALARY:</b> \$3,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 1

<b>DUTIES:</b> Manage daily operations of the Center to counsel and assist participants in the center with preparation for the GED, college and admissions testing, and orientation for online learning, fast track/contextualized modules, and learning community. Create contextualized learning modules and expand continuing education modules.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 8/2007 To: 9/2012	<b>EMPLOYER:</b> NAWIC Education Foundation	<b>POSITION TITLE:</b> Administrator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 100 N. Palmetto Blvd, Clemson, South Carolina 29634		<b>COMPANY URL:</b> www.nawiceducation.org
<b>PHONE NUMBER:</b> (864) 656-3489	<b>SUPERVISOR:</b> Amy Berg - President	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 2
<b>DUTIES:</b> Nonprofit supplying women in the construction industry and educational institutions, with educational materials and certification opportunities. Administrator Senior manager, answering to a 25 member Board of Directors, and providing leadership to drive all daily activities of the organization, including financial management, budget administration, administrative support, printing, inventory, shipping, purchasing, vendor negotiation etc. Manage book sales and ship orders to customers. Maintain the membership database, entering and editing data and generating reports. Partnered with a provider to administer certification testing for the Construction Bookkeeping Technician (CBT), Certified Construction Associate (CCA), Construction Industry Technician (CIT), and the Construction Document Specialist (CDS) certifications. Lead funding efforts to support daily operations and service delivery. Target sponsors, coordinate fundraising events, and write grants. Act as liaison between the customer and the Executive Board to resolve any complaints. Develop meeting agendas and participate in regular Board meetings. Key Projects and Accomplishments Key player in the initiative to modernize the certification testing process and implement online testing within a two-year deadline.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 2/2004 To: 12/2006	<b>EMPLOYER:</b> SHARE, Inc.	<b>POSITION TITLE:</b> Case Manager III
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1200 Pendleton St, Greenville, South Carolina 29602		<b>COMPANY URL:</b> www.sharesc.org
<b>PHONE NUMBER:</b> (864) 882-3495	<b>SUPERVISOR:</b> Roslyn Bryant - Community Services Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,400.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 1
<b>DUTIES:</b> A services focused nonprofit that provides services to low income individuals. Case Manager III/Case Manager (2004-2006) Promoted to the lead Case Manager position, providing strong leadership for the Cultivating Habits, Opportunities, Interest, and Career Enhancements for Self-Sufficiency (CHOICES) program. Recruited 25 at-risk youth and high school dropouts, and provided the resources they needed to improve their school performance by one grade level or obtain their GED. Coordinated with tutors and provided access to a computer center.		
<b>NONPROFIT LEADERSHIP EXPERIENCE</b> Developed case plans and goals with each student and tracked their achievement. Counseled the students on career choices, job searching, and interviewing. Partnered with local businesses to participate in job fairs and to provide employment opportunities for the students. Drove funding efforts through the solicitation of sponsorships, donations, and grants. Complied with the Workforce Investment Act requirement on reporting. Key Projects and Accomplishments Partnered with a local factory to enroll their workers into the program. As a result, the workers obtained their GEDs and the employer donated funding to pay for tutors. Captured a \$2,000 grant to keep the program operational. Honored for deep commitment and dedication to the program with the Case Manager of the Year Award. Administrative Support Specialist (1999-2001) Performed general office functions, including operating a multi-line telephone system, completing client information packs, etc. Acted as liaison between incoming clients and caseworkers. Generated weekly and bi-weekly reports.		
<b>REASON FOR LEAVING:</b> Grant funding expired		
<b>DATES:</b> From: 2/2001 To: 2/2004	<b>EMPLOYER:</b> Clemson University	<b>POSITION TITLE:</b> Administrative Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 105 Sikes Hall, Clemson, South Carolina 29634		<b>COMPANY URL:</b> www.clemson.edu
<b>PHONE NUMBER:</b> (864) 656-2171	<b>SUPERVISOR:</b> Debbie Kelley - Office Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$1,300.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Administrative Specialist II Provided administrative support services for the Registrar's office, ensuring the smooth flow of business. Supervised the activities of four work-study stude		

<b>REASON FOR LEAVING:</b> secured better paying position		
<b>DATES:</b> From: 8/1999 To: 2/2001	<b>EMPLOYER:</b> SHARE, Inc.	<b>POSITION TITLE:</b> Administrative Support Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1200 Pendleton Street, Greenville, South Carolina 29602		<b>COMPANY URL:</b> www.shareinc.org
<b>PHONE NUMBER:</b> (864) 882-3495	<b>SUPERVISOR:</b> Cathy Stowers - Office Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 30	<b>SALARY:</b> \$1,200.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Answer multi-line telephone system Complete client information packets Act as liaison between incoming clients and caseworkers Generate weekly and bi-weekly excel reports for company vouchers		
<b>REASON FOR LEAVING:</b> Obtained full time position		
<b>DATES:</b> From: 3/1997 To: 4/1999	<b>EMPLOYER:</b> US Engine Valve	<b>POSITION TITLE:</b> Product Technician
<b>ADDRESS:</b> (Street, City, State, Zip Code) 7039 S. Highway 11, Westminster, South Carolina 29693		<b>COMPANY URL:</b> www.usenginevalve.com
<b>PHONE NUMBER:</b> 864-647-2061	<b>SUPERVISOR:</b> Jennifer Pratt - 3rd shift supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,900.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Inspect, operate, and test completed products to verify functioning, machine capabilities, or conformance to customer specifications. Position or align components for assembly, manually or using hoists. Set and verify parts clearances. Rework, repair, or replace damaged parts or assemblies. Read and interpret assembly blueprints or specifications manuals and plan assembly or building operations. Maintain and lubricate parts or components. Assemble systems of gears by aligning and meshing gears in gearboxes. Verify conformance of parts to stock lists or blueprints, using measuring instruments, such as calipers, gauges, or micrometers. Remove rough spots and smooth surfaces to fit, trim, or clean parts, using hand tools or power tool		
<b>REASON FOR LEAVING:</b> to continue my educational career		
<b>DATES:</b> From: 5/1987 To: 3/1997	<b>EMPLOYER:</b> Kendall Company	<b>POSITION TITLE:</b> SCD Associate
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1448 Blue Ridge Blvd, Seneca, South Carolina 29672		<b>COMPANY URL:</b> www.covidien.com
<b>PHONE NUMBER:</b> 864-882-7203	<b>SUPERVISOR:</b> Steve Drakeford - 3rd shift supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,400.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Measure dimensions of finished workpieces to ensure conformance to specifications, using precision measuring instruments, templates, and fixtures. Mount, install, align, and secure tools, attachments, fixtures, and workpieces on machines, using hand tools and precision measuring instruments. Stop machines to remove finished workpieces or to change tooling, setup, or workpiece placement, according to required machining sequences. Transfer commands from servers to computer numerical control (CNC) modules, using computer network links. Check to ensure that workpieces are properly lubricated and cooled during machine operation. Set up and operate computer-controlled machines or robots to perform one or more machine functions on metal or plastic workpieces. Insert control instructions into machine control units to start operation. Review program specifications or blueprints to determine and set machine operations and sequencing, finished workpiece dimensions, or numerical control sequences. Listen to machines during operation to detect sounds such as those made by dull cutting tools or excessive vibration and adjust machines to compensate for problems.		
<b>REASON FOR LEAVING:</b> obtain higher paying job		
<b>DATES:</b> From: 6/1981 To: 2/1987	<b>EMPLOYER:</b> JP Stevens Company	<b>POSITION TITLE:</b> machine operator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 590 JP Stevens Road, Seneca, South Carolina 29678		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 864-654-6500	<b>SUPERVISOR:</b> Sarah Mayes - Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,100.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

Monitor machine operation to detect problems such as defective stitching, breaks in thread, or machine malfunctions.  
 Position items under needles, using marks on machines, clamps, templates, or cloth as guides.  
 Place spools of thread, cord, or other materials on spindles, insert bobbins, and thread ends through machine guides and components.  
 Match cloth pieces in correct sequences prior to sewing them, and verify that dye lots and patterns match.  
 Guide garments or garment parts under machine needles and presser feet to sew parts together.  
 Start and operate or tend machines, such as single or double needle serging and flat-bed felling machines, to automatically join, reinforce, or decorate material or articles.  
 Record quantities of materials processed.  
 Inspect garments, and examine repair tags and markings on garments to locate defects or damage, and mark errors as necessary.  
 Select supplies such as fasteners and thread, according to job requirements.  
 Mount attachments, such as needles, cutting blades, or pattern plates, and adjust machine guides according to specifications

**REASON FOR LEAVING:**

obtained better paying position

**CERTIFICATES AND LICENSES****TYPE:**

Career Development Facilitator

**LICENSE NUMBER:****ISSUING AGENCY:**

Lengel Vocational Services

**TYPE:**

Case Manager of the Year

**LICENSE NUMBER:****ISSUING AGENCY:**

Sunbelt Human Advancement Organization

**TYPE:**

Data Entry Clerk

**LICENSE NUMBER:****ISSUING AGENCY:**

Tri-County Technical College

**TYPE:**

Office Support Specialist

**LICENSE NUMBER:****ISSUING AGENCY:**

Tri-County Technical College

**TYPE:**

Primary Care Triple P Provider

**LICENSE NUMBER:****ISSUING AGENCY:**

Building Connections

**TYPE:**

Global Career Facilitator

**LICENSE NUMBER:**

GCDF13638

**ISSUING AGENCY:**

Center for Credentialing & Education Inc.

**Skills****OFFICE SKILLS:**

Typing:60  
Data Entry:0

**OTHER SKILLS:****LANGUAGE(S):****ADDITIONAL INFORMATION****Volunteer Experience**

Ripple of One Organization-Mentor

The mission of Ripple of One is to empower families to move beyond government assistance and into their full God-given potential.

Safe Harbor Advisory Board

Safe Harbor is a nonprofit organization that provides safe shelter, counseling and advocacy for victims of domestic violence as well as leadership for education and prevention efforts throughout its four-county area of Anderson, Oconee and Pickens.

**Interests & Activities**

ToastMasters

Organization that assist members in communication and leadership development.

Club Secretary 2012-13

Member since April 2012

Safe Harbor Advisory Committee member

Domestic Violence Shelter

April 2014

**REFERENCES****REFERENCE TYPE:**

Professional

**NAME:**

Robin Fulton-Meyer

**POSITION:**

President

**ADDRESS:** (Street, City, State, Zip Code)

651 Danville Drive, Orlando, Florida 32825

**EMAIL ADDRESS:**

robinfultonmeyer@gmail.com

**PHONE NUMBER:**

(951) 733-1300

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Alisha Morris	<b>POSITION:</b> Program Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) G01 Sikes Hall, Clemson, South Carolina 29634		
<b>EMAIL ADDRESS:</b> alisham@clemson.edu		<b>PHONE NUMBER:</b> (864) 656-3431
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Jennifer Pratt	<b>POSITION:</b> Administrative Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 861 Whitworth Circle, Seneca, South Carolina 29678		
<b>EMAIL ADDRESS:</b> jenni4pratt@yahoo.com		<b>PHONE NUMBER:</b> 864-247-3275
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Roger Liska	<b>POSITION:</b> Professor and Chair of Construction Science
<b>ADDRESS:</b> (Street, City, State, Zip Code) 120 Lee Hall, Clemson, South Carolina 29634		
<b>EMAIL ADDRESS:</b> riggor@clemson.edu		<b>PHONE NUMBER:</b> (864) 376-3805

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
Yes
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**  
Bad check over 30 years ago.  
Received Pardon from State of South Carolina
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
Tri-County Technical College
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Diane Greene  
NCCER Senior Director  
13614 Progress Blvd  
Alachua, FL 32615  
(352) 219-8147  
Email: dgreene@nccer.org  
  
Helen Rosemond-Saunders  
Retired Educator  
Oconee County School District  
310 E W Fifth Street  
Seneca, SC 29678  
(864) 882-4662  
Email: helenrs@bellsouth.net
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
While working for NEF (National Association of Women in Construction Educational Foundation) I managed a database of 1000+ women and men who were interested in obtaining certifications offered through this Association. Additionally, the organization had a separate database for their donors that I managed. I also worked with a database while working with Sunbelt Human Advancement Inc. This database consisted of going inside of the SC Works database to manage my caseload.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

---

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Emma J Campbell on 10/31/14 9:20 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Cliett, Jessica L**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/20/14 9:51 AM**  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Cliett, Jessica L		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 321 Keystone Drive, Hopkins, South Carolina 29061		
<b>HOME PHONE:</b> (803) 546-1305	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> JessicaCCU06@aol.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$38,703.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, On Call (as needed)	
<b>OBJECTIVE:</b> Seeking the opportunity to further assist those in need and continue to excel in public service with all socioeconomic statuses with the education and experience I have gathered while working at the Department of Social Services.	

**EDUCATION**

<b>DATES:</b> From: 8/2003 To: 5/2007	<b>SCHOOL NAME:</b> Coastal Carolina University	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Conway, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Psychology		
<b>DATES:</b> From: 8/2003 To: 5/2007	<b>SCHOOL NAME:</b> Coastal Carolina University	<b>DEGREE RECEIVED:</b> Other
<b>LOCATION:(City, State)</b> Conway, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Sociology		

**WORK EXPERIENCE**

<b>DATES:</b> From: 12/2013 To: Present	<b>EMPLOYER:</b> Department of Social Services	<b>POSITION TITLE:</b> Human Services Coordinator I
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29204		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 803-898-8963	<b>SUPERVISOR:</b> Teresa Anderson - Human Services Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Providing optimal case management for Post-Legal Adoption Services to families in Region II and Region V that have adopted SCSS children that are in need of adoption preservation services. Providing intensive casework duties, conducting face to face contacts to ensure safety and risk for the adopted children within the adoptive home environment, practicing accurate timeliness on all cases, accountability for case work practices making referrals to appropriate providers and monitor the services being provided to the adoptive family. Scheduling, maintaining and document pertinent data pertaining to the well-being of all children on the caseload. Provide Intake services for all requests for Post Legal Adoption services through SCSS. Schedule and host Permanency Round Tables and Safety Round Tables for all counties including IFCCS in Region II for Department of Social Services. Also, ensure that personal identifying information is properly used, accessed, gathered, shared and disposed to protect the agency networks and applications by safeguarding systems, equipment and data.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 1/2013 To: 12/2013	<b>EMPLOYER:</b> Department of Social Services	<b>POSITION TITLE:</b> Human Services Coordinator I

<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29202		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Elizabeth Stroup - Richland County Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Maintain, correct and configure the data within CAPSS to assist with the WIGs (Widely Important Goals) formulated within each county to improve on areas of concern. Assist with data entry for employees and correct any data concerning TPR/ Adoption, TPR Complaints, Monthly Face to Face contact with child(ren), family, foster parents, etc. Provide instructional meetings along with formulate Power Point, Excel Spreadsheets to provide hands on assistance and guidance. Schedule and host Permanency Round Tables and Safety Round Tables for Region 2 and monitor tasks assigned to Richland County through spreadsheets. Conduct Documentation Round Table reviews and Peer to Peer case reviews as requested by county director. Maintain and correct data for AFCARS, Permanent Plans, Foster Care Review Board and NYTD services for Richland County Foster Care Division. Also, ensure that personal identifying information is properly used, accessed, gathered, shared and disposed to protect the agency networks and applications by safeguarding systems, equipment and data.		
<b>REASON FOR LEAVING:</b> Transferred to another position to provide Post-Legal Adoption Services to families that have adopted SCSSS children and are needing adoption preservation services.		
<b>DATES:</b> From: 4/2012 To: 1/2013	<b>EMPLOYER:</b> Department of Social Services	<b>POSITION TITLE:</b> Human Services Coordinator I
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29204		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Yvonne K. Wilson - Program Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 6
<b>DUTIES:</b> Foster Care Supervisor must provide guidance and supervision over a unit of six case managers to ensure the safety of children entering foster care system at all times. As a CPS supervisor you are required to maintain a caseload as well as testify for all the foster care cases in family court hearings and criminal court hearings as needed under supervision in the unit. Also, ensure that personal identifying information is properly used, accessed, gathered, shared and disposed to protect the agency networks and applications by safeguarding systems, equipment and data.		
<b>REASON FOR LEAVING:</b> Recommended for transition into Data Analyst position.		
<b>DATES:</b> From: 3/2011 To: 4/2012	<b>EMPLOYER:</b> Department of Social Services	<b>POSITION TITLE:</b> Human Service Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29204		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Cynthia Taylor - Assessment Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Working as an Assessment case manager investigating allegations of child abuse and/ or neglect. Providing general casework duties and practicing accurate timeliness on all assessment cases and accountability for case work with limited supervision. An CPS Investigators are required to testify in child abuse and neglect family court hearings, participate in forensic interviews and be available to testify in criminal court hearings. Also, ensure that personal identifying information is properly used, accessed, gathered, shared and disposed to protect the agency networks and applications by safeguarding systems, equipment and data.		
<b>REASON FOR LEAVING:</b> Promoted to Foster Care Supervisor		
<b>DATES:</b> From: 9/2010 To: 3/2011	<b>EMPLOYER:</b> Department of Social Services	<b>POSITION TITLE:</b> Human Service Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) Greenville, South Carolina 29601		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Courtney Stinnett - Assessment Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Worked as an Assessment case manager in a high volume caseload investigating allegations of child abuse and/ or neglect. Providing general casework duties and practiced accurate timeliness on all assessment cases with limited supervision. An CPS Investigators are required to testify in child abuse and neglect family court hearings, participate in forensic interviews and be available to testify in criminal court hearings. Also, ensure that personal identifying information is properly used, accessed, gathered, shared and disposed to protect the agency networks and applications by safeguarding systems, equipment and data.		
<b>REASON FOR LEAVING:</b> Transferred to Richland County DSS office.		
<b>DATES:</b> From: 3/2009 To: 9/2010	<b>EMPLOYER:</b> Department of Social Services	<b>POSITION TITLE:</b> Human Service Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) Horry, South Carolina 29526		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Becky Paul Vasquez - Foster care Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Worked as an Foster Care case manger with limited supervision providing general casework duties, assisting clients with agency determined treatment plans and/or other services and delivering a wide range of social services to help restore or improve clients self-reliance. All the while providing a professional and comfortable environment to each and every client and strive to reunify clients, both children and adults, with the completion of the agency determined treatment plan through Foster Care. An CPS Foster Care case manager are required to testify in child abuse and neglect family court hearings, participate in forensic interviews and be available to testify in criminal court hearings. Also, ensure that personal identifying information is properly used, accessed, gathered, shared and disposed to protect the agency networks and applications by safeguarding systems, equipment and data.		
<b>REASON FOR LEAVING:</b> Transferred to Greenville County DSS office.		
<b>DATES:</b> From: 9/2007 To: 1/2009	<b>EMPLOYER:</b> Department of Social Services	<b>POSITION TITLE:</b> Human Services Specialist I
<b>ADDRESS:</b> (Street, City, State, Zip Code) Horry, South Carolina 29526		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Peggy Coleman - SNAP Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Worked under limited supervision providing general casework duties, assisting clients with Agency determined policies for SNAP assistance and/or other services and delivering a wide range of social services to help restore or improve clients self-reliance. All the while providing a professional and comfortable environment to each and every client. Also, ensure that personal identifying information is properly used, accessed, gathered, shared and disposed to protect the agency networks and applications by safeguarding systems, equipment and data.		
<b>REASON FOR LEAVING:</b> Applied for Human Service II position.		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Psi Chi Honor Society Certificate	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Coastal Carolina University

#### Skills

<b>OFFICE SKILLS:</b> Typing: Data Entry:
<b>OTHER SKILLS:</b>
<b>LANGUAGE(S):</b> English - <input checked="" type="checkbox"/> Speak <input checked="" type="checkbox"/> Read <input checked="" type="checkbox"/> Write

#### ADDITIONAL INFORMATION

<b>Additional Information</b> Proficient in Microsoft Word, Excel, Power Point, CHIP, CAPPS, SCEIS ( Time Entry), Ability to utilize public records to locate information and/or persons.
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#### REFERENCES

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Joan Boston	<b>POSITION:</b> Human Services Coordinator I-APS Supervisor
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (803) 360-0303
<b>EMAIL ADDRESS:</b> joan.boston@dss.sc.gov		
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Becky McDowell	<b>POSITION:</b> Department of Social Services Saluda County Director
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (864) 554-7214
<b>EMAIL ADDRESS:</b> Becky.Mcdowell@dss.sc.gov		

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
Department of Social Services
- 5. Do you have any relatives employed with the State of South Carolina?**  
Yes
- 6. If yes, please provide below the name(s), relationship, and agency.**  
Radames Zambrana-Torres, Uncle, SCDOT  
Maria Zambrana, Cousin, Department of Education  
William D. Cliett, Father, Department of Corrections
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Joan Boston, 4042 Coronado Dr Columbia, SC 29203, 803-360-0303  
Becky McDowell, 79 Ashton Pointe Dr North Augusta, SC 29841, 864-554-7214
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I worked as a Data Analyst Coordinator collecting, maintaining and processing data to assist with many internal agency programs.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Jessica L Cliett on 10/20/14 9:51 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Cobbs, Charlene R**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/20/14 3:08 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Cobbs, Charlene R		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 205 Salusbury Lane, Post Office Box 290013, Columbia, South Carolina 29229		
<b>HOME PHONE:</b> (803) 760-8046	<b>ALTERNATE PHONE:</b> (803) 760-8046	<b>EMAIL ADDRESS:</b> charlene_cobbs@yahoo.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$40,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: 8/2012 To: 6/2013	<b>SCHOOL NAME:</b> Webster University	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>LOCATION:(City, State)</b> St. Louis, Missouri			<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Teaching an Online Course (Certificate)			
<b>DATES:</b> From: 11/2012 To: 12/2012	<b>SCHOOL NAME:</b> Midlands Technical College	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>LOCATION:(City, State)</b> Columbia, South Carolina			<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Starting a Consulting Business (Certificate)			
<b>DATES:</b> From: 10/2008 To: 8/2011	<b>SCHOOL NAME:</b> Webster University	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> St. Louis, Missouri			<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Educational Technology			
<b>DATES:</b> From: 12/2006 To: 5/2008	<b>SCHOOL NAME:</b> Webster University	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Columbia, South Carolina			<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Counseling			
<b>DATES:</b> From: 12/1996 To: 12/1997	<b>SCHOOL NAME:</b> Midlands Technical College	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DEGREE RECEIVED:</b> No Degree
<b>LOCATION:(City, State)</b> Columbia, South Carolina			<b>UNITS COMPLETED:</b> 20 - Quarter
<b>MAJOR:</b> Local Area Networking			
<b>DATES:</b> From: 8/1990 To: 5/1994	<b>SCHOOL NAME:</b> Claflin University	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Orangeburg, South Carolina			<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Sociology/Criminal Justice			

<b>DATES:</b> From: 8/1986 To: 6/1990	<b>SCHOOL NAME:</b> Eau Claire High School	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> High School Diploma

**WORK EXPERIENCE**

<b>DATES:</b> From: 9/2013 To: Present	<b>EMPLOYER:</b> SC Department of Social Services	<b>POSITION TITLE:</b> Program Coordinator I
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1535 Confederate Avenue, Columbia, South Carolina 29202		<b>COMPANY URL:</b> <a href="https://dss.sc.gov">https://dss.sc.gov</a>
<b>PHONE NUMBER:</b> (803) 898-1736	<b>SUPERVISOR:</b> Reginald Green - Prog. Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,430.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

Create employment training programs.  
Train and launch information seminars and workshops to recruit students into the Operation Fresh Start and Project Hope programs. Coordinate with the 16 technical colleges and local SC agencies to partner with and negotiate proposals for their involvement in employment training programs.  
Develop program advertisements and training modules.  
Build relationships with SC employers to for student job placement.  
Influence communication strategies to support program goals. Increase community awareness.  
Assist with short and long term plans for programs to include monitoring progress, evaluating performance and surveying outcomes.

**REASON FOR LEAVING:**

Currently employed.

<b>DATES:</b> From: 12/2012 To: 9/2013	<b>EMPLOYER:</b> Roper Personnel / McDonnell Law Firm	<b>POSITION TITLE:</b> Data Entry Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 125 Outlet Pointe Blvd, Columbia, South Carolina 29210		<b>COMPANY URL:</b> <a href="http://www.ropersstaffing.com">http://www.ropersstaffing.com</a>
<b>PHONE NUMBER:</b> (803) 798-5800	<b>SUPERVISOR:</b> Michael Roper - Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,200.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

Managed and trained employees in a data entry project to process mortgage loan applications. Achieved a two screen use method for data-entry which promoted speed efficiency when entering income, expenses and liabilities into a web based Loss Mitigation software application. Converted screen shots into PDF's and saved them electronically. Maintained operations to ensure customer confidentiality.

**REASON FOR LEAVING:**

Re-hired with SCDSS.

<b>DATES:</b> From: 11/2000 To: 12/2011	<b>EMPLOYER:</b> SCDSS - Child and Adult Care Food Program	<b>POSITION TITLE:</b> Program Coordinator II (Supervisor)
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3150 Harden Street, Columbia, South Carolina 29202		<b>COMPANY URL:</b> <a href="https://dss.sc.gov">https://dss.sc.gov</a>
<b>PHONE NUMBER:</b> 454-5227	<b>SUPERVISOR:</b> Andrea Patterson - Program Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,300.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 8

**DUTIES:**

Managed three federally funded state government food nutrition programs: Day Care Home, Afterschool Snack and the Emergency Shelter food programs. Supervised and trained over four employees. Reviewed and approved all Program applications, contracts, memos, and budgets. Developed nutrition education trainings, materials and modules for classroom and online settings. Using federal regulations, I launched new and improved ways to develop materials to be used for the program, such as new budget tracking methods, forms, menus, etc.; In addition, I performed technical assistance and alternate approval (for licensed, group and registered child care homes) visits and program audits as well as influenced corrective action plans.

**REASON FOR LEAVING:**

Started a consulting agency and I was working on gaining counseling supervisory hours towards my NCE (exam).

<b>DATES:</b> From: 6/2000 To: 11/2000	<b>EMPLOYER:</b> Fairfield County Substance Abuse Commission	<b>POSITION TITLE:</b> Prevention Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Mary Irby - Program Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 4

**DUTIES:**

- Worked as a prevention specialist implementing a smoking cessation program at the local high school
- Coordinated an after-school program
- Taught a Smoking Cessation class at a local high school

**REASON FOR LEAVING:**

This position was a non-profit position and I didn't have benefits. I was offered a job with the State in Nov of 2011 and I accepted it.

<b>DATES:</b> From: 2/1997 To: 6/2000	<b>EMPLOYER:</b> RCSD One - Parenting and Family Services	<b>POSITION TITLE:</b> Parent Educator
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>

<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Fannetta Pat Gray - Program Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> <ul style="list-style-type: none"> <li>• Implemented a Parenting program for at risk families the Eau Claire and Waverly community</li> <li>• Administered developmental assessments, such as the BRIGANCE Early Childhood Developmental Inventory for children Birth-7 years</li> <li>* Certified PAT (Parents As Teachers for ages B - 5 years)</li> <li>* Taught/instructed GED computer class</li> <li>• Started a character education curriculum class for a boys transitional group for elementary and middle school males and a father's initiative program.</li> <li>* Worked with foot steps, a program developed by RCDS One's Parent and Family Services Program which worked with parents who just gave birth. We discussed parenting and early childhood development and monitored their success for three months.</li> </ul>		
<b>REASON FOR LEAVING:</b> The program was downsizing and I had to take another job.		
<b>DATES:</b> From: 8/1994 To: 2/1997	<b>EMPLOYER:</b> Richland County School District Two	<b>POSITION TITLE:</b> Substitute/Tutor/Summer School Teacher
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Marcia Tidwell - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 30	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> <ul style="list-style-type: none"> <li>• Served as a substitute teacher for grades pre-k through fifth. I also tutored in the after school program, for a group of 3rd and 5th graders.</li> </ul>		
<b>REASON FOR LEAVING:</b> I took a job with Richland School District One.		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Parents as Teachers Certificate	<b>ISSUING AGENCY:</b>
<b>LICENSE NUMBER:</b>	

#### Skills

<b>OFFICE SKILLS:</b> Typing:40 Data Entry:30
<b>OTHER SKILLS:</b> Proficient in all Microsoft Application Software - Expert - 20 years and 5 months Adobe Acrobat, Photoshop, Illustrator, InDesign - Expert - 7 years and 0 months Internet and Web Design - Skilled - 7 years and 0 months Training and Curriculum Design - Expert - 15 years and 6 months E-learning (Whiteboards, online media, podcasts) - Skilled - 5 years and 6 months Recruiting - Skilled - 5 years and 6 months
<b>LANGUAGE(S):</b>

#### ADDITIONAL INFORMATION

<b>Honors &amp; Awards</b> Author of three published novels:  Talking from Experience, 2008 Be Prepared for Anything, 2010 Strength Comes from Within, 2014
<b>Professional Associations</b> Consulting Experience  Cobbs Consulting, LLC Business Consultant  High-impact Business Consultant with a strong ability to identify initiatives and facilitate action-driven plans to improve small-to-medium size businesses and non-profit organizations. Develop training programs that includes curriculum, development, classroom and online training for employees.

#### REFERENCES

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Joyce Reiling	<b>POSITION:</b> USDA SERO Program Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3565 Spring Mesa Drive, Snellville, Georgia 30039		
<b>EMAIL ADDRESS:</b> joycereiling@yahoo.com	<b>PHONE NUMBER:</b> (678) 982-3356	
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Marcia Tidwell	<b>POSITION:</b> Instructional Assistant

<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b> picefull@aol.com		<b>PHONE NUMBER:</b> (803) 419-5749
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Valerie Layne	<b>POSITION:</b> Program Cord II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1030 Bethine Hwy, Bishopville, South Carolina 29010		
<b>EMAIL ADDRESS:</b> Valerie.layne@dss.sc.gov		<b>PHONE NUMBER:</b> (803) 538-4031

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
FI - Economic Services - Program Development
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Alisa Pickett Johnson - 632 Bitternut Drive, Cola, SC 29206 - 803-629-7097  
Valerie Layne - 1030 Bethune Hwy, Bishopville, SC 29010 - 803-856-6635
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I was a supervisor for eleven years, I have experience in database operations (creating and managing databases), I have experience collecting data and analyzing it and I'm proficient in almost any software, if I haven't used it, I will learn how to.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Charlene R Cobbs on 10/20/14 3:08 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Cosenza, Annemarie**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/20/14 5:33 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Cosenza, Annemarie		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 119 Belle Chase Drive, Lexington, South Carolina 29072		
<b>HOME PHONE:</b> (803) 356-3950	<b>ALTERNATE PHONE:</b> (803) 920-2636	<b>EMAIL ADDRESS:</b> annemariecosenza@yahoo.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$60,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: To:	<b>SCHOOL NAME:</b> Insurance Institute of America	<b>DEGREE RECEIVED:</b> Professional
<b>LOCATION:(City, State)</b> Melvern, Pennsylvania	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Associated Degree in Insurance Services		
<b>DATES:</b> From: To:	<b>SCHOOL NAME:</b> University of South Carolina	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> History		

**WORK EXPERIENCE**

<b>DATES:</b> From: 3/2014 To: Present	<b>EMPLOYER:</b> The MIL Corporation	<b>POSITION TITLE:</b> Quality Assurance Analyst with Secret Level Clearance
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$5,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Member of the Systems Development and Maintenance team. Developing test plans, executing manual and automated test scripts and documenting results. Working directly with the client (the State Department) to review test plans to verify adequate coverage of business processes, and to ensure the business requirements are satisfied by the system. The automated testing scripts for the accounting systems use HP Quick Test Pro and HP Quality Center.		
<b>REASON FOR LEAVING:</b> This is a contract position working at the State Department in Charleston, SC. I would like to find a full time position in Columbia, SC. to be near my family.		
<b>DATES:</b> From: 6/2010 To: 6/2013	<b>EMPLOYER:</b> TMFloyd	<b>POSITION TITLE:</b> Systems testing analyst
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Jennifer McCormick	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$5,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

<b>DUTIES:</b> Software development.		
<b>REASON FOR LEAVING:</b> Congressional Sequestration cut back the number of contractors working on the project.		
<b>DATES:</b> From: 1/2000 To: 6/2010	<b>EMPLOYER:</b> Independent Insurance agent	<b>POSITION TITLE:</b> Licensed Life and Health insurance agent
<b>ADDRESS:</b> (Street, City, State, Zip Code) Lexington, South Carolina 29072		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 356-3950	<b>SUPERVISOR:</b> self employed	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$4,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Benefits counselor.		
<b>REASON FOR LEAVING:</b> Job with TMFloyd.		
<b>DATES:</b> From: 2/1997 To: 2/2000	<b>EMPLOYER:</b> Policy Management Systems Corporation	<b>POSITION TITLE:</b> Quality Business Analyst
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Wayne McDainel - V.P.	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> I was a quality business analyst for domestic and international accounts. I interfaced with customers to obtain their business requirements. I developed automated and manual test cases. I trained and supervised automated software testing teams domestically and abroad in Oslo, Norway. I mentored several new employees on the functionality of testing insurance software.		
<b>REASON FOR LEAVING:</b> The company was brought by Computer Science Corporation (CSC) and the over 5000 employees were cut back to 1500. I resigned and went back to insurance counseling in human resources and other departments during their annual benefits enrollments.		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> AICPCU's AIT 131 Essentials of Information Technology	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>
<b>TYPE:</b> Personal Trainer	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>
<b>TYPE:</b> South Carolina Life and Health Insurance license	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>

#### Skills

<b>OFFICE SKILLS:</b> Typing:80 Data Entry:0
<b>OTHER SKILLS:</b>
<b>LANGUAGE(S):</b>

#### ADDITIONAL INFORMATION

Nothing Entered For This Section

#### REFERENCES

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Karin Koller	<b>POSITION:</b> Retired
<b>ADDRESS:</b> (Street, City, State, Zip Code) 317 Water Crest Dr, Lexington, South Carolina 29072		
<b>EMAIL ADDRESS:</b>	<b>PHONE NUMBER:</b> 803-361-6363	

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
Yes
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Karin Koller 317 Water Crest Dr, Lexington, SC 803-361-6363  
Jeannette Pompi, Greenville, SC 803-413-1972
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Eight years of software development.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Annemarie Cosenza on 10/20/14 5:33 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Dowdy, Catherine**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/19/14  
 11:07 AM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Dowdy, Catherine		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2700 Feather Run Trail, Apt. O4, West Columbia, South Carolina 29169		
<b>HOME PHONE:</b> 912-347-7169	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> catherinedowdy@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> GA <b>Number:</b> [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: To:	<b>SCHOOL NAME:</b> Troy University	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Augusta, Georgia	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 30 - Semester
<b>MAJOR:</b> Counseling & Psychology		
<b>DATES:</b> From: To:	<b>SCHOOL NAME:</b> Brewton Parker College	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Mt. Vernon, Georgia	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 127 - Semester
<b>MAJOR:</b> Sociology		

**WORK EXPERIENCE**

<b>DATES:</b> From: 2/2012 To: Present	<b>EMPLOYER:</b> State of Georgia Department of Behavioral Health & Developmental Disabilities-Pineland CSB BHDD	<b>POSITION TITLE:</b> Social Services Program Director
<b>ADDRESS:</b> (Street, City, State, Zip Code) 100 Sunshine Drive, Baxley, GA, Georgia 31513		<b>COMPANY URL:</b> www.pinelandcsb.org
<b>PHONE NUMBER:</b> 1-800-767-8228	<b>SUPERVISOR:</b> Gloria Kenure - Director Of Developmental Disabilities	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 50	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 20

**DUTIES:**

Director of Community based day services program for multi-county area for individuals with ID/DD & Family Support Local Program Director for multi-county area with a caseload of 100 families with special needs (children & adults age 3- and up with special needs such as ID/DD, Autism, TBI, Mental Health Dx) works in collaboration with local business to place and monitor individuals with disabilities in competitive and supportive employment Develop, coordinate, organize, manage and evaluate all phases of the operation of the program while rendering professional, administrative, and programmatic expertise in supervising the total operation of the program Ensures application and adherence of policies and procedures while maintaining standards in the program in order to fulfill and maintain Federal, State and local licensing requirements

Performs administrative and financial reviews of Child and Adult Care Food Program (CACFP) to ensure compliance with local, State, and Federal policies and regulations  
 Prepares and maintains programs and documentation for CARF national accreditation, site reviews and inspections  
 Coordinate with State Disability Directors and Service/Support Coordinators for intake and referrals and arranging services for individuals within multi-county area to appropriate community & residential services  
 Works collaboratively with Residential Manager to develop community residential resources and placement for individuals as needed.  
 Supervises and maintain effective State coordinated transportation system in conjunction with multiple state agencies  
 Maintain active presence in local communities and civic organizations  
 Supervises staff of 20 in program of all levels including social workers, clinical staff, administrative, food service, transportation and volunteers. Recruits, hires, trains, mentors staff for programs  
 Serves as Human Resources Coordinator for facility and employees.  
 Complete Performance Reviews, maintains personnel records, supervises employee training, in-services, and trains staff to implement program plans and effective behavior support techniques  
 Responsible for a combined annual program budget in excess of \$700,000 through state and federal funding; Family Support program, USDA food program, coordinated transportation, work activity funds, and donations  
 Create forecast budgets, billing reports, approves expenditures, maintain inventory control, while preparing annual audits and budgets  
 Solicits goods, services and monetary donations from individuals and businesses which will benefit the program and individuals

**REASON FOR LEAVING:**

still employed- My husband is a DoD contractor and was transferred to Ft. Jackson in Columbia in September 2014. I live in Columbia on the weekend and live in Georgia during the week to continue to work for the State of Georgia until I can secure other employment in South Carolina.

<b>DATES:</b> From: 7/1997 To: 2/2012	<b>EMPLOYER:</b> Self-Employed Educational Consultant	<b>POSITION TITLE:</b> Self-Employed Educational Consultant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Warner Robins, Georgia 31088		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 912-347-7169	<b>SUPERVISOR:</b> self-Catherine Dowdy - Certified Teacher/Tutor, Career Advisor & College Applications & Disability Assistant	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

Tutored students in the areas of general studies, test prep, special education, etc.  
 Acted as Student Advisor: assisted students with planning schedule and registering for classes with BannerWeb  
 Assisted students and families as an advocate with requesting accommodations according to their disability  
 Assisted clients in job searches, job prep, career testing, resume prep, mock interviews, etc.  
 Assisted students in completing the application and financial aid process for college

**REASON FOR LEAVING:**

<b>DATES:</b> From: 12/2007 To: 10/2009	<b>EMPLOYER:</b> Houston County Board of Education	<b>POSITION TITLE:</b> Special Education Kindergarten Teacher
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1100 Main St, Perry, Georgia 31069		<b>COMPANY URL:</b> www.hcbe.net
<b>PHONE NUMBER:</b> 478-988-6200 or 478-957-3104	<b>SUPERVISOR:</b> Alicia Denk-SPED Casey Lyons-Gen Ed - Denk-SPED CHAIR & Lyons-GEN ED CHAIR	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 60	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 3

**DUTIES:**

Students age 5-8 with physical, intellectual, and developmental diagnoses who were served under the catchment of the program.  
 Completed IEP's in conjunction with parents, Special Education Department officials, Therapists, Specialists, etc.  
 Taught Kindergarten state standards with differentiation and individualized accommodations for each student according to his/her IEP.  
 Supervised 3 paraprofessionals

**REASON FOR LEAVING:**

At the time, my son with special needs was a toddler and had so many needs that I had to take care of and could not do so and teach full time at the same time. So I turned in my notice to be able to focus on my son. I worked on early intervention strategies with my son to get him on track so he would be able to enter school in line with his peers without any special education services. The time spent with him was successful. He entered school academically ahead of his peers and without the need for special education classes. I also continued to work part time as an Educational Consultant during this time to help supplement my income.

<b>DATES:</b> From: 3/2006 To: 12/2007	<b>EMPLOYER:</b> State of Georgia Department of Labor-Vocational Rehabilitation	<b>POSITION TITLE:</b> Vocational Rehabilitation Counselor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1021 Commerce Street, Perry, Georgia 31069		<b>COMPANY URL:</b> <a href="http://gvra.georgia.gov/vocational-rehabilitation-division">http://gvra.georgia.gov/vocational-rehabilitation-division</a>

<b>PHONE NUMBER:</b> 478-988-6760	<b>SUPERVISOR:</b> Belinda Hudson - Regional Unit Manager (RUM)	<b>MAY WE CONTACT THIS EMPLOYER?</b> ■ Yes □ No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Maintained a caseload of approximately 60 clients consisting of high school and adult clients Assisted eligible clients in preparing for college, technical school, vocational training, and obtaining or maintaining supportive or competitive employment Maintained relationships with local businesses to collaborate for placement of clients in Work Adjustment Training, competitive and supportive employment Coordinates community and agency resources in advancement of vocational goals and to ensure the provision of quality services to clients		
<b>REASON FOR LEAVING:</b> Opportunity to teach Special Education		
<b>DATES:</b> From: 2/2005 To: 3/2006	<b>EMPLOYER:</b> State of Georgia Dept of Behavioral Health & Developmental Disabilities-Unison Behavioral Health	<b>POSITION TITLE:</b> Social Services Provider 2/Community Support Counselor-Child & Adolescent Unit
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1007 Mary Street, Waycross, Georgia 31501		<b>COMPANY URL:</b> www.unisonbehavioralhealth.com
<b>PHONE NUMBER:</b> 800-342-8168	<b>SUPERVISOR:</b> Dr. Nandita Joshi- 904-536-0891 - Psychiatrist Adult, Child & Adolescent Psychiatry	<b>MAY WE CONTACT THIS EMPLOYER?</b> ■ Yes □ No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Provided Core outpatient individual, group and family counseling to children age 3-18 and their families in a multi-county area Provided counseling in schools, client's homes and other community settings. Worked closely with schools, administrators, social workers, community groups, advocates to identify resources in community Completed intake mental health assessments and provided initial DSM diagnostic impressions, completed CAFAS, and other assessment tools to determine level of care Attended IEP meetings with children & adolescents on my caseload and for potential children for my caseload. Also acted as a crisis counselor in the school system to which I was assigned.		
<b>REASON FOR LEAVING:</b> Moved to Houston County, GA (Warner Robins/Perry)		
<b>DATES:</b> From: 2/2002 To: 2/2005	<b>EMPLOYER:</b> Altamaha Bank & Trust Company	<b>POSITION TITLE:</b> Executive Assistant to Vice President/Loan Officer & Customer Service Representative/Loan Processor/
<b>ADDRESS:</b> (Street, City, State, Zip Code) 54 N. Tallahassee St. , Hazlehurst, Georgia 31539		<b>COMPANY URL:</b> www.altamahabank.com
<b>PHONE NUMBER:</b> 912-375-5415	<b>SUPERVISOR:</b> J. Dwayne Creamer - Vice-President	<b>MAY WE CONTACT THIS EMPLOYER?</b> ■ Yes □ No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Provided high-level administrative support to Executive Vice-President by conducting research, preparing statistical reports, handling information requests, and performing clerical functions Audited completed loan packages for review under state and federal guidelines while maintaining compliance under FDIC regulations Cross-trained in multiple areas and positions; trained and supervised lower-level staff		
<b>REASON FOR LEAVING:</b> While working at Altamaha Bank full time, I also was a full time college student. I graduated with my BA in Sociology in 2004 and wanted to begin employment in my chosen field of social services.		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> CPR Certified	
<b>LICENSE NUMBER:</b> GQ7KJ9	<b>ISSUING AGENCY:</b> American Red Cross
<b>TYPE:</b> Serv-Safe Manager Certification	
<b>LICENSE NUMBER:</b> 9414086	<b>ISSUING AGENCY:</b> American National Standards Institute & the Conference for Food Protection (ANSI)
<b>TYPE:</b> CPI-NonViolent Crisis Intervention Techniques	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Crisis Prevention Institute

<b>TYPE:</b> First Aid Certified	
<b>LICENSE NUMBER:</b> GQ7LPD	<b>ISSUING AGENCY:</b> American Red Cross
<b>TYPE:</b> Notary Public	
<b>LICENSE NUMBER:</b> "CATHERINE VAUGHAN DOWDY"	<b>ISSUING AGENCY:</b> Superior Court Clerk's Cooperative Authority

Skills
Nothing Entered For This Section

ADDITIONAL INFORMATION
<p><b>Technical</b> Technical Competencies</p> <p>Adobe Photoshop Android BannerWeb CampusWeb Diagnostics Documentation Email EHR/EMR Hardware Help Desk Internet iOS Linux Java Mac Microsoft Excel Microsoft Front Page Microsoft Office Microsoft Outlook Microsoft Power Point Microsoft Publisher Microsoft Word Microsoft Visio Mobile myAvatar Outlook Quick Books Pro SharePoint Social Networking Troubleshooting Windows</p> <p><b>Clinical Experience</b> Child &amp; Adolescent Clinical Experience Group Homes/Personal Support School/Community-based counseling Biopsychosocials Crisis Support Team Suicidal Evaluations Individual, Group &amp; Family Therapy Psychological Assessments Early Intervention Behavior Support Plans Psychological Assessments Emotional/Behavioral Disorders DSM-IV-TR &amp; DSM 5 Case Management Therapeutic Foster Care Individualized Service/Support Plan (ISP) Treatment Team Planning Co-Occurring Disorders Substance Abuse Individual Education Plans (IEPs) Needs Assessments Vocational Evaluations Specialty in Vision Impairments Genetic Disease/Birth Defects TBI/Spinal Cord Injuries</p> <p><b>Clinical Experience</b> Developmental Disability Professional (DDP)</p>

Health Risk Screening Tool (HRST) Rater  
 Individualized Service Plans (ISPs)  
 Support/Service Coordination  
 Child & Adult Medicaid Waiver Programs  
 Service Plan Budgets  
 Support/Service Coordination  
 Host Home Services  
 Person Centered Planning  
 Supports Intensity Scale (SIS)  
 Exceptional Rates  
 Residential Services/Day Services/Respite  
 US DOJ Settlement training

**Additional Information**

First Aid/CPR Certified  
 CPI Certified  
 USDA Food Program Principal  
 SNAP Food Program  
 Serv-Safe Certified  
 Medicaid/Medicare  
 MMIS System  
 Coordinated Transportation  
 PA-Prior Authorizations  
 Corrective Action Plans (CAP)  
 Clinical Medical Experience  
 Computer Expertise  
 CARF Auditing  
 CIS- Case Management Information System  
 Electronic Health Records (EHR/EMR)  
 Clinical Work Station (CWS)  
 Community Liaison/ Marketing Experience  
 Executive Administration (14+ years)  
 Special Needs Management (7 years)  
 Early Childhood-Elderly Populations  
 Non-Profit Social Services Program Manager  
 Local Family Support Director for 2 counties with a caseload of 100 families  
 Early Childhood Special Needs Experience: 5 ½ years professional & 11 years personal  
 Middle/High School Age Special Needs Experience: 4 years professional  
 Adult Special Needs Experience: 4 years professional

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Pat Hailey	<b>POSITION:</b> Parent Mentor- Ga Department of Education
<b>ADDRESS:</b> (Street, City, State, Zip Code) Baxley, Georgia 31513		
<b>EMAIL ADDRESS:</b> pat.hailey@appling.k12.ga.us		<b>PHONE NUMBER:</b> 912-278-0774
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Dann Webb	<b>POSITION:</b> Executive Director of Admissions-Central GA Technical College & Middle GA Technical College
<b>ADDRESS:</b> (Street, City, State, Zip Code) Warner Robins, Georgia 31088		
<b>EMAIL ADDRESS:</b> dwebb@centralgatech.edu		<b>PHONE NUMBER:</b> 478-396-9449
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Kelvin Taylor	<b>POSITION:</b> Regional Employment Director-Houston County Association for Exceptional Citizens
<b>ADDRESS:</b> (Street, City, State, Zip Code) Warner Robins, Georgia 31088		
<b>EMAIL ADDRESS:</b> ktaylor@hcaec.com		<b>PHONE NUMBER:</b> 478-747-8978
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Tabitha Ring	<b>POSITION:</b> State of Georgia Regional Support Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b> tabitha.ring@dbhdd.ga.gov		<b>PHONE NUMBER:</b> 478-290-9577

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Tabitha Ring  
State of Georgia Regional Support Coordinator  
Phone: 478-290-9577  
Email: tabitha.ring@dbhdd.ga.gov  
  
Pat Hailey  
Parent Mentor- Ga Department of Education  
Phone: 912-278-0774  
Email: pat.hailey@appling.k12.ga.us
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
As a program manager, I am responsible for management of all our program data reporting to the state. This includes state and federal funding, billing reports, time management, analysis of funding disbursement, etc. I am responsible for actually creating budgets and reconciliation of projections versus actual services billed. I am very proficient in many different types of software and have created many new excel worksheets to increase efficiency in our data management that the programs continue to use.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Catherine Dowdy on 10/19/14 11:07 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Dublin, Sharon**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/22/14 3:23 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Dublin, Sharon		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 105 Sweetwater Springs Road, Columbia, South Carolina 29229		
<b>HOME PHONE:</b> (803) 419-8865	<b>ALTERNATE PHONE:</b> (803) 260-0041	<b>EMAIL ADDRESS:</b> swdublin@ed.sc.gov
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$55,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b> Seeking advancement opportunities within state government.	

**EDUCATION**

<b>DATES:</b> From: 4/2008 To: 5/2010	<b>SCHOOL NAME:</b> Nova Southeastern University	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Ft/ Lauderdale, Florida	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Leadership		
<b>DATES:</b> From: 1/2001 To: 12/2004	<b>SCHOOL NAME:</b> Elizabeth City State University	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Elizabeth City, North Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 4 - Semester
<b>MAJOR:</b> Sociology		
<b>DATES:</b> From: 1/1986 To: 6/1988	<b>SCHOOL NAME:</b> Piedmont Technical College	<b>DEGREE RECEIVED:</b> Associate's
<b>LOCATION:(City, State)</b> Greenwood, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Public Service		

**WORK EXPERIENCE**

<b>DATES:</b> From: 10/2012 To: Present	<b>EMPLOYER:</b> Benedict College	<b>POSITION TITLE:</b> Coordinator, Service-Learning Leadership and Development Youth Leadership Institute
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 705-4602	<b>SUPERVISOR:</b> Tondaleya Jackson - Director, Service-Learning and Leadership Development	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 10	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 4

<b>DUTIES:</b>		
<ul style="list-style-type: none"> <li>•Identify, recruit and select eligible program participants.</li> <li>•Conduct and/or coordinate the Saturday Academy and Summer Component activities.</li> <li>•Monitor the leadership efforts of participating students by maintaining, in the applicable database, activities and events, portfolio progress, pre- and post-assessment data and grades using best practices in leadership and documentation.</li> <li>•Create Educational Academic Plans for students.</li> <li>•Recruit and train selected College Peer Scholars to mentor participants.</li> <li>•Chaperone all field trips and community service projects.</li> <li>•Assist students with completing applications for college and financial aid.</li> <li>•Assess effectiveness of efforts on an ongoing basis.</li> </ul>		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 3/2014 To: Present	<b>EMPLOYER:</b> SC Department of Education	<b>POSITION TITLE:</b> Special Projects Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1401 Senate Street, Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 803-734-3160	<b>SUPERVISOR:</b> Bradley Mitchell - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37.5	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b>		
<p>Promotes virtual education as an option for schools statewide by assisting schools in developing blended learning programs, franchise programs, and integrating other types of virtual instruction to support the needs of the schools and the students. Seek out opportunities to promote and offer the Office of Virtual Education programs and involve the appropriate team in developing relationships with districts and schools.</p> <p>Develop a positive relationship with schools in SC by providing outreach, marketing, training, workshops and support to schools statewide.</p> <p>Work with the Research and Planning Administrator to develop reports on success of specialized programs. Use reports and statistics gathered on specialized programs to work with office Director on developing growth plans based on data-driven decision making. Work with the virtual school program Curriculum Coordinator and Instructional Design team on ensuring that district and school needs are met and identify other opportunities for program growth and expansion. Use products already available with the virtual school program and promote statewide adoption.</p> <p>Develop and maintain current specialized programs with the Office of Virtual Education to ensure that programs are performing as expected and being implemented appropriately.</p>		
<b>REASON FOR LEAVING:</b> Still employed.		
<b>DATES:</b> From: 6/2011 To: 3/2014	<b>EMPLOYER:</b> South Carolina Department of Education	<b>POSITION TITLE:</b> Student Services Manager - Program Coordinator II
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 734-3160	<b>SUPERVISOR:</b> Bradley Mitchell - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b>		
<ul style="list-style-type: none"> <li>•Manages the enrollment and payment process for professional development opportunities to South Carolina Educators.</li> <li>•Monitor program procedures for delivery of services before, during and after each session.</li> <li>•Serves as primary internal/external contact for eLearningSC PD program.</li> <li>•Problems solve and troubleshoot registration problems to include advisement.</li> <li>•Manages fiscal responsibilities of eLearningSC PD's with internal and external officials.</li> <li>•Participates in advertising, marketing, and promotional activities related to program area.</li> <li>•Creates, manages, distributes, and analyzes end of course surveys to ensure teacher and course effectiveness.</li> </ul>		
<b>REASON FOR LEAVING:</b> Still with office		
<b>DATES:</b> From: 1/2008 To: 6/2011	<b>EMPLOYER:</b> South Carolina Department of Education	<b>POSITION TITLE:</b> Administrative Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1429 Senate Street, Columbia, South Carolina 29201		<b>COMPANY URL:</b> www.ed.sc.gov
<b>PHONE NUMBER:</b> (803) 734-3160	<b>SUPERVISOR:</b> Valerie Harrison - Deputy Superintendent	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$3,417.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b>		
<p>Provide administrative support Deputy Superintendent for the Division of Standards and Learning at the SC Department of Education. Implement administrative procedure for the Division in accordance with policies and procedures. Independently composes or transcribes letters, inter-office memoranda, interoffice reports, etc, including confidential material. Receives and screens telephone calls, facsimile transmissions, and visitors to the office. Determines the nature of the business involved and personally furnishes information, or refers outside contacts to the appropriate persons, directly or by relayed messages. Receives and distributes incoming mail and coordinates outgoing mail. Monitor electronic mail and bulletin board systems to extract relevant messages. Develops and maintains records systems, including ticklers and logs. Maintains stock of forms and supplies, and replenishes by requisitioning when necessary. Schedule appointments, maintain the deputy's calendar and arranges travel, including transportation and hotel reservations. Maintain the budget and the purchasing card for the Department. Transfer technical information from records, which may be in rough form and with oral or written instructions, converts the information into management reports in final format. Assign and review work of work-study students. Create and</p>		

edit flyers for departmental events. Create flow charts, spread sheet, and maintain informational databases. Serve as Minute Taker for the Standards Learning and Assessment Committee for the SC Board of Education. Serve as Time Administrator for the Division. Efficient in SCEIS SRM and CITRIX application. Web Content Manager for the Division

<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 10/2007 To: 1/2008	<b>EMPLOYER:</b> Midlands Technical College	<b>POSITION TITLE:</b> Test Administrator
<b>ADDRESS:</b> (Street, City, State, Zip Code) Beltine Blvd, Columbia, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 738-7330	<b>SUPERVISOR:</b> Ivory Johnson - Associate Director of Student Assessment	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Administer a variety of test such a Midlands Technical College Placement Test.		

<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 1/2005 To: 1/2008	<b>EMPLOYER:</b> Benedict College	<b>POSITION TITLE:</b> Administrative Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1600 Harden Street, Columbia, South Carolina 29204		<b>COMPANY URL:</b> www.benedict.edu
<b>PHONE NUMBER:</b> (803) 705-4624	<b>SUPERVISOR:</b> David B. Whaley - Vice President of Student Affairs	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$32,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Directs all administrative support for the Office of Student Affairs. Serves as the administrative assistant for the Vice President of Student Affairs. Creates presentations and schedules executive-level meetings and travel. Prepares biweekly, quarterly and monthly reports. Effectively manage the student insurance renewal process. Manage departmental budget and prepares expense reports. Serves as back-up administrative support to the Office of the President, Student Financial Aid and Registration. Also serves as senior administrative assistant for the Division of Student Affairs.		

<b>REASON FOR LEAVING:</b> Seeking career advancement.		
<b>DATES:</b> From: 3/2001 To: 9/2005	<b>EMPLOYER:</b> Elizabeth City State University	<b>POSITION TITLE:</b> Administrative Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1747 Weeksville Road, Elizabeth City, North Carolina 29709		<b>COMPANY URL:</b> www.ecsu.edu
<b>PHONE NUMBER:</b> (252) 335-4561	<b>SUPERVISOR:</b> Ephraim Gwebu - Chair of Chemistry Department	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$24,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Provided administrative support for the chair of the Chemistry and Physics department. Creates presentations and schedules meetings and travel. Prepares biweekly, quarterly and monthly reports. Audit seniors for graduation requirements. Academic Advisor for undergraduates. Assign and review work of work-study students. Create and edit flyers for departmental events. Create flow charts, spread sheet, and informational databases. Assist with proposal writing and budget preparation. Test administrator for Educational Testing Service.		

<b>REASON FOR LEAVING:</b> Husband job reloated to South Carolina		
<b>DATES:</b> From: 12/1996 To: 3/2001	<b>EMPLOYER:</b> Abbeville Department of Social Services	<b>POSITION TITLE:</b> Youth Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 903 West Greenwood Street, Abbeville, South Carolina 29620		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (864) 459-5481	<b>SUPERVISOR:</b> Jimmy Campbell - Supervisor for Medicaid	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$18,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Case management of 30 at risk participants. Conduct group and individual health education sessions. Planned and implemented fund raising activities. Conduct home visits and initial needs assessment. Attend conferences to keep abreast of current issues. Monitor participant's grades and attendance.		
<b>REASON FOR LEAVING:</b> Relocated to North Carolina		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Global Career Development Facilitator	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>

#### Skills

<b>OFFICE SKILLS:</b> Typing:60 Data Entry:120
<b>OTHER SKILLS:</b> Microsoft Program (All, Word, Powerpoint, Excel, Pr - Skilled - 10 years and 0 months)
<b>LANGUAGE(S):</b>

ADDITIONAL INFORMATION
Nothing Entered For This Section

REFERENCES		
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<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Bradley Mitchell	<b>POSITION:</b> Director, Office of Virtual Education
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1401 Senate Street, Columbia, South Carolina 29201		
<b>EMAIL ADDRESS:</b> bmtichell@ed.sc.gov		<b>PHONE NUMBER:</b> 803-734-7369
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Tondaleya Jackson	<b>POSITION:</b> Director
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29202		
<b>EMAIL ADDRESS:</b> tondaleyaj@yahoo.com		<b>PHONE NUMBER:</b> (803) 609-1800
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Damara Hightower-Davis	<b>POSITION:</b> Assistant Director - USC Connect
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29229		
<b>EMAIL ADDRESS:</b> damarahightower@aol.com		<b>PHONE NUMBER:</b> (803) 261-7445
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Valerie Harrison	<b>POSITION:</b> Dean of Education - Claflin University
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2225 Belleville Road, Orangeburg, South Carolina 29115		
<b>EMAIL ADDRESS:</b> vharriso@ed.sc.gov		<b>PHONE NUMBER:</b> (843) 617-9148

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
SC Department of Education
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
  
Dr. Damara Hightower-Davis, USC Connect  
University of South Carolina  
Thomas Cooper Library, Suite L132  
University of South Carolina  
Columbia, SC 29208  
803.261.7445  
  
Bradley Mitchell  
Director, Office of Virtual Education  
803.734.7169  
  
Dr. Gwenda R. Greene, Professor  
Benedict College  
109 Brickingham Way  
Columbia, SC 29229  
803.447.4084  
Ggreene109@gmail.com
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I have experience in working with a facet of databases such as Student Information database, TypingMaster database and databases used to retrieve transcript.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Sharon Dublin on 10/22/14 3:23 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Ekarika Ekam, Margaret E**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/22/14 2:00 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Ekarika Ekam, Margaret E		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 8 Cornerwood Court, Gaithersburg, Maryland 20878		
<b>HOME PHONE:</b> (240) 855-7841	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> margaretekam@gmail.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> MD <b>Number:</b> [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, On Call (as needed)	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: 6/1996 To: 12/1997	<b>SCHOOL NAME:</b> American University Washington College of Law	
<b>LOCATION:(City, State)</b> Washington, District of Columbia	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> International Legal Studies/International Business Law	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: 9/1987 To: 5/1990	<b>SCHOOL NAME:</b> Keele University	
<b>LOCATION:(City, State)</b> Keele, Staffordshire, International	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Law/Philosophy	<b>UNITS COMPLETED:</b>	

**WORK EXPERIENCE**

<b>DATES:</b> From: 7/2007 To: Present	<b>EMPLOYER:</b> LeXam Communications	<b>POSITION TITLE:</b> Consultant
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b> www.lexamcommunications.com
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 30	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

- Providing customized communications services.
- Design and implement marketing plan to meet client's individual goals - client liaison, outreach initiatives, partnership facilitation, research and corporate branding, media and public affairs management.
- Case management.
- Staff/vendor management.
- Consistently exercises discretion and judgment to analyze, interpret, make deductions and then decide what actions are necessary based on the varying facts and circumstances of each individual case.
- Establishes corrective action/service plans where indicated and monitors for improvement.
- Preparing reports/referrals to ensure compliance to state regulations.
- Interpret applicable agency rules and regulations for clients.
- Develop and maintain relationships - third party (coalition groups, think tanks), & general public.
- Provides crisis management for clients; makes linkages for interventions as appropriate.
- Prepare presentations for new client development and negotiates all client proposals.
- Work with clients to develop and review development strategies for existing donor list and prospecting for new donors.
- Develop and maintain clients' media relations data base.

- Brand awareness and messaging for clients.
- Researched, reviewed, and analyzed relevant best practices principles/standards for clients on communication/ marketing projects.
- Build and manage teams (relationship management).
- Build and manage donor lists.
- Responsible for developing and executing strategic plan.
- Manage budget development and contract management.
- Design and implement public relations campaigns, fund raising events and corporate events.
- Organize and facilitate core strategy sessions for issue advocacy campaigns (advertisement through media, internet & and on the legislative front) with coalition groups or staff.
- Draft issue-oriented memoranda, talking points, briefing papers; design, draft and edit organization publications such as newsletter, annual reports and briefing books and brochures.

**REASON FOR LEAVING:**

Seeking transition to full time permanent position.

<b>DATES:</b> From: 4/2013 To: Present	<b>EMPLOYER:</b> Prince George's County Dept. of Social Services - Adult Resource Bureau	<b>POSITION TITLE:</b> Contract - Community Developer
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 301.909.2039	<b>SUPERVISOR:</b> Debbie Jeffries - Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 35	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

- Case management.
- Identify assets, needs, opportunities, rights and responsibilities – clients/families.
- Effective interpretation of agency rules and regulations.
- Assess case situations, develop and implement individualized service plans - clients.
- Establish corrective action/service plans where indicated and monitor for improvement.
- Prepare reports/referrals to ensure compliance to local, state, and federal regulations.
- Provide crisis management for clients; and provide linkages for interventions as appropriate.
- Review and process service funding plans.
- Resolve clients' crisis situations using available resources.
- Provide assistance in maintaining the client in the community.
- Effective relationship management with general public and other governmental agencies.
- Assist, assess and develop community resources for clients – addressing their targeted problems.
- Interview clients and other individuals to obtain necessary information - case related.
- Provide on-call coverage in cases involving clients and families.

**REASON FOR LEAVING:**

Seeking a full-time permanent position.

<b>DATES:</b> From: 6/2012 To: 11/2012	<b>EMPLOYER:</b> American Life League	<b>POSITION TITLE:</b> Director of Communications & Marketing
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Paul E. Rondeau - Executive Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 6

**DUTIES:**

- Designed and implemented marketing plans that include coalition liaison, outreach initiatives, research and organizational branding (internal & external), and media relations.
- Developed and maintained media relations data base.
- Work in partnership with leadership team to draft, plan and execute fundraising campaigns.
- Responsible for developing and executing strategic plan – change management (expand target audience – increase awareness).
- Organized and facilitated core strategy sessions for issue advocacy campaigns through traditional and social media.
- Staff management.
- Managed organization's communication/public relations efforts; draft official press statements and all promotional materials; main contact for inquiries.
- Researched, reviewed, and analyzed relevant best practices principles for effective communication/ marketing specific projects/campaigns.
- Develop and maintain third party relationships - coalition groups, general public, and think tanks.
- Championed and implemented change in communication strategy.
- Monitored Social Media and Article Distribution/Public Relations:
  - Strategy
  - Manage social media sources: Facebook, Twitter, LinkedIn, etc.
  - Built relationships with local and national media sources:
  - Implemented strategies to achieve over 526 mentions of American Life League articles/statements from June - October.

**REASON FOR LEAVING:**

Laid off.

<b>DATES:</b> From: 6/1999 To: 1/2007	<b>EMPLOYER:</b> BAMPAC	<b>POSITION TITLE:</b> VP Communications
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Alvin Williams - President & CEO	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 5

**DUTIES:**

- Implemented BAMPAC's key promotional and advocacy issues.
- Oversaw organization's communication/public relations efforts; draft official press statements and all promotional materials; main contact for inquiries.
- Analyzed key public policy positions and legislative developments with specific emphasis on key issues such as education, family issues, and economic empowerment.
- Work in partnership with leadership team to draft, plan and execute fundraising campaigns.
- Spear-headed all facets of fundraising events, press conferences, and convention presentations (Strong verbal communications skill).
- Championed and implemented major public policy and political strategies.
- Drafted effective issue-oriented memoranda, talking points, briefing papers; design, draft and edit organization publications such as newsletter, annual reports, and briefing books and brochures (demonstrated strong written communications skills).
- Relationship management – Donors, Congressional and administration policy makers and staffers, government agencies, various associations and coalition groups.
- Staff management.
- Coordinated candidate activities vis-à-vis organization's roles.
- Organized and facilitated core strategy sessions for issue/policy advocacy campaigns - membership awareness, advertisement through media, internet & and on the legislative front with coalition groups or staff.
- Interpret government agencies' rules and regulations - for general public/supporters education.
- Work with consultants to develop and review development strategies for existing donor list and prospecting for new donors.
- Researched, reviewed, and analyzed relevant best practices principles for effective communication/ marketing specific projects/campaigns.

**REASON FOR LEAVING:**

sabbatical

<b>DATES:</b> From: 7/1993 To: 4/1998	<b>EMPLOYER:</b> Law Offices of Levine and Yates	<b>POSITION TITLE:</b> International Consultant
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Samuel Jay Levine - Managing Partner	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 5

**DUTIES:**

- Official liaison for international clients/corporations.
- Staff management.
- Research and relationship management - foreign countries and international businesses.
- Relationship management - U.S. corporate/individual clients, federal & state government agencies.
- Interpret and apply government agencies' rules and regulations - for clients, general public/supporters education.
- Drafted complex motions and briefs to Administrative Judges and appeals to the relevant appellate bodies such as AAU, Executive Office of Immigration Review (EOIR) and Board of Immigration Appeals (BIA) – Asylum/refugees cases.
- Analyzed, interpreted, and made deductions/plans as necessary based on the varying facts and circumstances of each individual case – with consistency, discretion and judgment.
- Researched, reviewed and analyzed relevant legislation, public records and news articles.
- Reviewed and tracked relevant legislation.

**REASON FOR LEAVING:**

Sabbatical

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**

Typing:  
Data Entry:

**OTHER SKILLS:**

Experience & understanding of diverse communities - Expert - 18 years and 0 months  
 Knowledge and understanding of victimization and so - Expert - 10 years and 0 months  
 written/inter-personal communications - Expert - 18 years and 0 months

**LANGUAGE(S):****ADDITIONAL INFORMATION****Additional Information**

Core Competencies  
 Strategic Communications (Print, Social, & Broadcast)  
 Public Relations  
 Business Development

General Communications (e-blasts, newsletters, talking points, & editorials)  
 Media Relations  
 Project/Event Management

Branding  
 Research  
 Marketing

Publications  
 Relationship Management (Groups & Coalitions)  
 Staff Management

Customer Service/Membership Relations  
 Community Outreach  
 Public/Social Policy Analysis

REFERENCES		
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Dwayne Bolton	<b>POSITION:</b> Government Affairs Manager, Caterpillar
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (703) 899-2217
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Alvin Williams	<b>POSITION:</b> President & CEO, Black America's PAC (BAMPAC)
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (202) 552-7422

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Dwayne Bolton	<b>POSITION:</b> Government Affairs Manager, Caterpillar
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (703) 899-2217
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Alvin Williams	<b>POSITION:</b> President & CEO, Black America's PAC (BAMPAC)
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (202) 552-7422

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
No
- 4. If so, in which agency do you currently work?**
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
PROFESSIONAL REFERENCE #1  
NAME: Alvin Williams  
POSITION TITLE: President & CEO  
COMPANY: Black America's PAC  
PHONE NUMBER: 202.552.7422  
  
PROFESSIONAL REFERENCE #2  
NAME: Dwayne Bolton  
POSITION TITLE: Government Affairs Manager  
COMPANY: Caterpillar  
PHONE NUMBER: 703.899.2217
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

1. **Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**

Yes

2. **Do you have at least a bachelor's degree?**

Yes

3. **Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**

Yes

4. **If you answered yes to question 3, please briefly describe your experience?**

Employers:

Prince George's County DSS

LeXam Communications

Black America's PAC

American Life League

Law Offices of Levine &amp; Yates

Some of the Software: ; Access; PowerPoint; HTML; PHP; CSS; Westlaw; Lexis-Nexis; IRIS (Immigration law software); Microsoft Word; E-mail software/platforms – Constant Contact, NationBuilder; Online metrics analysis; PR/media database platforms –Vocus, PR newswire; & Management database/software.

Experiences:

- Researched, reviewed and analyzed relevant legislation, public records and news articles.
- Reviewed and tracked relevant legislation.
- Researched, reviewed, and analyzed relevant best practices principles for effective communication/ marketing specific projects/campaigns - use of analytic software.
- Developed and maintained media relations data base - use of analytic and management software.
- Designed and implemented marketing plans that include coalition liaison, outreach initiatives, research and organizational branding (internal & external), and media relations - use of management software
- Case management - data management.

5. **Do you have experience in human and/or constituent services?**

Yes

6. **Are you willing to travel in and out of state?**

Yes

7. **Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**

Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Margaret E Ekarika Ekam on 10/22/14 2:00 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Frederick, Lakiyah N**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/16/14 4:11 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Frederick, Lakiyah N		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 359 Marsh Deer Way, Columbia, South Carolina 29229		
<b>HOME PHONE:</b> (803) 979-3689	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> kiyahnycole04@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$30,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Weekends	
<b>OBJECTIVE:</b> To continue to gain experience and to further my career in the field of human resources, and counseling. I believe I can be a great asset to any company. I am a hard worker and a self starter; I put a lot of pride in my work, and I work well under pressure. I am able to multi task and work well with others. I am also able to learn quickly, and willingly research areas where I may lack knowledge.	

**EDUCATION**

<b>DATES:</b> From: 8/2013 To: 5/2014	<b>SCHOOL NAME:</b> University of South Carolina	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> Social Work	<b>UNITS COMPLETED:</b> 2 - Semester	
<b>DATES:</b> From: 8/2007 To: 5/2009	<b>SCHOOL NAME:</b> University of South Carolina	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Psychology	<b>UNITS COMPLETED:</b> 148 - Semester	

**WORK EXPERIENCE**

<b>DATES:</b> From: 9/2008 To: Present	<b>EMPLOYER:</b> National Guard	<b>POSITION TITLE:</b> Company Commander
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1 National Guard Rd, Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 806-1961	<b>SUPERVISOR:</b> LTC Bradford Marlow - Battalion Commander	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 16	<b>SALARY:</b> \$670.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 161
<b>DUTIES:</b> to supervise each soldier and ensure they complete tasks up to standard. To develop, research, and plan tasks to be carried out at each drill. Keep detailed notes, PowerPoint, and spreadsheets to keep detailed accounts of progress made through drill. Also conducting training for soldiers such as Equal Opportunity, and Sexual Harassment training.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 11/2011 To: Present	<b>EMPLOYER:</b> South Carolina Department of Mental Health	<b>POSITION TITLE:</b> Clinical Counselor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 7901 Farrow Rd, Columbia, South Carolina 29203		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 935-5751	<b>SUPERVISOR:</b> Dr. Allyson Sipes - Chief Psychologist	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$2,100.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> To work with residents in the SVPTP program, writing case notes, and conducting groups to address treatment issues. Also to conduct psycho-educational group to help the resident get an understanding of why they committed their offenses. Every three month providing treatment plans and a master treatment plan with goals to focus on for the rest of the year. As an employee we have to attend bi-weekly developmental trainings, identifying techniques to help assist clients, and bi-weekly supervisions. Assist and facilitate release proceedings to ensure readiness in the integration into society for the resident.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 6/2003 To: 7/2011	<b>EMPLOYER:</b> Big Lots	<b>POSITION TITLE:</b> Furniture manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3230 Augusta Rd, Columbia, South Carolina 29170		<b>COMPANY URL:</b> www.biglots.com
<b>PHONE NUMBER:</b> (803) 791-1419	<b>SUPERVISOR:</b> Kendra Council - Store Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,106.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 4
<b>DUTIES:</b> Assist customers in furniture selection, greeting customers, recording weekly sales, conducting weekly		
<b>REASON FOR LEAVING:</b> Currently working		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**Typing:35  
Data Entry:0**OTHER SKILLS:**Microsoft Word - Expert - 6 years and 0 months  
Microsft Excel - Skilled - 6 years and 0 months  
Outlook - Skilled - 3 years and 0 months**LANGUAGE(S):****ADDITIONAL INFORMATION**

Nothing Entered For This Section

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Micheal Morris	<b>POSITION:</b> battalion A/O
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> 803-667-1409
<b>EMAIL ADDRESS:</b>		<b>POSITION:</b> USPFO
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Bradford Marlow	<b>PHONE NUMBER:</b> 803-354-2047
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
Yes
4. **If so, in which agency do you currently work?**  
Department of Mental Health Sexually Violent Predator Treatment Program
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
LTC Marlow 803-354-2047  
Will Vander 803-865-1700
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I have experience in data management through the military, entry and analysis through both the military and in working with the Department of Mental Health. I have experience in data management through working with Soldiers and residents files in making sure all information pertaining to them is updated and all information is available if needed. I also have experience in entry and analysis through gathering information to assess how the unit is running and how to take the feedback to move forward and implementing measures to address areas of concern.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Lakiyah N Frederick on 10/16/14 4:11 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Greggs, LaWanda R**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/20/14 9:48 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Greggs, LaWanda R		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 4017 Percival rd apt. 3222, Columbia, South Carolina 29229		
<b>HOME PHONE:</b> 803 378-9860	<b>ALTERNATE PHONE:</b> (803) 708-2694	<b>EMAIL ADDRESS:</b> lawanda_greggs@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$35,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, On Call (as needed)	
<b>OBJECTIVE:</b> To obtain a position to utilize my experience in ways that will provide an opportunity for a professional develop and future growth.	

**EDUCATION**

<b>DATES:</b> From: 1/2005 To: 12/2007	<b>SCHOOL NAME:</b> South Carolina State University	
<b>LOCATION:(City, State)</b> Orangeburg, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>MAJOR:</b> MA Rehabilitation Counseling	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: 8/1998 To: 5/2003	<b>SCHOOL NAME:</b> Clafin University	
<b>LOCATION:(City, State)</b> Orangeburg, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> BA in Sociology	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: 8/1994 To: 5/1998	<b>SCHOOL NAME:</b> Denmark Olar High School	
<b>LOCATION:(City, State)</b> Denmark, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> High School Diploma

**WORK EXPERIENCE**

<b>DATES:</b> From: 9/2012 To: Present	<b>EMPLOYER:</b> Department of Social Service	<b>POSITION TITLE:</b> Human Service Specialist II- Foster Care
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3220 Two Notch Rd, Columbia, South Carolina 29204		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Mrs. Mary Buskey - Foster Care Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$29,889.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**  
 Participate in appropriate staffing to determine the best possible plan for children in agency care. Develop a comprehensive case plan to include counseling, referrals, supportive resources and referrals for foster children and families.  
 Provide continuous family assessment to carry out the family services intervention plan by monitoring services to the family of origin, foster children and foster parents or placement providers.  
 Prepare cases for Foster Care Review Board and Permanency Hearing for the Court Information is to be presented in a professional manner. Prepare termination of parental rights summaries when adoption is determined to be the plan.  
 Maintain case records, case narrative recordings written and electronically into agency designated system for documentation and auditing

purposes as required by agency policy in a timely and accurate manner.

Make home visits as required by agency policy and applicable laws. Perform intake or after hour on call duties by responding to after hour calls as required.

**REASON FOR LEAVING:**

currently working.

<b>DATES:</b> From: 10/2011 To: 2/2012	<b>EMPLOYER:</b> Richmond City Department of Social Services	<b>POSITION TITLE:</b> BPS- Energy Assistance
<b>ADDRESS:</b> (Street, City, State, Zip Code) 900 East Marshalle Street, Richmond, Virginia 23219		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (804) 646-7000	<b>SUPERVISOR:</b> Mrs. Regina Truheart	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,635.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Assist in interviewing applicants for the winter heating assistance program. Handling customer requests and process requests for Fuel Assistance. Compile data and process applications, determine eligibility based on guidelines.		

**REASON FOR LEAVING:**

I relocated back to South Carolina.

<b>DATES:</b> From: 5/2008 To: 10/2011	<b>EMPLOYER:</b> Barnwell County Department of Social Services	<b>POSITION TITLE:</b> FI Eligibility Worker
<b>ADDRESS:</b> (Street, City, State, Zip Code) 10913 Ellenton Street, Barnwell, South Carolina 29812		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 541-1200	<b>SUPERVISOR:</b> Ms. Cindy Williams - FI Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,400.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Interview applicants and recipients to obtain and verify information needed to determine eligibility for public assistance. Review forms or instruct individuals with the completion of required documentation.		

Determine eligibility in accordance with state, federal and agency regulations. May refer clients to other services available within the agency or community and any intervention services.

Research questionable information provided by applicant or recipient until satisfactory explanations are provided.

**REASON FOR LEAVING:**

I was offered a job with Department of Social Service City of Richmond, VA.

<b>DATES:</b> From: 1/2007 To: 5/2008	<b>EMPLOYER:</b> Axis I Center of Barnwell	<b>POSITION TITLE:</b> Prevention Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1644 Jackson St, Barnwell, South Carolina 29812		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 541-1245	<b>SUPERVISOR:</b> Mrs. Pam Rush - Director of Prevention Services	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,750.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> § Implement ATOD activities according to the Discretionary Parenting Prevention project grant application.		

§ Implement curriculums for youths of Barnwell County about the effects of alcohol, tobacco, and other drugs also implement effective parenting classes to referred parents

§ Evaluate all prevention activities and submit data in a quarterly report to Director of Prevention Services.

**REASON FOR LEAVING:**

I was offered a job with the Department of Social Services.

<b>DATES:</b> From: 6/2006 To: 12/2006	<b>EMPLOYER:</b> Bamberg Job Corp Center	<b>POSITION TITLE:</b> Residential Advisor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 106 South Main St, Bamberg, South Carolina 29003		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 245-5101	<b>SUPERVISOR:</b> Mr. Arthur Rose - Residential Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**  
§ Conduct SST program and other group sessions in accordance with the schedule and maintain required documentation.

§ Provide students guidance in social skills development and self-management skills.

§ Clearly communicate and consistently model appropriate employability skills including personal responsibility and computer fluency.

**REASON FOR LEAVING:**

I was offered more money at the Axis 1 Center of Barnwell.

<b>DATES:</b> From: 1/2006 To: 6/2006	<b>EMPLOYER:</b> Bamberg Job Corp Center	<b>POSITION TITLE:</b> Pre-Practicum/ Practicum
<b>ADDRESS:</b> (Street, City, State, Zip Code) 106 South Main St, Bamberg, South Carolina 29003		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 245-5101	<b>SUPERVISOR:</b> Ms. Teresa Franklin - Supervisor of Education	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 25	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> § Provided group counseling for students with anger problems.  § Completed an intake interview with new incoming students and observed testing.		
<b>REASON FOR LEAVING:</b> I was offered a position as a Residential Advisor		
<b>DATES:</b> From: 1/2004 To: 12/2004	<b>EMPLOYER:</b> Bamberg County DSN Board	<b>POSITION TITLE:</b> Mental Retardation Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) PO Box 333, Denmark, South Carolina 29042		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 793-5003	<b>SUPERVISOR:</b> Mrs. Sara Moody - Residential Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 28	<b>SALARY:</b> \$600.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> § Performs necessary care for individuals with mental illness.  § Assists residents in all area of self-help skills, including but not limited to hygiene, social behavior, safety, and grooming.  § Assists other staff in the transportation, supervision, and maintenance of resident's safety during outside activities.		
<b>REASON FOR LEAVING:</b> I was not receiving enough hours.		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills**

Nothing Entered For This Section

**ADDITIONAL INFORMATION**

Nothing Entered For This Section

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Teresa Prophet	<b>POSITION:</b> Mental Health Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 5379 Victoria Falls, Grovetown, Georgia 30813		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (843) 300-5775
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Mrs. Mary Buskey	<b>POSITION:</b> Supervisor Foster Care
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3220 Two Notch Rd, Columbia, South Carolina 29204		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 714-7459
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Phesha Johnson	<b>POSITION:</b> Assessment Supervisor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3220 Two Notch Rd, Columbia, South Carolina 29204		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 714-7430

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
Department of Social Services
- 5. Do you have any relatives employed with the State of South Carolina?**  
Yes
- 6. If yes, please provide below the name(s), relationship, and agency.**  
Kenneth Greggs  
Department of Corrections
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Mrs. Phesha Johnson  
3220 Two Notch Rd  
Columbia, SC  
803-714-7430  
  
Mrs. Mary Buskey  
3220 Two Notch Rd  
Columbia, SC 29204  
803-714-7459
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**

Yes

- 2. Do you have at least a bachelor's degree?**

Yes

- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**

Yes

- 4. If you answered yes to question 3, please briefly describe your experience?**

I have 2 years of experience in human services with the Department of Social Services. In my current position I have to maintain a caseload for the agency's which consist of documenting actions within the agency's data base, and creating supplement reports for court.

- 5. Do you have experience in human and/or constituent services?**

Yes

- 6. Are you willing to travel in and out of state?**

Yes

- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**

Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by LaWanda R Greggs on 10/20/14 9:48 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Hamilton, Candice T.**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/28/14  
 11:30 AM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Hamilton, Candice T.		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3430 Broad River Rd. APT 1617, Columbia, South Carolina 29210		
<b>HOME PHONE:</b> (803)381-4792	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> chamilt2008@gmail.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> GA Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: 8/2005 To: 7/2008	<b>SCHOOL NAME:</b> Augusta State University	
<b>LOCATION:(City, State)</b> Augusta, Georgia	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Political Science	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: 1/2008 To:	<b>SCHOOL NAME:</b> University of Salamanca	
<b>LOCATION:(City, State)</b> Salamanca, International	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Professional
<b>MAJOR:</b> Spanish	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: To: 5/2005	<b>SCHOOL NAME:</b> Middle Georgia College	
<b>LOCATION:(City, State)</b> Cochran, Georgia	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Professional
<b>MAJOR:</b> Political Science	<b>UNITS COMPLETED:</b>	

**WORK EXPERIENCE**

<b>DATES:</b> From: 11/2012 To: Present	<b>EMPLOYER:</b> Law Office of Rogers, Townsend, & Thomas, PC	<b>POSITION TITLE:</b> Loss Mitigation Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 220 Executive Center Dr, Columbia, South Carolina 29210		<b>COMPANY URL:</b> www.rtt-law.com
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Susan Randall - Loss Mitigation Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**  
 Recommend Loss Mitigation referrals upon reviewing breach validation, and, analyze feasibility of short sale or long term repayment plan to mitigate losses.  
 Contact delinquent borrowers in order to determine reason for delinquency, update application data, secure current financial information, and obtain commitments for repayment or determine best resolution to mitigate losses.  
 Maintain ethical standards and a high level of confidentiality.  
 Review foreclosure files and determine the cost associated with processing the foreclosure based data analysis.  
 Initiate workout programs to prevent foreclosures, analyze mortgagor's financial statements, evaluate debt ratios, review mortgagor's payment record and educate borrowers on alternative money sources/payment options to bring loan current. Work with borrower to reach a solution.

**REASON FOR LEAVING:**  
 Seeking a promising career with an opportunity for professional growth

<b>DATES:</b> From: 12/2011 To: 8/2012	<b>EMPLOYER:</b> Care Medical	<b>POSITION TITLE:</b> Benefits Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1238 Fenwick St., Augusta, Georgia 30901		<b>COMPANY URL:</b> <a href="http://www.caremedicalsouth.com/contact.php">http://www.caremedicalsouth.com/contact.php</a>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Michael Witherington - Branch Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**  
 Enter clinical records into the database and assisted with the pre-certification, coordination of benefits, file claims and process payments from insurance companies.  
 Knowledge of the different carriers, in and out of network benefits, co-pays, deductibles, etc.  
 Relay pertinent information concerning logistics and distribution of durable medical equipment.  
 Knowledgeable of medical coding and third-party operating procedures and practices.  
 Perform general duties associated with clerical work and office management.  
 Maintain strict confidentiality; adhere to all HIPAA guidelines and regulations.

**REASON FOR LEAVING:**  
 Moved out of state

<b>DATES:</b> From: 8/2010 To: 12/2010	<b>EMPLOYER:</b> Syracuse Behavioral Healthcare	<b>POSITION TITLE:</b> Counselor Aide
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1074 West Genesee Street, Syracuse, New York 13203		<b>COMPANY URL:</b> <a href="http://www.sbh.org/">http://www.sbh.org/</a>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**  
 Oversee day-to-day group activities of residents in the institution.  
 Assist in locating housing for displaced individuals.  
 Provide information or refer individuals to public or private agencies or community services for assistance.  
 Interview individuals or family members to compile information on social, educational, criminal, institutional, or drug history.  
 Keep records and prepare reports for submission to the patient's respective attorney(s), courts, or probation department

**REASON FOR LEAVING:**  
 Moved out of state

<b>DATES:</b> From: 9/2006 To: 6/2008	<b>EMPLOYER:</b> Augusta State University	<b>POSITION TITLE:</b> Information Assistant (Part-Time)
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b> <a href="https://orgsync.com/20638/chapter">https://orgsync.com/20638/chapter</a>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Eddie Howard - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**  
 Provide efficient operation of a public information office in connection with and under the supervision of the Director of Student Activities  
 Attend in-service training sessions and staff meetings during the semester  
 Contribute ideas for further initiatives, programs, and progressive development on the campus of Augusta State University  
 Work as a front desk receptionist, keeping accurate data and reporting information in a timely manner  
 Honors and Activities  
 Hope Scholarship, Recipient, August 2004-July 2008  
 Amnesty International Club, Member, January 2008-Present  
 Foreign Language Honor Society, Member, 2007-2008

**REASON FOR LEAVING:**  
 Went to study abroad

#### CERTIFICATES AND LICENSES

Nothing Entered For This Section

#### Skills

**OFFICE SKILLS:**  
 Typing:  
 Data Entry:

**OTHER SKILLS:**

Office Management - Expert - 4 years and 0 months  
 Clerical - Beginner - 10 years and 0 months

**LANGUAGE(S):**

Spanish - ■ Speak ■ Read ■ Write

**ADDITIONAL INFORMATION****Professional Associations**

Amnesty International Club

**Professional Associations**

Foreign Language Honor Society

**Professional Associations**

3. Laurie Ott: President, University Health Care Foundation

**Honors & Awards**

Hope Scholarship, Recipient, August 2004-July 2008

**Honors & Awards**

Foreign Language Honor Society, Member, 2007-2008

**REFERENCES****REFERENCE TYPE:**

Professional

**NAME:**

Lisa Morrison

**POSITION:**

Accountant, White House Communications

**ADDRESS:** (Street, City, State, Zip Code)**EMAIL ADDRESS:**

ldmorrison@yahoo.com

**PHONE NUMBER:**

706-831-5096

**REFERENCE TYPE:**

Professional

**NAME:**

Laurie Ott

**POSITION:**

President, University Health Care Foundation

**ADDRESS:** (Street, City, State, Zip Code)**EMAIL ADDRESS:****PHONE NUMBER:**

706-667-0030

**REFERENCE TYPE:**

Professional

**NAME:**

Sudha Ratan

**POSITION:**

Chair, Political Science Dept

**ADDRESS:** (Street, City, State, Zip Code)

Chair, Political Science Dept. at Georgia Regents University,

**EMAIL ADDRESS:**

sratan@gru.edu

**PHONE NUMBER:**

706-737-1710

**REFERENCE TYPE:**

Professional

**NAME:**

annette finch

**POSITION:**

civ us army tradoc

**ADDRESS:** (Street, City, State, Zip Code)**EMAIL ADDRESS:**

annette.m.finch.civ@mail.mil

**PHONE NUMBER:**

803-413-0470

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
No
- 4. If so, in which agency do you currently work?**
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Ric Rogers 803-605-2790  
Michelle Bell 803-605-2790  
  
Both are my co-workers. I do not have their address.
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I have experience in preparing, compiling and sorting documents for data entry. I accurately check sources and/or documents for verification.  
Enter data from source documents into prescribed computer database, files and forms transcribe information into required electronic format.  
Scan documents into document management systems or databases check completed work for accuracy. Maintain logbooks or records of activities and tasks. Respond to requests for information and access relevant files. Comply with data integrity and security policies.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Candice T. Hamilton on 10/28/14 11:30 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Harrison, Antwane S**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/20/14 9:21 AM**  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Harrison, Antwane S		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 594 Lewis Dutton Street, Orangeburg, South Carolina 29115		
<b>HOME PHONE:</b> (803) 747-8551	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> harrisonantwane@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$15.00 per hour; \$29,998.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Weekends	
<b>OBJECTIVE:</b> TO BECOME A MEMBER OF YOUR TEAM THAT WILL ADD TO YOUR HIGH STANDARDS	

**EDUCATION**

<b>DATES:</b> From: 8/2014 To: 8/2014	<b>SCHOOL NAME:</b> South Carolina State University	
<b>LOCATION:(City, State)</b> Orangeburg, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> Rehabilitation Counseling	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: 8/2003 To: 12/2009	<b>SCHOOL NAME:</b> SOUTH CAROLINA STATE UNIVERSITY	
<b>LOCATION:(City, State)</b> ORANGEBURG, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Music Industry	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: 8/1997 To: 5/1999	<b>SCHOOL NAME:</b> BURKE HIGH SCHOOL	
<b>LOCATION:(City, State)</b> CHARLESTON, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> High School Diploma

**WORK EXPERIENCE**

<b>DATES:</b> From: 7/2012 To: Present	<b>EMPLOYER:</b> Orangeburg County DSS	<b>POSITION TITLE:</b> Human Service Spec I
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2570 St. matthews road, Orangeburg, South Carolina 29118		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 531-3101	<b>SUPERVISOR:</b> Carrie Lewis - Human Service Spec. Cor.	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$1,900.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Interview clients to determine their eligibility for various social programs.  Document interview results and assessment of which program the client is eligible for and share this Data with Relevant parties.  Notify the Client of eligibility and Program enrollment options.  Sometimes gather more information on clients based on investigation of public records.		
<b>REASON FOR LEAVING:</b> N/A		

<b>DATES:</b> From: 7/2012 To: Present	<b>EMPLOYER:</b> South Carolina Department of Social Services	<b>POSITION TITLE:</b> Adoption Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2570 St. Matthews Road, Orangeburg, South Carolina 29118		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 531-3101	<b>SUPERVISOR:</b> Detra K. Johnson - Supervisor Adoptions	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$2,499.83/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Assess the well-being, safety, and permanency for vulnerable children and teenagers under SCSSS.  Provide social services and assistance to improve the social and psychological functioning of children and thier families.  Maximize the family well-being and the academic functioning of children.  Address such problems as teenage pregnancy, misbehavior, and truancy.  Advise teachers, and foster parents on how to deal with problem children.  Assist single parents, arrange adoptions, and find foster homes for abandoned or abused children.		
<b>REASON FOR LEAVING:</b> N/A		
<b>DATES:</b> From: 9/2000 To: 2/2012	<b>EMPLOYER:</b> EDISTO PREBYTERIAN CHURCH USA	<b>POSITION TITLE:</b> ORGANIST/ CHOIR MASTER
<b>ADDRESS:</b> (Street, City, State, Zip Code) EDISTO ISLAND, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 869-2300	<b>SUPERVISOR:</b> DR. Frank Portee - PASTOR	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 24	<b>SALARY:</b> \$1,264.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Achieve a successful budget,calendar, and program for the year. Manage music department with about 90 members. Head the music committee for community and church functions. Up keep all musical instruments. Create programs to help youth in community. Conduct workshops in surrounding churches to improve worship. Write music to fit lecture.		
<b>REASON FOR LEAVING:</b> STILL THERE		
<b>DATES:</b> From: 1/2010 To: 2/2011	<b>EMPLOYER:</b> CHARLESTON EMPLOYMENT SECURITY COMMISSION	<b>POSITION TITLE:</b> CLAIMS TAKER
<b>ADDRESS:</b> (Street, City, State, Zip Code) CHARLESTON, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 953-8400	<b>SUPERVISOR:</b> DEWAYNE BROWN - LEAD	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Interview claimants, assist applicants in filling out forms, refer applicants to job openings, schedule appointments, answer questions, and give presentations.		
<b>REASON FOR LEAVING:</b> Temp position.		
<b>DATES:</b> From: 3/2000 To: 3/2003	<b>EMPLOYER:</b> GINGISS FORMALWEAR	<b>POSITION TITLE:</b> SALES
<b>ADDRESS:</b> (Street, City, State, Zip Code) CHARLESTON, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 553-8470	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 30	<b>SALARY:</b> \$800.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Rent and sold tuxedo. Booked weddings. Close and Opening store. Represent company at expo and other venues.		
<b>REASON FOR LEAVING:</b> BEGAN COLLEGE IN A DIFFERENT LOCATION.		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Social Work/ Adoption case worker	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>

### Skills

<b>OFFICE SKILLS:</b> Typing:60 Data Entry:20
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<b>OTHER SKILLS:</b>
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<b>LANGUAGE(S):</b> Italian - <input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write French - <input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write
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### ADDITIONAL INFORMATION

Nothing Entered For This Section

### REFERENCES

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> KAREN SMALLS	<b>POSITION:</b>
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<b>ADDRESS:</b> (Street, City, State, Zip Code)
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<b>EMAIL ADDRESS:</b>	<b>PHONE NUMBER:</b> (843) 442-3790
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<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Sandra Clark	<b>POSITION:</b>
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<b>ADDRESS:</b> (Street, City, State, Zip Code)
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<b>EMAIL ADDRESS:</b>	<b>PHONE NUMBER:</b> (803) 928-0067
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**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Sandra Clark 803.928.0067  
Ms. Scott 803.707.3289
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I am in a Graduate program that required a project analyzing a dissertation and while teaching in the school system for a brief time, data was entered for students testing scores.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

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The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Antwane S Harrison on 10/20/14 9:21 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Hastie, Shanna L.**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/23/14  
 12:21 PM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Hastie, Shanna L.		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2622 Brenda Road, Columbia, South Carolina 29204		
<b>HOME PHONE:</b> (404) 277-9276	<b>ALTERNATE PHONE:</b> (404) 277-9276	<b>EMAIL ADDRESS:</b> shastie647@gmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b> My objective is to provide the Department of Health and Environmental Control- Health Regulations with leadership and expertise for the comprehensive evaluation of long term care facilities and their ability to adhere to state, federal and other applicable laws and regulations.	

**EDUCATION**

<b>DATES:</b> From: 9/2003 To: 5/2005	<b>SCHOOL NAME:</b> Clark Atlanta University	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Atlanta, Georgia	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 59 - Semester
<b>MAJOR:</b> Master of Social Work Health/Mental Health Concentration		
<b>DATES:</b> From: 8/1999 To: 5/2003	<b>SCHOOL NAME:</b> Winthrop University	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Rock Hill, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 75 - Semester
<b>MAJOR:</b> Bachelor of Social Work		

**WORK EXPERIENCE**

<b>DATES:</b> From: 1/2014 To: 9/2014	<b>EMPLOYER:</b> Agape Hospice	<b>POSITION TITLE:</b> Medical Social Worker
<b>ADDRESS:</b> (Street, City, State, Zip Code) 700 West Dekalb Street, Camden, South Carolina 29020		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 803-424-2519	<b>SUPERVISOR:</b> Julie Cubbler - Patient Care Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,125.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> <ul style="list-style-type: none"> <li>- Assess the social and emotional factors related to the patient's illness, need for care, response to treatment, and adjustment to care.</li> <li>- Assess the relationship of the patient's medical and nursing requirements to the patient's home situation, financial resources, and availability of community resources.</li> <li>- Provide counseling services that are required by the patient, family member, and/or caregiver as needed.</li> <li>- Provide intervention when necessary to remove a clear and direct impediment to the effective treatment of the patient's medical condition or to the patient's rate of recovery.</li> <li>- Perform comprehensive initial psychosocial evaluation.</li> <li>- Assist in the development and implementation of goal-directed family care plans.</li> <li>- Provide short-term crisis intervention and individual and family counseling.</li> <li>- Observe, evaluate, and bring to team conferences information regarding psychosocial, spiritual, physical, and financial conditions affecting the patient and family.</li> <li>- Assume the active role of advocate for the patient and/or family.</li> <li>- Maintain proper records of visits to patients and/or families utilizing electronic documentation.</li> </ul>		

- Have an organized program for the provision of bereavement services.
- Make bereavement services that reflect the needs of the bereaved available to the family and other individuals in the bereavement plan of care.
- Coordinate partnerships with medical and corporate donors and partners.

**REASON FOR LEAVING:**

Terminated due to inability to be on-call multiple times during the month which included frequent nightly and week-end calls. However prior to discharge, I had never missed on-call. I also received a favorable evaluation from my supervisor stating "Shanna is a team player and great to work with on our team".

<b>DATES:</b> From: 2/2012 To: 6/2013	<b>EMPLOYER:</b> Community Empowerment Center	<b>POSITION TITLE:</b> Research Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1505 Garden Plaza, Unit AD-1, Columbia, South Carolina 29204		<b>COMPANY URL:</b> <a href="http://ceccolumbia.cosw.sc.edu/">http://ceccolumbia.cosw.sc.edu/</a>
<b>PHONE NUMBER:</b> (803) 661-6870	<b>SUPERVISOR:</b> Ronald Pitner - Principal Investigator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 10	<b>SALARY:</b> \$400.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

- Provide community outreach to community groups and individuals to address the various services provided by CEC
- Evaluate community-centered projects' objectives to promote mini-grant project goals
- Provide communication to all stakeholders of CEC
- Provide leadership in creating outreach opportunities to address access to healthy food
- Conduct interviews with food pantry voucher recipients to measure food access
- Meet with project team leaders to evaluate community- engaged initiatives developed by collaboration of team leaders and members
- Attend weekly interdisciplinary staff meetings
- Create promotional advertisement to promote project goals
- Inform media of various community events held within the community

**REASON FOR LEAVING:**

End of project

<b>DATES:</b> From: 8/2011 To: 5/2013	<b>EMPLOYER:</b> University of South Carolina	<b>POSITION TITLE:</b> Research Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29208		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 777-6797	<b>SUPERVISOR:</b> Ronald Pitner, PHD - Principal Investigator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 5	<b>SALARY:</b> \$200.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

- Conduct training for undergraduate and graduate students on collecting data in neighborhoods
- Coordinate and distribute neighborhood assignments to students conducting data collection
- Attend weekly meetings with an interdisciplinary research team
- Maintain regular communication with the project director and other members of the research team
- Coordinate community meetings to discuss Community Safety and Engagement project goals with various stakeholders such as community members, elected officials, community leaders and local college students

**REASON FOR LEAVING:**

End of project

<b>DATES:</b> From: 5/2011 To: 12/2011	<b>EMPLOYER:</b> University of South Carolina	<b>POSITION TITLE:</b> Research Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29208		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Darcy Freedman - Principal Investigator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 2

**DUTIES:**

- Conduct surveys in-person or by telephone with Right Choice Fresh Start Farmers' Market participants enrolled in the evaluation of the farmers' market intervention
- Be available during weekday and evening hours each week for interviews and surveys
- Assist with recruitment of study participants
- Maintain regular communication with the project director and other members of the research team
- Establish working relationships with communities and agencies to disseminate the farmers' market documentary
- Assist in the marketing of the farmers' market documentary to study participants, elected officials, community members and medical staff
- Assist with documenting sales transactions at the farmers' market

**REASON FOR LEAVING:**

End of project

<b>DATES:</b> From: 8/2010 To: 4/2011	<b>EMPLOYER:</b> University of South Carolina-College of Social Work	<b>POSITION TITLE:</b> General Manager of Research Project
<b>ADDRESS:</b> (Street, City, State, Zip Code) DeSaussure College, Columbia, South Carolina 29208		<b>COMPANY URL:</b> <a href="http://www.cosw.sc.edu">www.cosw.sc.edu</a>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Dr. Ron Pitner - Associate Professor/Principle Investigator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,400.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

- Record and disseminate meeting minutes
- Update and maintain project calendars and timelines (on a weekly basis)
- Keep track of progress on \$650, 000 Kresge Foundation Grant
- Assist with report writing
- Maintain project records including press information
- Maintain database of calls for conferences, papers, and grants relevant to project
- Assist with photovoice project organization in collaboration with team members
- Develop lesson plan for students visiting photovoice exhibit and evaluation
- Assist with recruitment of courses to attend photovoice exhibit
- Assist with the facilitation of classroom tours of exhibit
- Survey Columbia Housing residents
- Conduct pilot testing of survey
- Assist with dissemination of recruitment materials
- Assist with scheduling of interviewees
- Interview community members
- Enter data

**REASON FOR LEAVING:**

Research position had ended

<b>DATES:</b> From: 12/2006 To: 3/2010	<b>EMPLOYER:</b> Visiting Nurse Health Systems	<b>POSITION TITLE:</b> Care Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 100 Edgewood Ave NE, Atlanta, Georgia 30303		<b>COMPANY URL:</b> www.vnhs.org
<b>PHONE NUMBER:</b> (404) 222-2417	<b>SUPERVISOR:</b> Alexis Volpe - Fulton County Manager of Case Management	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

- Contact and initiate assessments with clients in a community based program who are physically/mentally disabled for community services
- Conduct in-home assessments with senior citizens in need of congregate meals, homemaker services, and personal care assistance
- Discuss critical needs such as therapeutic meals for clients with medical staff members
- Refer clients to additional services or specialty care as needed
- Address patient-specific disease management issues/provide patient with materials that foster self-management
- Discharge clients when needs are no longer required/clients need higher level of care

**REASON FOR LEAVING:**

Relocating to South Carolina

<b>DATES:</b> From: 6/2005 To: 11/2006	<b>EMPLOYER:</b> Anchor Hospital	<b>POSITION TITLE:</b> Dual Therapist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 5454 Yorktowne Drive, Atlanta, Georgia 30274		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (770) 991-6044	<b>SUPERVISOR:</b> Kisha Thomas - Social Services Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$12,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

- Lead/ co-lead interdisciplinary mental health treatment team providing high quality case management
- Facilitate family sessions to discuss patient goals and discharge planning
- Assist patients with identifying stressors and support systems
- Complete psychosocial assessments with both youth and adult patients to identify mental health/substance abuse issues
- Coordinate linkages to other mental health facilities and providers
- Facilitate group sessions with patients

**REASON FOR LEAVING:**

Advanced opportunity to work with geriatric clients in an health care field.

**CERTIFICATES AND LICENSES****TYPE:**

LMSW

**LICENSE NUMBER:**

MSW04018

**ISSUING AGENCY:**

Georgia Composite Licensuring Board

**TYPE:**

LMSW

**LICENSE NUMBER:**

MSW10070

**ISSUING AGENCY:**

South Carolina Labor, Licensing and Regulations

**Skills****OFFICE SKILLS:**Typing:35  
Data Entry:60**OTHER SKILLS:**PhotoShop - Skilled - 10 years and 0 months  
Access - Skilled - 15 years and 0 months  
Microsoft Outlook - Skilled - 15 years and 0 months  
Browsing Internet - Expert - 20 years and 0 months  
Microsoft Excel - Skilled - 15 years and 0 months  
Microsoft Word - Skilled - 15 years and 0 months**LANGUAGE(S):****ADDITIONAL INFORMATION****Honors & Awards**South Carolina Head Start Scholarship  
National Dean's List  
Lettie Pate Whitehead Scholarship**Professional Associations**

National Association of Social Workers (NASW)

**Interests & Activities**Guest Lecturer, "Psychology of Adulthood and Aging" -Shorter College  
Guest Lecturer, "Introduction to Human Services" -Shorter College**Professional Memberships**

Certified Chronic Disease Self Management Leader, Sponsored by Stanford University and Atlanta Regional Commission

**Volunteer Experience**-Community Health Fair Coordinator 2011, 2012, 2013  
-Young People's Division Director, Union Station A.M.E. Church  
-Columbia Housing Authority and Feed the Children Volunteer  
-American Kidney Foundation Volunteer  
-SPARC (Sickness Prevention Achieved Through Regional Collaboration) Participant  
-Senior Citizen Day at the Capitol Volunteer  
-Girl Scouts of America**REFERENCES****REFERENCE TYPE:**

Professional

**NAME:**

Darcy Freedman

**POSITION:**

Associate Professor, PHD

**ADDRESS:** (Street, City, State, Zip Code)

Cleveland, Ohio 44106

**EMAIL ADDRESS:****PHONE NUMBER:**

(216) 368-3060

**REFERENCE TYPE:**

Professional

**NAME:**

Ron Pitner

**POSITION:**

Associate Professor, PHD

**ADDRESS:** (Street, City, State, Zip Code)

123 Desaussure, Columbia, South Carolina 29208

**EMAIL ADDRESS:**

rpitner@sc.edu

**PHONE NUMBER:**

(803) 777-6797

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**  
No
- 3. Are you currently employed by the State of South Carolina?**  
No
- 4. If so, in which agency do you currently work?**  
No
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**  
No
- 7. Have you ever been terminated or forced to resign from any job?**  
Yes
- 8. If yes, please explain.**  
Terminated due to employer's belief I would not be able to continue being on-call multiple times during the month including evenings and week-ends. However, prior to discharge I had never missed any scheduled on-call times. Prior to discharge, I also received a favorable evaluation from supervisor stating, " Shanna is a team player and great to work with on our team."
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Darcy Freedman, PhD, MPH  
Darcy A. Freedman, PhD, MPH  
Associate Professor, Department of Epidemiology and Biostatistics  
Case Western Reserve University  
Prevention Research Center for Healthy Neighborhoods  
Phone: 216-368-3060  
Fax: 216-368-2610  
Email: daf96@case.edu  
  
Ronald Pitner, Ph.D., ACSW  
Assistant Professor  
FEI Faculty in African American Health and Social Disparities  
College of Social Work  
University of South Carolina  
1731 College Street; Rm. 109,  
Columbia SC, 29208  
Office: 803-777-6797  
Fax: 803-777-3498  
rpitner@sc.edu
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
As a Project Coordinator for the grant funded Healthy Environment's Project at the University of South Carolina, I was responsible for data management of this grant which was worth \$650.00. My role included data collection of participant interviews and participant incentives. Additionally, I conducted many participant interviews including pilot interviews with various stakeholders. Information which was gathered from study was input in statistical software. I also assisted in the analysis of this data.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Shanna L. Hastie on 10/23/14 12:21 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Holt, David C**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/17/14  
 12:14 PM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Holt, David C		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 813 Pebble Lane, Lugoff, South Carolina 29078		
<b>HOME PHONE:</b> (803) 640-3798	<b>ALTERNATE PHONE:</b> (302) 270-2274	<b>EMAIL ADDRESS:</b> dave_cat99@live.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: 1/2003 To: 1/2008	<b>SCHOOL NAME:</b> Wilmington University	
<b>LOCATION:</b> (City, State) New Castle, Delaware	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> Master's of Science in Administration of Justice	<b>UNITS COMPLETED:</b> all - Quarter	

**WORK EXPERIENCE**

<b>DATES:</b> From: 1/1996 To: Present	<b>EMPLOYER:</b> USAF	<b>POSITION TITLE:</b> Physical Security Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) Bldg 825, Shaw AFB, South Carolina 29152		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 895-3661	<b>SUPERVISOR:</b> Mr. Demonte - Section Chief Plans	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 50	<b>SALARY:</b> \$65,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 40

**DUTIES:**

Physical Security Program Manager, September 2011 to present, Shaw AFB, SC

- Focal point for Installation Physical Security Program; ensure executive level compliance with strategic and tactical level force protection requirements
- Conducted Vulnerability and Risk Management Assessments while deployed to Iraq and Afghanistan; garnered over \$6 million for anti-terrorism and force protection enhancements
- Manage a multi-layered physical security environment for the largest F-16 tactical fighter wing in the United States
- Authored a 728-page operational security plan; requirements merged from several sources; and sourced 20+ agencies to formulate likely contingencies to implement, as required
- Coordinated 7 Memoranda of Agreement, 19 operations plans, 4 support agreements; partnered with 45 supporting organizations--ensured protection standards were met with local support
- Pivotal contributor to Executive Information Security (IS) Advisory Group; informed leadership on use of IS strategies
- Organized Integrated Defense Working Group meetings; secured 24 airfield gates and corrected 11 deficiencies--fused 17 organizations' efforts

Operations Manager, December 2008 to September 2011, Shaw AFB, SC and Dover AFB, DE

- Led 70 United States and Afghan military personal in daily security operations; zero intrusions despite three attempts--maintained constant protection for critical resources
- Controlled entry and exit at a \$96M detainee confinement facility; provided access for 1000+ vehicles and 2000+ personal--zero security incidents
- Mentored personnel and evaluated job performance, assigned supervisors to incoming personnel, and ensured proper training was conducted
- Inspected personnel and equipment to ensure they were equipped and prepared for duty according to Air Force standards

- Held pre-quality control evaluations for supervisor and leader positions; documented training and set up a schedule and training program for individual positions
- Oversaw 18 volatile domestic disturbances; separated, detained, and processed offenders –coordinated with local law enforcement to restore order
- Led Emergency Operational Center management; tackled proposed crisis management situations during air expo (Air show) over 30,000 populace attended the event

Critical Asset Manager, December 2008 to December 2002, Dover AFB, DE

- Invigorated a neglected Asset Protection Program; trained over 35 controlled area monitors--ensured compliance with strategic and tactical level standards
- Drafted the Performance Work Statement for a \$50M runway reconstruction project; adopted as the new Air Force standard for contract administration.
- Created and published flyers and news articles for crime prevention and suppression techniques
- Formulated and implemented an incentive program to encourage officers to increase their presence at community gatherings; increased community support for crime prevention programs
- Constructed bridge due to flooding paths at access control point; prevented shut down and loss of \$3M security forces equipment--maintained operations
- Conducted Vulnerability Assessments resulting in allocation of \$470K to support physical security enhancements; ensured critical inspection areas had proper access and perimeter control
- Discovered unused force protection equipment at another base; distributed 200 concrete barriers to areas that were under equipped; saved government \$1.6M

**REASON FOR LEAVING:**

Completed honorable 20 years of service

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills**

**OFFICE SKILLS:**

Typing:40

Data Entry:40

**OTHER SKILLS:**

**LANGUAGE(S):**

**ADDITIONAL INFORMATION**

Nothing Entered For This Section

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Louis Demonte	<b>POSITION:</b> Plans and Programs Superintendent
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3505 Preserve Court, Sumter, South Carolina 29150		
<b>EMAIL ADDRESS:</b> Louis.Demonte@shaw.af.mil		<b>PHONE NUMBER:</b> (803) 983-3557
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Sammy Bryan	<b>POSITION:</b> adjunct business instructor/Resource Protection Adviser
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3235 Mitchum St, Sumter, South Carolina 29150		
<b>EMAIL ADDRESS:</b> Sammy.Bryan@shaw.af.mil		<b>PHONE NUMBER:</b> (803) 840-4904

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
  
Louis R Demonte  
Plans and Programs Superintendent  
Shaw AFB, SC  
3505 Preserve Court  
Sumter, SC 29150  
(803) 983-3557  
  
Sammy Alan Bryan  
Security Administrator  
Shaw AFB, SC  
3235 Mitchum Lane  
Sumter, SC 29154  
(803) 840-4904
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
In the Air force I use a program called ForcePro to conduct Risk Management. This database is feed information on assets for protection and outside uncontrollable mitigation to determine individual asset risk for prioritization and determine courses of action to bring risk down.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by David C Holt on 10/17/14 12:14 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**jones, angela y**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/17/14 3:00 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) jones, angela y		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 212 Rosecrest Road, Lexington, South Carolina 29072		
<b>HOME PHONE:</b> (803) 354-8731	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> attyangelajones@gmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$70,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b> I am interested in obtaining a professional, leadership-oriented position that allows me to use my talents for critical thinking, organization and service.	

**EDUCATION**

<b>DATES:</b> From: 9/2000 To: 5/2004	<b>SCHOOL NAME:</b> Wayne State University Law School	<b>DEGREE RECEIVED:</b> Professional
<b>LOCATION:(City, State)</b> Detroit, Michigan	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 70 - Semester
<b>MAJOR:</b> Law		
<b>DATES:</b> From: 8/1989 To: 8/1995	<b>SCHOOL NAME:</b> University of South Carolina	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 90 - Semester
<b>MAJOR:</b> English Literature		

**WORK EXPERIENCE**

<b>DATES:</b> From: 11/2010 To: Present	<b>EMPLOYER:</b> Angela Y Jones, Attorney and Counselor at Law	<b>POSITION TITLE:</b> Attorney
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1708 Main Street, Suite 101, Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 251-4321	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Private Law Practice; practice areas include civil litigation and criminal.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 5/2014 To: Present	<b>EMPLOYER:</b> South Carolina Department of Social Services	<b>POSITION TITLE:</b> Attorney III
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1070 S. Lake Road, Lexington, South Carolina 29073		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Cindy McIntee - Area Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

<b>DUTIES:</b> Prepare child/adult protective services for trial in SC Family Court.		
<b>REASON FOR LEAVING:</b> Would like to better utilize my talents for leadership and connectivity while serving the public interest.		
<b>DATES:</b> From: 8/2012 To: 5/2014	<b>EMPLOYER:</b> South Carolina Department of Social Services	<b>POSITION TITLE:</b> Managing Attorney
<b>ADDRESS:</b> (Street, City, State, Zip Code) Lancaster, South Carolina 29720		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 289-1534	<b>SUPERVISOR:</b> Dot Killian - General Counsel	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 1
<b>DUTIES:</b> Prepare child and adult protective services cases for trial in SC Family Court (currently 6th Judicial Circuit).		
<b>REASON FOR LEAVING:</b> Relocated to Lexington County, SC.		
<b>DATES:</b> From: 11/2007 To: 11/2010	<b>EMPLOYER:</b> SC Legal Services	<b>POSITION TITLE:</b> Intake/Staff Attorney
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2109 Bull Street, Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> screened telephone applicants for program eligibility; counsel and advice; housing staff attorney (6 months).		
<b>REASON FOR LEAVING:</b> Wanted more practical courtroom and legal experience		
<b>DATES:</b> From: 11/2006 To: 11/2007	<b>EMPLOYER:</b> Angela Y. Jones, Attorney and Counselor at Law	<b>POSITION TITLE:</b> Attorney
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 23575, Detroit, Michigan 48223		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Private Law Practice; practice areas included civil, family, probate, and criminal.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 11/2004 To: 10/2006	<b>EMPLOYER:</b> Detroit City Council	<b>POSITION TITLE:</b> Legislative Analyst
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2 Woodward Avenue, Detroit, Michigan 48226		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Legislative research, writing; community liaison		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 8/2000 To: 5/2004	<b>EMPLOYER:</b> Wayne State University Law School	<b>POSITION TITLE:</b> Law Student
<b>ADDRESS:</b> (Street, City, State, Zip Code) Detroit, Michigan		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 0	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> part time law student (August 2000- February 2002); full time law student (February 2002- May 2004)		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 11/1998 To: 2/2002	<b>EMPLOYER:</b> Gale Group	<b>POSITION TITLE:</b> Assistant Editor/Account Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) 27500 Drake Road, Farmington Hills, Michigan		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

<b>DUTIES:</b> Copyedited print products; negotiated licensing rights
<b>REASON FOR LEAVING:</b>

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Member, Michigan Bar	
<b>LICENSE NUMBER:</b> P69843	<b>ISSUING AGENCY:</b> State Bar of Michigan
<b>TYPE:</b> Member, SC Bar	
<b>LICENSE NUMBER:</b> 78371	<b>ISSUING AGENCY:</b> SC Bar

#### Skills

<b>OFFICE SKILLS:</b> Typing:55 Data Entry:0
<b>OTHER SKILLS:</b> MacIntosh - Skilled - 20 years and 0 months Microsoft Office/Windows - Skilled - 25 years and 0 months
<b>LANGUAGE(S):</b>

#### ADDITIONAL INFORMATION

Nothing Entered For This Section

#### REFERENCES

<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Heyward Bannister	<b>POSITION:</b> President, BANCO, Inc.
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (803) 348-4571
<b>EMAIL ADDRESS:</b>		
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Robin Page	<b>POSITION:</b> Guardian ad Litem Attorney, Lexington County Guardian ad Litem Program
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (803) 957-6484
<b>EMAIL ADDRESS:</b>		
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Tracy Bomar-Howze	<b>POSITION:</b> Trainer, Children's Law Center
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> 803-517-1574
<b>EMAIL ADDRESS:</b>		

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
Department of Social Services
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Robin Page, Lexington GAL, 803-736-4175  
Tracy Bomar Howze, Children's Law Center, 803-517-1574
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I have extensive experience collecting, managing entry of legal data, and analysis into DSS operating systems.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by angela y jones on 10/17/14 3:00 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Jones, Crystal L**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/21/14  
 12:58 PM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Jones, Crystal L		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1900 Blue Ridge Terrace, West Columbia, South Carolina 29170		
<b>HOME PHONE:</b> 803-414-4410	<b>ALTERNATE PHONE:</b> 803-834-7626	<b>EMAIL ADDRESS:</b> denizens_hr@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$40,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b> To obtain a position within a local, county, state, or federal government agency working with emergency management, homeland security, security, law enforcement, or corrections.	

**EDUCATION**

<b>DATES:</b> From: 5/2010 To: 5/2011	<b>SCHOOL NAME:</b> American Military University	
<b>LOCATION:(City, State)</b> Charles Town, West Virginia	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> Security Management	<b>UNITS COMPLETED:</b> 39 - Semester	
<b>DATES:</b> From: 9/2008 To: 5/2010	<b>SCHOOL NAME:</b> American Military University	
<b>LOCATION:(City, State)</b> Charles Town, West Virginia	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> Homeland Security	<b>UNITS COMPLETED:</b> 36 - Semester	
<b>DATES:</b> From: 5/2007 To: 8/2008	<b>SCHOOL NAME:</b> Mountain State University	
<b>LOCATION:(City, State)</b> Beckley, West Virginia	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DEGREE RECEIVED:</b> No Degree
<b>MAJOR:</b> Criminal Justice Administration - Education and Training	<b>UNITS COMPLETED:</b> 9 - Semester	
<b>DATES:</b> From: 1/2003 To: 5/2007	<b>SCHOOL NAME:</b> Mountain State University	
<b>LOCATION:(City, State)</b> Beckley, West Virginia	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> BS Interdisciplinary Studies: Pre-Law/Criminal Justice	<b>UNITS COMPLETED:</b> 133 - Semester	

**WORK EXPERIENCE**

<b>DATES:</b> From: 6/2011 To: Present	<b>EMPLOYER:</b> Civil Air Patrol	<b>POSITION TITLE:</b> Activities Officer/Personnel Officer/Testing Officer/Professional Development Officer
<b>ADDRESS:</b> (Street, City, State, Zip Code) Charleston, West Virginia		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 3	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

<b>DUTIES:</b> Volunteer position. Instruct courses such as the NIMS/ICS courses and First Aid needed for certification as Ground Team Member and for Emergency Services, assist at both Squadron and Wing level with Homeland Security related issues and Emergency Management/Planning. Plan activities, conduct testing and physical fitness class, assist members with professional development, mentor adults and youth.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 6/2014 To: 9/2014	<b>EMPLOYER:</b> US Department of Labor	<b>POSITION TITLE:</b> Office Automation Clerk
<b>ADDRESS:</b> (Street, City, State, Zip Code) 100 Bluestone Road, Mount Hope, West Virginia 25880		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 304-877-3900	<b>SUPERVISOR:</b> Sandra Humphrey - Supervisory Management Analyst	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,098.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Receives visitors and telephone calls and refers them to appropriate staff members. Schedules appointments as needed. Answers routine, non-technical inquiries and refers technical questions to the proper individual.  Receives and routes incoming mail, documents, or other items in accordance with clear guides or instructions. Establishes and maintains office files and records. Abstracts, summarizes, and organize date requested.  Use word processing software and printing equipment to create; copy; edit; store; retrieve; and print a variety of standardized documents using a glossary of prerecorded formats, form letters, standard paragraphs, and mailing lists.  Transcribes various correspondence and reports from handwritten drafts or voice recordings into proper format. Transmits, receives, and acknowledges electronic mail and messages.		
<b>REASON FOR LEAVING:</b> Temporary summer job to last no longer than 90 days.		
<b>DATES:</b> From: 1/2011 To: 11/2013	<b>EMPLOYER:</b> WV National Guard/WV Military Authority	<b>POSITION TITLE:</b> Critical Infrastructure Protection/Emergency Management
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1709 Coonskin Drive, Charleston, West Virginia 25311		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 561-6689	<b>SUPERVISOR:</b> Mike Todorovich - Deputy J3	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,242.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> In cooperation with other planners, State, and WV National Guard personnel create and update State and WV National Guard emergency plans. Research and analysis of information to create Emergency Plans and to revise existing Emergency Plans for the State of West Virginia and the West Virginia National Guard, presenting information to stakeholders regarding progress of plans, and threat & risk analysis of current critical infrastructure in the state of West Virginia. Member of planning team and chairperson of training and resources planning committee for full scale exercise. Create new and edit existing emergency operations and continuity plans for the WV National Guard and the WV Division of Homeland Security and Emergency Management. COOP (Continuity of Operations) site management, set-up and maintain COOP equipment and sites ensuring sites and equipment are fully operational at all times, assist emergency operations center and joint operations center during activation. Maintaining supervisor's calendar and scheduling of meeting room. Review and edit correspondence, answer telephone, direct visitors to appropriate office. Provide procedural and technical guidance to employees, managers, and supervisors. Prepare reports and documents. Instruct and advise others in the matters of directives, reports, correspondence, policy and procedures; standard software packages and skill in operating electronic equipment; planning and carrying out the work of the office; receiving, screening telephone calls and visitors; keeping the calendar, scheduling appointments; making travel arrangements, arranging visits, making reservations, and submitting travel vouchers.  Schedules dates and arranges for conferences between government agencies. Researches, assembles, analyzes, and summarizes data for use in planning and audits, including a copy of the conference letter sent to the agencies, and other relevant information as needed for the conference.  Researches and assembles information from the files and records for use by the planning team in conferences, meetings, or seminars. Maintains confidentiality and accountability of physical and testimonial evidence and records.  DoD active security clearance; Investigation closed 12/18/12, expires 12/18/22.		
<b>REASON FOR LEAVING:</b> Grant funded position; grant ended, not renewed.		
<b>DATES:</b> From: 3/2012 To: 9/2013	<b>EMPLOYER:</b> SCOT Solutions, LLC	<b>POSITION TITLE:</b> Director of Education and Training
<b>ADDRESS:</b> (Street, City, State, Zip Code) Charleston, West Virginia 25302		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Create training schedules and course outlines, conduct grant research, purchasing, scheduling travel and classes, oversee instructors and their duties.		

<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 7/2003 To: 3/2012	<b>EMPLOYER:</b> Denizens of the Deep Diving Company	<b>POSITION TITLE:</b> Human Resources/Assistant Dir. of Education and Training
<b>ADDRESS:</b> (Street, City, State, Zip Code) 22 Blue Jordan Road, Frostproof, Florida 33843		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (863) 635-6410	<b>SUPERVISOR:</b> Shawn Woodward - President/CEO/Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Develop and coordinate education and training programs for both commercial diving division and special operations division; conduct human resources duties to include employee relations, background investigations, and interviewing potential students/employees; grant research and writing; crisis management planning		
<b>REASON FOR LEAVING:</b> Training side of the company was dissolved forcing staff cutbacks.		
<b>DATES:</b> From: 3/2010 To: 1/2011	<b>EMPLOYER:</b> WV Division of Homeland Security and Emergency Management	<b>POSITION TITLE:</b> Emergency Services Associate
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1900 Kanawha Blvd, Bldg. 1, Room EB-80, Charleston, West Virginia 25305		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 558-5380	<b>SUPERVISOR:</b> Paul Howard - Director of Operations	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,882.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Operate emergency call center answering emergency hotline telephones and collecting information to determine need to activate emergency response system. Answer telephones to collect emergency information regarding chemical spills, arson, arson tips, safe schools, general questions; emergency operations. Use of Accessed based software to collect and track data in support of the organization's operation. Retrieve computerized data for report and other data collection forms. This position requires the ability to think critically and make decisions under stressful situations.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 6/2009 To: 9/2009	<b>EMPLOYER:</b> WV DHHR Office of Environmental Health Services	<b>POSITION TITLE:</b> Intern
<b>ADDRESS:</b> (Street, City, State, Zip Code) Charleston, West Virginia		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 558-2981	<b>SUPERVISOR:</b> Bob Hart	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,706.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Update the emergency contact database by contacting water system facilities in the state, create an overall final report including a summary of findings and recommendations		
<b>REASON FOR LEAVING:</b> Temporary Summer Internship		
<b>DATES:</b> From: 8/2007 To: 2/2008	<b>EMPLOYER:</b> Anderson, Stansbury and Associates	<b>POSITION TITLE:</b> Legal Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 207 South Heber Street, Beckley, West Virginia 25801		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 252-0701	<b>SUPERVISOR:</b> James G. Anderson, III - Attorney	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Create and edit legal documents and correspondence, speak with clients regarding their case, answer telephone, real estate title exams, courthouse research, maintain client files		
<b>REASON FOR LEAVING:</b> School and looking for a more financially stable career.		
<b>DATES:</b> From: 11/2006 To: 5/2007	<b>EMPLOYER:</b> Mountain State University	<b>POSITION TITLE:</b> Work Study Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Beckley, West Virginia 25801		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 929-1567	<b>SUPERVISOR:</b> Nelson Staples - Professor of Criminal Justice	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$432.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Assist professor with daily tasks, assist new and current students with inquiries concerning the criminal justice program and with assignments		
<b>REASON FOR LEAVING:</b>		

<b>DATES:</b> From: 6/2006 To: 4/2007	<b>EMPLOYER:</b> Beaver Volunteer Fire Department	<b>POSITION TITLE:</b> Volunteer Firefighter
<b>ADDRESS:</b> (Street, City, State, Zip Code) Beaver, West Virginia		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 253-8993	<b>SUPERVISOR:</b> Larry Rice and Mike - Chief and Assistant Chief	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Fire prevention and suppression, general tasks around the station to prepare trucks for next call, Team Leader/Co-Coordinator of the department's Critical Response Team		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 7/2003 To: 10/2003	<b>EMPLOYER:</b> General Ambulance	<b>POSITION TITLE:</b> Medical Billing Clerk
<b>ADDRESS:</b> (Street, City, State, Zip Code) Hilltop, West Virginia		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 465-8700	<b>SUPERVISOR:</b> Kim Light and Angie Goff	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 25	<b>SALARY:</b> \$700.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Medical billing for emergency and non-emergency transportation, researching files for attorneys, data entry, filing, account collections		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 11/2002 To: 7/2003	<b>EMPLOYER:</b> Bright Enterprises	<b>POSITION TITLE:</b> Data Entry Clerk
<b>ADDRESS:</b> (Street, City, State, Zip Code) 200 Greenbrier Road, Summersville, West Virginia 26651		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (304) 872-3000	<b>SUPERVISOR:</b> Angie Myers	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$960.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Data entry, typing, printing letters for mass mailing, stuffing envelopes, creating and maintaining customer databases, proofreading, advertising sales		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 3/1997 To: 3/1998	<b>EMPLOYER:</b> Lewisburg Fire Department	<b>POSITION TITLE:</b> Volunteer Firefighter
<b>ADDRESS:</b> (Street, City, State, Zip Code) Lewisburg, West Virginia 24901		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Emergency radio communications, cleaning and maintenance of the station and trucks, public safety		
<b>REASON FOR LEAVING:</b>		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Introduction to Exercises	
<b>LICENSE NUMBER:</b> IS-120	<b>ISSUING AGENCY:</b> Emergency Management Institute
<b>TYPE:</b> Terrorism Awareness for Emergency First Responders	
<b>LICENSE NUMBER:</b> AWR-160	<b>ISSUING AGENCY:</b> Texas A&M University System
<b>TYPE:</b> Emergency Management Concerns For the First Responder in Terrorism and Disasters	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Texas A&M University System
<b>TYPE:</b> WMD Incident Management/Unified Command Concept	
<b>LICENSE NUMBER:</b> MGT-100	<b>ISSUING AGENCY:</b> Texas A&M University System
<b>TYPE:</b> Victim Assistance Training Online	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Office for Victims of Crime Training and Technical Assistance Center
<b>TYPE:</b> NRA Basic Pistol Course	

<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> The National Rifle Association of America - Instructor Steve Ripple
<b>TYPE:</b> Understanding & Planning for School Bomb Incidents	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> New Mexico Tech Energetic Materials Research and Testing Center
<b>TYPE:</b> Law Enforcement Response to WMD Incidents Awareness Level	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Louisiana State University - FEMA - US Department of Homeland Security
<b>TYPE:</b> Emergency Program Manager	
<b>LICENSE NUMBER:</b> IS-00001	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Radiological Emergency Management	
<b>LICENSE NUMBER:</b> IS-00003	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> An Introduction to Hazardous Materials	
<b>LICENSE NUMBER:</b> IS-00005	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> A Supervisor's Guide to Equal Employment Opportunity	
<b>LICENSE NUMBER:</b> IS-00016	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Equal Employment Opportunity for Employees	
<b>LICENSE NUMBER:</b> IS-00018	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Introduction to the Incident Command System	
<b>LICENSE NUMBER:</b> IS-00100.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Exercise Evaluation and Improvement Planning	
<b>LICENSE NUMBER:</b> IS-00130	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Exercise Design	
<b>LICENSE NUMBER:</b> IS-00139	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> ICS for Single Resources and Initial Action Incidents	
<b>LICENSE NUMBER:</b> IS-00200.a or ICS-200	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> State Disaster Management	
<b>LICENSE NUMBER:</b> IS-00208	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Fundamentals of Emergency Management	
<b>LICENSE NUMBER:</b> IS-00230.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Emergency Planning	
<b>LICENSE NUMBER:</b> IS-00235	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Leadership & Influence	
<b>LICENSE NUMBER:</b> IS-00240	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Decision Making & Problem Solving	
<b>LICENSE NUMBER:</b> IS-00241	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Effective Communication	
<b>LICENSE NUMBER:</b> IS-00242	<b>ISSUING AGENCY:</b> FEMA/DHS

<b>TYPE:</b> Developing and Managing Volunteers	
<b>LICENSE NUMBER:</b> IS-00244	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Intermediate ICS for Expanding Incidents for Operational First Responders	
<b>LICENSE NUMBER:</b> ICS-300	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Advanced ICS for Command & General Staff, Complex Incidents, & MACs for Operational First Responders	
<b>LICENSE NUMBER:</b> ICS-400	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Continuity of Operations Awareness Course	
<b>LICENSE NUMBER:</b> IS-00546.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Introduction to Continuity of Operations	
<b>LICENSE NUMBER:</b> IS-00547.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Continuity of Operations Manager	
<b>LICENSE NUMBER:</b> IS-00548	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> National Incident Management System, An Introduction	
<b>LICENSE NUMBER:</b> IS-00700.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> NIMS Multiagency Coordination System	
<b>LICENSE NUMBER:</b> IS-00701.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> NIMS Public Information Systems	
<b>LICENSE NUMBER:</b> IS-00702	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> NIMS Resource Management	
<b>LICENSE NUMBER:</b> IS-00703.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> NIMS Communications and Information Management	
<b>LICENSE NUMBER:</b> IS-00704	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> NIMS Intrastate Mutual Aid, an Introduction	
<b>LICENSE NUMBER:</b> IS-00706	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> EOC Management and Operations	
<b>LICENSE NUMBER:</b> IS-00775	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> National Response Framework, an Introduction	
<b>LICENSE NUMBER:</b> IS-00800.b	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Introduction to the National Infrastructure Protection Plan	
<b>LICENSE NUMBER:</b> IS-00860.a	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Dams Sector: Crisis Management	
<b>LICENSE NUMBER:</b> IS-00870	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> National Disaster Medical System Federal Coordinating Center Operations	
<b>LICENSE NUMBER:</b> IS-01900	<b>ISSUING AGENCY:</b> FEMA/DHS
<b>TYPE:</b> Instructor Development Workshop Management and Planning Level	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> DHS/FEMA/LSU

<b>TYPE:</b> Professional Development Series	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>
<b>TYPE:</b> DoD Secret Security Clearance	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b>

Skills	
<b>OFFICE SKILLS:</b> Typing:50 Data Entry:0	
<b>OTHER SKILLS:</b>	
<b>LANGUAGE(S):</b>	

ADDITIONAL INFORMATION	
<b>Additional Information</b> Undergraduate education/experience included education in pre-law, criminal justice, and forensic investigation (eg. corrections, criminal and civil procedure, investigative practices, etc.)	
Graduate education in the field of Homeland Security with emphasis on emergency and disaster management. Courses include: Crisis Action Planning, Homeland Security Policy, Computer Crime, Domestic Terrorism & Extremist Groups, Mass Casualty Incident Management, Interagency Disaster Management, Homeland Defense, Port Security, Threat Analysis, and Research.	
<b>Honors &amp; Awards</b> Magna Cum Laude graduate - May 2011 Delta Epsilon Tau honor society - 2011 Cum Laude graduate - May 2007 Dean's List - AMU - Spring 2009 President's List - Spring 2007 President's List - Fall 2007 Alpha Phi Sigma (Criminal Justice Honor Society) Nominated for National Dean's List - Spring 2004 Nominated for Collegiate All-American Scholar Program - Spring 2004 Dean's List - Fall 2003 Dean's List - Spring 2004 Dean's List - Fall 2006 Mountain State University Criminal Justice Association - Vice President	
<b>Additional Information</b> Have approximately 3 years of full time experience at the State government level handling sensitive information of varying classification levels during which I have had extensive training in protecting critical and personal information. I have 4 years of experience with Civil Air Patrol, 3 of which I have handled and maintained security of personal information including social security numbers. I have 3 months of experience at the Federal government level handling personal information. I have a Master's Degree in Homeland Security and a Master's Degree in Security Management; both fields of study giving me the knowledge and training in protecting personal and proprietary information.	
I also currently hold an active DoD Secret level security clearance.	
Proficient in various computer programs and office equipment and can easily learn how to operate new equipment or programs.	
<b>Additional Information</b> Hold a current DoD Secret Security clearance.	

REFERENCES		
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Brent Walker	<b>POSITION:</b> WV Division of Highways
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (304) 558-9227
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Jerry McGhee	<b>POSITION:</b> JITEC CBRNE Team Chief
<b>ADDRESS:</b> (Street, City, State, Zip Code) WV National Guard, 9008 California Avenue, Marmet, West Virginia 25315		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 304-201-3104
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> David Hoge	<b>POSITION:</b> Deputy Directory, Homeland Security State Administrative Agency
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1900 Kanawha Boulevard East, Building 1, Room W-400, Charleston, West Virginia 25305		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 304-558-2930
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Scott Hale	<b>POSITION:</b> Trauma Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) Beckley Appalachian Regional Hospital, Beckley, West Virginia		

<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 304-255-3548
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Paul Howard	<b>POSITION:</b> Director of Operations
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1900 Kanawha Boulevard East, Building 1 Room EB-80, Charleston, West Virginia 25305		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 304-558-5380

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**  
N/A
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**  
N/A
5. **Do you have any relatives employed with the State of South Carolina?**  
Yes
6. **If yes, please provide below the name(s), relationship, and agency.**  
Jonathan Jones - Spouse - University of South Carolina, Student Health Services
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**  
N/A
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Kim Southern 304-877-3900  
Barb Slone 304-877-3900  
Scott Hale 304-237-2756
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Emergency planning for the State of WV from Jan 1, 2011 to Oct 31, 2013; worked as Emergency Services Associate for the State of WV Division of Homeland Security and Emergency Management from Mar 16 ,2010 to Jan 1 2011, positions involved extensive use of computers and databases for collection and analysis of information, entering information into databases and managing that information.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Crystal L Jones on 10/21/14 12:58 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**King, Tanya A**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/22/14  
 12:23 PM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) King, Tanya A		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 208 Penrose Drive, Columbia, South Carolina 29203		
<b>HOME PHONE:</b> (803) 898-3963	<b>ALTERNATE PHONE:</b> (803) 786-1911	<b>EMAIL ADDRESS:</b> Kingtan@scdhhs.gov
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b> To pursue a career that highlights my educational and professional skills and abilities necessary to perform and excel in the workforce.	

**EDUCATION**

<b>DATES:</b> From: 8/2009 To: 3/2011	<b>SCHOOL NAME:</b> Southern Wesleyan University	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> Masters in Science Management		<b>UNITS COMPLETED:</b>
<b>DATES:</b> From: 8/2000 To: 5/2003	<b>SCHOOL NAME:</b> Southern Wesleyan University	
<b>LOCATION:(City, State)</b> Central, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Business Administration		<b>UNITS COMPLETED:</b>
<b>DATES:</b> From: 8/1993 To: 5/2000	<b>SCHOOL NAME:</b> Midlands Technical College	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Associate's
<b>MAJOR:</b> Criminal Justice		<b>UNITS COMPLETED:</b>
<b>DATES:</b> From: 8/1989 To: 6/1993	<b>SCHOOL NAME:</b> W.J. Keenan High School	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> High School Diploma

**WORK EXPERIENCE**

<b>DATES:</b> From: 10/2007 To: Present	<b>EMPLOYER:</b> SC Department of Health & Human Services	<b>POSITION TITLE:</b> Program Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1801 Main Street, Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 898-3963	<b>SUPERVISOR:</b> Lori Risk - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

<b>DUTIES:</b> Supports maintenance of the Medicaid Policy & Procedures Manual and participates in policy development. Logs questions and mail received by the Technical Assistance Unit and Central Institutional Unit. Coordinates the posting of on-line Medicaid Policy & Procedures Manual (MPPM) changes, Medicaid Transmittals, and Medicaid monthly changes. Coordinates monthly conference calls regarding Manual changes. Serves as webmaster for ensuring all of the Bureau's updates to the Internet, intranet and the forms website are made. Coordinates with the Administrative Assistant regarding forms for printing requests. Provide effective customer service as well as perform administrative and other related duties as needed.		
<b>REASON FOR LEAVING:</b> Currently employed		
<b>DATES:</b> From: 1/2006 To: 10/2007	<b>EMPLOYER:</b> SC Department of Health and Human Services	<b>POSITION TITLE:</b> Human Service Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1801 Main Street, Columbia, South Carolina 29202		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 898-2685	<b>SUPERVISOR:</b> Rosetta Evans - Program Coordinator II	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Assist potential and existing beneficiaries concerning Partners for Health coverage. Communicate effectively and efficiently with beneficiaries by face-to-face and telephone contact. Abide by HIPAA regulations.		
<b>REASON FOR LEAVING:</b> Obtained Program Assistant position in the Division of Policy & Planning,		
<b>DATES:</b> From: 4/2005 To: 11/2005	<b>EMPLOYER:</b> Roper Temporary Agency	<b>POSITION TITLE:</b> Clerical Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 220 Executive Center Drive, Columbia, South Carolina 29210		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 798-8500	<b>SUPERVISOR:</b> NA - NA	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> American Red Cross-Keyed and tracked Biomedical equipment using Maximo database. Assisted staff with concerns on an as needed basis, answered telephones, faxed documents as needed.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 10/2003 To: 2/2005	<b>EMPLOYER:</b> SC Dept. of Labor, Licensing & Regulation	<b>POSITION TITLE:</b> Administrative Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 110 Centerview Drive, Columbia, South Carolina 29210		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 896-4300	<b>SUPERVISOR:</b> Veronica Reynolds - Administrative Assistant	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Maintained licensees database and files and CEU's. Compiled records for Physical Therapy Board members. Prepared for, attended and perform duties by law and regulations for the quarterly Board meetings. Provided telephone, walk-in, e-mail and written assistance to Physical Therapist and Physical Therapist Assistants.		
<b>REASON FOR LEAVING:</b> I wanted to pursue a challenging and demanding career that offered potential for growth.		
<b>DATES:</b> From: 1/2001 To: 10/2003	<b>EMPLOYER:</b> SC Dept. of Disabilities and Special Needs	<b>POSITION TITLE:</b> Administrative Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 8301 Farrow Road, Columbia, South Carolina 29203		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 935-7534	<b>SUPERVISOR:</b> Kenzil Summey - Director of Developmental Services	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Updated and maintained weekly/yearly calendars for Developmental Services Administrator and Quality & Development Director. Maintained calendars for weekly/monthly meetings. Maintained EPMS and Leave records for both supervisors.		
<b>REASON FOR LEAVING:</b> Obtained employment at SC Dept. of Labor, Lincensing and Regulation.		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**Typing:40  
Data Entry:0**OTHER SKILLS:**

**LANGUAGE(S):**  
 English -  Speak  Read  Write

**ADDITIONAL INFORMATION**

Nothing Entered For This Section

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Carolyn Roach	<b>POSITION:</b> Program Manager I
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1801 Main Street, Columbia, South Carolina 29202		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 898-3967
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Rosetta Evans	<b>POSITION:</b> Program Coordinator II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1801 Main Street, Columbia, South Carolina 29202		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 898-2066
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Kenzil Summey	<b>POSITION:</b> Supervisor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 141 Silver Lake Circle, Irmo, South Carolina 29212		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 732-2517

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
SC Department of Health and Human Services
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
  
Rosetta Evans  
1801 Main Street  
Columbia SC 29202  
803-898-2066  
  
Carolyn Roach  
1801 Main Street  
Columbia SC 29202  
803-898-3967
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Experience in Excel.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Tanya A King on 10/22/14 12:23 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**King-Bridges, Cynthia L**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/20/14 3:38 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) King-Bridges, Cynthia L		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 911 Loop Road, Bennettsville, South Carolina 29512		
<b>HOME PHONE:</b>	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> majjc5@msn.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b>	
<b>OBJECTIVE:</b> To be given the opportunity to demonstrate the ability to execute advanced developmental decisions. To demonstrate clerical and computer skills. To show enthusiasm for learning and sharing information in an organized manner, in order to aide in the enhancement of the agency's daily operation. To assist in/and be a viable part of the staff and also the quality and improvement of the agency.	

**EDUCATION**

<b>DATES:</b> From: 8/2007 To: 5/2010	<b>SCHOOL NAME:</b> University of South Carolina College of Social Work Graduate School	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>MAJOR:</b> Social Work	<b>UNITS COMPLETED:</b>	
<b>DATES:</b> From: 1/2001 To: 10/2004	<b>SCHOOL NAME:</b> Coker College	
<b>LOCATION:(City, State)</b> Hartsville, South Carolina	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Social Work	<b>UNITS COMPLETED:</b> 143 - Semester	

**WORK EXPERIENCE**

<b>DATES:</b> From: 1/2011 To: Present	<b>EMPLOYER:</b> Word of Life Bible College former extension of Community Bible Institute	<b>POSITION TITLE:</b> Basic English, Writing and Theology Instructor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1300 West Main St., Bennettsville, South Carolina 29512		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 479-7621	<b>SUPERVISOR:</b> Pastor Eddie L. Davis/ Ms. C. Todd/ Ms. M. Payne - Dean, Registrar, Asst. Registrar respectively	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 10	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> I instruct students in Basic Writing and English classes alternately. Currently, I am instructing Innovative Approaches to Counseling. I prepare lesson plans and select the desired textbooks for the course. I provide academic advisement. I attend and assist in graduation ceremonies. I develop the courses and revise instructional materials. I give exams and homework. I initiate open discussions and debates among st the students. I keep a record of attendance, absences, tardiness and grades. I report all grades and other information to the Registrar and/or Dean of the school. I consult with students in and out of the classroom. I participate in and attend all meetings, workshops and fundraisers. All information received and discussed is confidential. I receive a stipend at the end of each school semester.		
<b>REASON FOR LEAVING:</b> n/a		

<b>DATES:</b> From: 12/2009 To: 9/2011	<b>EMPLOYER:</b> CareSouth Carolina/Vantage Point/Area Agency on Aging	<b>POSITION TITLE:</b> Family Caregiver Advocate
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1268 South 4th St./P O Box 999, Hartsville, South Carolina 29550		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 857-0111	<b>SUPERVISOR:</b> Shelia Welch - Program Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Worked with the county focal point agencies and other local entities to maintain partnerships and service options in order to develop a multifaceted support system to respond to the needs of family caregivers. Identified existing services and promote new services to respond to the needs of family caregivers. Promoted community access and involvement. Maintained a budget to assist with the following: care givers, care recipients, grandparents caring for grandchildren, Alzheimer clients, parents caring for adult disabled children, respite care, supplemental services, light home, modification, clothes, and medical equipment. Successfully explained rules, deficiencies, regulations, and answered general questions to providers, the public, and local, State, and agencies. Performed problem-solving and organizational skills to gather information, assess findings, to make a determination of agreement vs. non-agreement. Provided counseling and referral services. Issued and received applications, documents, time sheets, receipts and other information needed to substantiate eligibility. Data analysis and data entry was performed daily. Facilitated and held quarterly meetings with a Caregiver Advisory Council. Daily telephone inquiries was received and performed. Annual reporting and home visits were performed. Was responsible for the agency's Dental Assistance Program. Was in constant direct contact with the contracted dental facilities/ directors ensuring client receive appointments. Was also in close contact with the Agency's business officer, monitoring the allotted funds dispersed to each dental facility on the behalf of the client. Developed and maintained a spreadsheet providing upkeep of all client information, bills paid and appointments that was made on the behalf of each client. Handled all referrals and documents concerning the agency's Dental Program and funds. Certified in Insurance Counseling Assistance and Referrals for Elders, (I-CARE). As an I-CARE, the opportunity to assist clients with determining which Medicare prescription drug plans to use was rewarding.		
<b>REASON FOR LEAVING:</b> At will (Agency established that employees can be relieved of duties at the will of the agency)		
<b>DATES:</b> From: 4/2007 To: 12/2009	<b>EMPLOYER:</b> CareSouthCarolina/Vantage Point/Area Agency on Aging	<b>POSITION TITLE:</b> Regional Information, Referral and Assistance Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 999, Hartsville, South Carolina 29550		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Ms. Shelia Welch - Program Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 375	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Gathered, entered and maintained information from consumers seeking information referral and assistance. Provided information and assistance to consumers using a comprehensive data base and other resources in response to calls walk-ins or written requests.		
<b>REASON FOR LEAVING:</b> Promotion		
<b>DATES:</b> From: 1/2008 To: 12/2008	<b>EMPLOYER:</b> New York Lighthouse Christian College and Seminary Annex	<b>POSITION TITLE:</b> Instructor
<b>ADDRESS:</b> (Street, City, State, Zip Code) Bennettsville, South Carolina 29512		<b>COMPANY URL:</b> cbqualityedu.info
<b>PHONE NUMBER:</b> (843) 479-7621	<b>SUPERVISOR:</b> Ms. Claretta Todd/Ms. Marian Payne - Dean/Assistant Dean respectively	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 10	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Instructed students in Basic Psychology prepared lesson plans and selected the desired textbooks for the course. Provided academic advisement. Attended and assist in graduation ceremonies. Developed the courses and revise instructional materials. Gave exams and homework and they are graded in a timely manner. Initiated open discussions and debates amongst the students. Kept a record of attendance, absences, tardiness and grades. Reported all grades and other information to the Registrar and/or Dean of the school. Consulted with students in and out of the classroom. Participated in and attended all meetings, workshops and fundraisers. All information received and discussed is confidential.		
<b>REASON FOR LEAVING:</b> I had to attend Saturday classes for Graduate courses.		
<b>DATES:</b> From: 7/2006 To: 4/2007	<b>EMPLOYER:</b> CareSouthCarolina/ Vantage Point/Area Agency on Aging	<b>POSITION TITLE:</b> Long Term Care Ombudsman/Ombudsman Volunteer Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1268 South 4th St./ P O Box 999, Hartsville, South Carolina 29550		<b>COMPANY URL:</b> CareSouthCarolina.com
<b>PHONE NUMBER:</b> (843) 383-8632	<b>SUPERVISOR:</b> Ms. Sheila Capps - Program Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 375	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

<b>DUTIES:</b> Investigated reports of abuse, neglect and exploitation and mistreatment (including financial issues) of adults in long term care facilities (nursing homes), including homes, community residential care facilities (assisted Living), and facilities operated by or for The South Carolina Department of Mental Health or South Carolina Department of Disabilities and Special Needs Board. All incidents were written and reported to the proper authorities. During site visits, all food, refrigeration and heating was checked to determine whether the establishment were in regulation with the Department of Health and Environmental Control. Was part of a four day inspection of a site with a Department of Health and Environmental Control survey team, as part of a certification. Case management, site visits and data entry were performed. Telephone inquiries and monthly and quarterly reports were also completed. Occasional work was performed after switching positions for about a year.		
<b>REASON FOR LEAVING:</b> Lateral position change.		
<b>DATES:</b> From: 10/2005 To: 7/2006	<b>EMPLOYER:</b> Marlboro Park Hospital	<b>POSITION TITLE:</b> Social Worker
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1138 Cheraw St., Bennettsville, South Carolina 29512		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 479-2881	<b>SUPERVISOR:</b> Ms. Valarie Quick - Program director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Provided Clinical Social work services for the Senior Mental Health Program. Was responsible for the completion of the Bio-psycho-social assessments. conducted individual, group and family therapy. facilitated and participated on the treatment team, developed and implemented treatment plans addressing social and discharge needs. Insured proper completion of forms for consent to admissions. delivered case management services, crisis intervention, and liaison with referral sources and family members. Maintained social work clinical documentation, and other duties as needed.		
<b>REASON FOR LEAVING:</b> I resigned because the unit I worked in was loosing the Psychiatrist and would soon close.		
<b>DATES:</b> From: 12/2001 To: 1/2003	<b>EMPLOYER:</b> South Carolina Department of Corrections	<b>POSITION TITLE:</b> Program Assistant (Clinical Counselor)
<b>ADDRESS:</b> (Street, City, State, Zip Code) 990 Whiskey Highway, Bishopville, South Carolina 29512		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 896-2500	<b>SUPERVISOR:</b> Mr. Curtis B. Mitchell (803)218-8015 - Program Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Was responsible for completing clinical assessments to determine course of action and to plan treatment and evaluate ongoing progress of assigned program participants. Developed and implemented treatment plans in collaboration with the client. Provided individual and group counseling. Conducted program-specific groups as well as conducting discharge/aftercare planning and referral services. Maintained clinical documentation of all services provided and client contacts made from intake to discharge; ensured that the client confidentiality and rights were maintained. Participated on a multi-disciplinary treatment team for the purpose of program evaluation/development, case management, and consultation. Completed assigned monthly reports and other clerical duties.		
<b>REASON FOR LEAVING:</b> Resigned, I also decided to attend school full time.		
<b>DATES:</b> From: 1/1998 To: 12/2001	<b>EMPLOYER:</b> South Carolina Department of Corrections	<b>POSITION TITLE:</b> Correctional Officer
<b>ADDRESS:</b> (Street, City, State, Zip Code) Bennettsville, South Carolina 29512		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 479-4181	<b>SUPERVISOR:</b> Anthony Whittington/Jerome Ocean - Lieutenant	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Provided security custody and control of the Institutions male population. Verification of inmate counts, key and equipment control. maintained log book entries. Trained new hires. Escorted inmates to and from recreation facilities, showers, cafeteria, visitations and facilities outside the institution when necessary. Reports were written and Some clerical duties as needed.		
<b>REASON FOR LEAVING:</b> Change of position.		
<b>DATES:</b> From: 5/1996 To: 5/1997	<b>EMPLOYER:</b> South Carolina Department of Social Services	<b>POSITION TITLE:</b> Self Sufficiency Case Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) Dillon, South Carolina 29536		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 774-8284	<b>SUPERVISOR:</b> Chandra L. Collington - Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Performed economic intake and assessment for clients under the provision of Public Assistance, Medicaid, and food Stamps. Case management and daily interviewing of clients performed. Completed all filing and clerical duties. Made and received telephone inquiries. Data Entry, counseled and assisted clients with obtaining employment, job training and educational needs. Home visits were performed.		

<b>REASON FOR LEAVING:</b> At will (Agency established that employees can be relieved of duties at the will of the agency)		
<b>DATES:</b> From: 6/1985 To: 5/1994	<b>EMPLOYER:</b> Human Resources Administration/Department of Social Services	<b>POSITION TITLE:</b> Eligibility Specialist III (There weren't any level 1&2's)
<b>ADDRESS:</b> (Street, City, State, Zip Code) New York City, New York 10038		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Mrs. Janet Stephens - Assistant Office Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 35	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Performed economic intake and assessment for clients under the provision of Public Assistance, Medicaid, and food Stamps. Case management and daily interviewing of clients performed. Completed all filing and clerical duties. Made and received telephone inquiries. Data Entry, counseled and assisted clients with obtaining employment, job training and educational needs.		
<b>REASON FOR LEAVING:</b> Relocation		

CERTIFICATES AND LICENSES	
<b>TYPE:</b> 30 hours of training in Gerontology(laws.long term care etc).	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Lt. Governor's Office of South Carolina

Skills	
<b>OFFICE SKILLS:</b> Typing:35 Data Entry:30	
<b>OTHER SKILLS:</b> Computers, clerical, filing, counseling, adding ma - Expert - 25 years and 0 months	
<b>LANGUAGE(S):</b> Spanish - <input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write	

ADDITIONAL INFORMATION	
<b>Clinical Experience</b> I have worked directly with the long term care medicaid site worker, in South Carolina. I have over 25 years experience working with adults.	
<b>Additional Information</b> I worked as a paralegal for a temporary agency in a prominent law firm for approximately six months in 1984, in NYC, NY.	
During the following dates, I was looking for work. 5/1997-1/1998, 1/2005-9/2005. During 2/2003-12/2004 I attended college full time. Between 5/1994-5/1996 relocated to South Carolina and performed temporary employment such as Substitute Teaching, working with Disabilities and Special needs Board as a Day Program Driver and Substitute Worker. I volunteered and worked within the Department of Social Services discussing the individual health insurances three times a month for approximately a year in 2008 while employed with Care South Carolina/Vantage Point. I have been unemployed (f/t) since September of 2011. I currently volunteer teaching part time receiving a stipend at the end of each semester. I am and have been actively searching for employment.	
<b>Honors &amp; Awards</b> I received a " Can Do" award as a Correctional Officer for excellence in team work. I also received verbal and written commendations for great team work at Care South Carolina. I have been a member of the Phi Alpha Social Work Honor Society since 2009	

REFERENCES		
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Valarie Quick	<b>POSITION:</b> Director
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1138 Cheraw St., Bennettsville, South Carolina 29512		
<b>EMAIL ADDRESS:</b> Valarie_Quick@chs.net		<b>PHONE NUMBER:</b> (843) 479-2881
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Eddie Davis	<b>POSITION:</b> Pastor/Dean/Educator (Personal reference as well)
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1309 W Main St, Bennettsville, South Carolina 29512		
<b>EMAIL ADDRESS:</b> pastoreddiedavis@yahoo.com		<b>PHONE NUMBER:</b> (843) 245-4276
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Claretta Todd	<b>POSITION:</b> Registrar, Distance Education, WIA program

<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b> ctodd8125@roadrunner.com		<b>PHONE NUMBER:</b> (843) 861-0122
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Dr. Iva D. Hodge	<b>POSITION:</b> Retired Teacher and Pastor, Founder of Bible College
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b> whodge2244@att.net		<b>PHONE NUMBER:</b> (843) 383-6415
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Stephen Turner	<b>POSITION:</b> Director
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (843) 665-1942

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
No
- 4. If so, in which agency do you currently work?**
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
Yes
- 8. If yes, please explain.**  
At will (Agencies established that employees can be relieved of their duties at the will of the agency). I was never forced to resign.
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Claretta Todd 1300 West Main St. Bennettsville, SC 29512 843 861-0122  
Iva D. Hodge 721 South 6th St. Hartsville., SC 29550 843 383-6415
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I have worked as a Family Caregiver Advocate, Information Referral & Assistance Specialist and I have performed work as a Long Term Care Ombudsman.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Cynthia L King-Bridges on 10/20/14 3:38 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Lontrato, John**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/19/14 9:40 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Lontrato, John		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 7835 Long Shadow Lane, North Charleston, South Carolina 29406		
<b>HOME PHONE:</b> (518) 366-4423	<b>ALTERNATE PHONE:</b> (518) 423-3566	<b>EMAIL ADDRESS:</b> ajlontrato@gmail.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$20.00 per hour; \$40,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends	
<b>OBJECTIVE:</b> Looking for optimal career in State Government	

**EDUCATION**

<b>DATES:</b> From: 1/2000 To: 5/2002	<b>SCHOOL NAME:</b> Marist College	<b>DEGREE RECEIVED:</b> No Degree
<b>LOCATION:(City, State)</b> Poughkeepsie, New York	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>UNITS COMPLETED:</b> 21 - Semester
<b>MAJOR:</b> Public Administration		
<b>DATES:</b> From: 1/1992 To: 6/1994	<b>SCHOOL NAME:</b> The University of the State of New York (Regents College)	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Albany, New York	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 132 - Semester
<b>MAJOR:</b> Business Management/Sociology		
<b>DATES:</b> From: 11/1978 To: 8/1988	<b>SCHOOL NAME:</b> Community College of the Air Force	<b>DEGREE RECEIVED:</b> Associate's
<b>LOCATION:(City, State)</b> Maxwell, Alabama	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 64 - Semester
<b>MAJOR:</b> Financial Management/Contract Management		

**WORK EXPERIENCE**

<b>DATES:</b> From: 10/2011 To: 8/2013	<b>EMPLOYER:</b> SCDMV	<b>POSITION TITLE:</b> Program Manager I
<b>ADDRESS:</b> (Street, City, State, Zip Code) 10311 Wilson Blvd, Blythewood, South Carolina 29205		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 896-3843	<b>SUPERVISOR:</b> Melinda Woodhurst - Director of Administration	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$4,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 25

**DUTIES:**

- Provides effective management to three (3) interdepartmental Inventory Management sections by motivating, coaching and mentoring section supervisors and 25 staff members; while providing the South Carolina Department of Motor Vehicles Headquarters and 67 field offices with high quality logistical support services.
- Directs operations of warehouse facilities including inventory management, shipping and receiving of supplies and equipment, surplus property processing, re-distribution, recycling and disposal, records management and retention
- Directs operations of the Imaging department consisting of the examination and processing of all paper documents pertaining to the SCDMV. Ensuring the accurate imaging and naming convention of all documents, maintenance and indexing of all files and confirmation of all quality controls
- Directs operations of the Mailroom to ensure efficient pickup and delivery of all parcels to include; special delivery (FedEx, UPS, Other Certified) interoffice and US mail, statewide (IMS)inter-agency delivery and courier operations

**REASON FOR LEAVING:**

<b>DATES:</b> From: 2/2008 To: 3/2011	<b>EMPLOYER:</b> SUNY Research Foundation/NYSOFA	<b>POSITION TITLE:</b> Fiscal, Grants and Contracts Administrator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2 ESP, Albany, New York 12223		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (518) 474-5060	<b>SUPERVISOR:</b> Arthur Clark - Fiscal Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$4,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

- Manage over 20 million in federal Grants-In-Aid agreements to 59 County agencies for NYS Office for the Aging
- Administer financial, budget, cost reports and fiscal projections for NY Connects Long Term Health Care Program
- Train, Consult and Counsel local staff and county officials on all grant and fiscal matters related to NY Connects

**REASON FOR LEAVING:**

Project funding discontinued

<b>DATES:</b> From: 2/2007 To: 2/2008	<b>EMPLOYER:</b> Partners Realty	<b>POSITION TITLE:</b> Agent
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Brian Macken - Broker	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 50	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

NYS Licensed Real Estate Agent

Listed property for sale, lease or purchase in the NYS in accordance with Multiple Listing Service (MLS) policies

Presented, marketed and conducted real estate transactions in accordance with National Realtor's Association code

**REASON FOR LEAVING:**

Market Conditions

<b>DATES:</b> From: 10/1988 To: 5/2006	<b>EMPLOYER:</b> US Property and Fiscal Office	<b>POSITION TITLE:</b> Resource Manager/Finance Officer
<b>ADDRESS:</b> (Street, City, State, Zip Code) 330 Old Niskayuna Rd., Latham, New York 12110		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (518) 786-4510	<b>SUPERVISOR:</b> COL Russel Catalano - Deputy USPFO for New York	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 50	<b>SALARY:</b> \$7,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 10

**DUTIES:**

1997/2006 CHIEF &amp; INTERNAL AUDITOR

- Developed and Executed the statewide NYS Division of Military and Naval Affairs Annual Audit Program
- Administered the Agency's Management Control Program, Reviewed and Assessed Training Requirements
- Examined activities to ensure accurate and adequate in place Management Control measures
- Identified Internal Control Weaknesses and recommended corrective actions to operations management
- Evaluated Risk in an effort to mitigate Fraud, Waste and Abuse of government resources
- Directed and Supervised a staff of five highly trained professional federal government auditors

1995/97 NYNGCD COMPTROLLER

- Provided Supervision, Guidance and Leadership, during active duty tour, pertaining to all NYNGCD fiscal affairs

- Accounted for all federal, state and grant funding in support of the Joint Forces NYNGCD statewide mission
- Ensured contracts, agreements and fiscal expenditures were in compliance with government auditing standards
- Developed annual NYNGCD budget requirements for submission to the National Guard Bureau in Washington DC
- Trained, Supervised and Supported a staff of nine professional military budget and finance specialists

## 1991/95 SUPERVISORY STAFF ACCOUNTANT

- Responsible for the overall quality assurance of the USPFO Comptroller Division
- Served as liaison for comptroller agency regarding all accounting and finance matters
- Managed and monitored the government travel card program for the entire agency
- Trained, Supervised and Supported a team of eight professional federal government accountants

## 1988/91 CONTRACT ADMINISTRATOR

- Advertised, negotiated, awarded and administered a vast assortment of federal procurement contracts
- Managed contracts for supplies, general services, major and minor construction and A/E design services
- Administered all contracts in strict compliance with local regulations and the Federal Acquisition Regulation (FAR)

**REASON FOR LEAVING:**

Early retirement incentive buy out

<b>DATES:</b> From: 11/1978 To: 10/1987	<b>EMPLOYER:</b> US Air Force	<b>POSITION TITLE:</b> Financial Management Specialist/ Law Enforcement Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) DMAFB, Tucson, Arizona 85707		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> LtCol Prout - Comptroller	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 50	<b>SALARY:</b> \$3,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 2

**DUTIES:**

## 1984/87 BUDGET ANALYST

- Prepared and administered appropriated military funding requests in support of the base annual Operating Budget
- Developed dollar estimates, narrative justifications and expense projections to support federal funding approval
- Maintained financial records, prepared and executed budget certificates and spending plans for multiple units

## 1981/84 ACCOUNTING TECHNICIAN

- Maintained and updated general ledger accounting records for local military installation
- Prepared and managed the accounts payables for the base commissary, hospital and retail supply facility
- Prepared billing documents for reimbursement for services and/or use of military equipment by other agencies

## 1978/81 LAW ENFORCEMENT/SECURITY OFFICER

Responsible for physical, operational and communications security related to the tactical mission of the airbase.

**REASON FOR LEAVING:**

Honorable Discharge

**CERTIFICATES AND LICENSES**

<b>TYPE:</b> Certified Government Financial Manager, CGFM	
<b>LICENSE NUMBER:</b> 8180	<b>ISSUING AGENCY:</b> Association of Government Accountants

**Skills**

<b>OFFICE SKILLS:</b> Typing:40 Data Entry:40
<b>OTHER SKILLS:</b>
<b>LANGUAGE(S):</b>

**ADDITIONAL INFORMATION**

**Military Service**

US Air Force, Active Duty, 9 years, NCO  
Financial Management, Security Police

New York Army National Guard, 15 years, OFFICER  
Finance, Procurement, Logistics and Administration

NYNG Counterdrug Unit Administrative Officer, S1

9/11 Emergency Operations Logistics Officer, J4

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> William Book	<b>POSITION:</b> Auditor, USPFO-NY
<b>ADDRESS:</b> (Street, City, State, Zip Code) 330 Old Niskayuna Rd, Latham, New York 12306		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (518) 786-0384
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Trish Blake	<b>POSITION:</b> Director of Finance
<b>ADDRESS:</b> (Street, City, State, Zip Code) 10311 Wilson Blvd, Blythewood, South Carolina 29016		
<b>EMAIL ADDRESS:</b> Trish.Blake@SCDMV.NET		<b>PHONE NUMBER:</b> (803) 896-3843

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Trish Blake, 10311 Wilson Blvd, Blythewood, SC, 896-3844  
Cathy Lucas, 10311 Wilson Blvd, Blythewood, SC, 896-7858  
Patrick Falcone, 10311 Wilson Blvd, Blythewood, SC, 896- 9722
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Worked 3 years for NYS Office for Aging, NY Connects Long Term Health Care Reform Project
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

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I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by John Lontrato on 10/19/14 9:40 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Middleton, Helen P.**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/28/14 4:27 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Middleton, Helen P.		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1000 Windsor Shores Drive Apt. 13-H, Columbia, South Carolina 29223		
<b>HOME PHONE:</b> (678) 438-9731	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> pattypattypm@gmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$40,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b> To secure a position utilizing my talents, life and work experiences in a way that will benefit both employer and self.	

**EDUCATION**

<b>DATES:</b> From: 8/1976 To: 7/1980	<b>SCHOOL NAME:</b> Benedict College
<b>LOCATION:</b> (City, State) Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>MAJOR:</b> Journalism	<b>DEGREE RECEIVED:</b> Bachelor's
	<b>UNITS COMPLETED:</b> 125 - Semester

**WORK EXPERIENCE**

<b>DATES:</b> From: 4/2014 To: Present	<b>EMPLOYER:</b> Richland County Recreation Commission	<b>POSITION TITLE:</b> Site Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) 7473 Parklane Road, Columbia, South Carolina 29223		<b>COMPANY URL:</b> rcc.state.sc.us
<b>PHONE NUMBER:</b> (803) 741-7272	<b>SUPERVISOR:</b> Demetria Goodwin - Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,240.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 4
<b>DUTIES:</b> Manage the Adult Activity Center, enhancing the lives of senior patrons through exercise programs, classes, cultural events and trips. Interview and hire class instructors, write proposals for programs, monitor the success of those programs, plan and chaperone trips, and interact with patrons to make sure they are pleased with our services. Supervise a staff of four.		
<b>REASON FOR LEAVING:</b> Presently employed.		
<b>DATES:</b> From: 8/2011 To: Present	<b>EMPLOYER:</b> Colleton County High School	<b>POSITION TITLE:</b> Shadow
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1379 Mighty Cougar Drive, Walterboro, South Carolina 29488		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 538-2904	<b>SUPERVISOR:</b> Mrs. Tumor - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Responsible for accompanying a special needs student to each class to ensure he stays focused and understands classroom and homework instruction, monitors recreational activities.		
<b>REASON FOR LEAVING:</b> Interested in relocating.		

<b>DATES:</b> From: 6/2011 To: 5/2014	<b>EMPLOYER:</b> Department of Juvenile Justice	<b>POSITION TITLE:</b> Employability Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 241, Walterboro, South Carolina 29488		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 549-1509	<b>SUPERVISOR:</b> Mr. Wayne Bennett - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Serve as coordinator and instructor of training program that identified at-risk students for participation in a program that found them employment, as well as taught them the skills that prepared them to enter the world of work.		
<b>REASON FOR LEAVING:</b> Moved to Columbia, SC.		
<b>DATES:</b> From: 8/2011 To: 8/2012	<b>EMPLOYER:</b> Black Street Early Childhood Center	<b>POSITION TITLE:</b> Paraprofessional
<b>ADDRESS:</b> (Street, City, State, Zip Code) 256 Smith Street, Walterboro, South Carolina 29488		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 782-4516	<b>SUPERVISOR:</b> Susan Hickman - Teacher	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Served as an assistant to lead teacher in helping with classroom instruction, food service and recreational activities.		
<b>REASON FOR LEAVING:</b> Much more interested and convenient to work with high school students in my program with DJJ.		
<b>DATES:</b> From: 8/2010 To: 8/2011	<b>EMPLOYER:</b> Forest Circle Middle School	<b>POSITION TITLE:</b> Shadow
<b>ADDRESS:</b> (Street, City, State, Zip Code) 500 Forest Circle, Walterboro, South Carolina 29488		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 549-2361	<b>SUPERVISOR:</b> Mrs. Gupta - Teacher	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Served as shadow for special needs student and provided assistance that ensured he stayed focused and understood classroom and homework instruction, monitored his recreational activities on and away from campus.		
<b>REASON FOR LEAVING:</b> Was transferred to new position.		
<b>DATES:</b> From: 11/2008 To: 8/2010	<b>EMPLOYER:</b> Forest Circle Middle School	<b>POSITION TITLE:</b> Discipline Clerk
<b>ADDRESS:</b> (Street, City, State, Zip Code) 500 Forest Circle, Walterboro, South Carolina 29488		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 549-2361	<b>SUPERVISOR:</b> Scott Matthews - Principal	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,050.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Entered data from student records concerning behavioral issues, gathered information from these records for district office personnel in preparation for discipline hearings, mailed copies of student referrals to parents.		
<b>REASON FOR LEAVING:</b> Moved to another position because of budget cuts.		
<b>DATES:</b> From: 3/2008 To: 11/2008	<b>EMPLOYER:</b> New Life United Methodist Church	<b>POSITION TITLE:</b> Secretary (part-time)
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 1381, Walterboro, South Carolina 29488		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (843) 549-1254	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 30	<b>SALARY:</b> \$800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Greeted guests, disseminated information to pastors and their church constituents through letters, emails and brochures, entered data for recording tithes and offerings, developed prepared and wrote information for the church bulletin and programs for church events.		
<b>REASON FOR LEAVING:</b> Secured full-time position.		
<b>DATES:</b> From: 12/2006 To: 4/2007	<b>EMPLOYER:</b> Wilson and Sons Antiques	<b>POSITION TITLE:</b> Sales Consultant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3954 Peachtree Road, Atlanta, Georgia 30319		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (678) 891-5580	<b>SUPERVISOR:</b> Mr. Wilson - Owner	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Recruited to help establish antiques gallery specializing in antique furniture, estate jewelry, art and books. Consistently provided excellent customer service and maintained lead in sales.		
<b>REASON FOR LEAVING:</b> Employer passed away.		
<b>DATES:</b> From: 10/2003 To: 12/2006	<b>EMPLOYER:</b> Bloomingtondale's	<b>POSITION TITLE:</b> Sales Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3393 Peachtree Road, Atlanta, Georgia 30326		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (404) 495-2800	<b>SUPERVISOR:</b> Tara Shepard - Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Utilized several years experience to open fine jewelry department in Atlanta's new flagship department store, provided outstanding customer service and sales assistance to clients.		
<b>REASON FOR LEAVING:</b> For position of more interest.		
<b>DATES:</b> From: 8/1997 To: 10/2002	<b>EMPLOYER:</b> Saks Fifth Avenue	<b>POSITION TITLE:</b> Sales Consultant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3500 Peachtree Road, Atlanta, Georgia 30326		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (404) 261-7234	<b>SUPERVISOR:</b> Keith Traxler - Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Consistently provided great customer service in sales to clients.		
<b>REASON FOR LEAVING:</b> Position of more interest.		
<b>DATES:</b> From: 4/1996 To: 10/1998	<b>EMPLOYER:</b> The Museum Company	<b>POSITION TITLE:</b> Assistant Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Karen Black	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$900.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 5
<b>DUTIES:</b> Handled daily store operations: Scheduled and trained staff of six, received and ticketed merchandise, maintained store files, created displays, prepared daily and weekly sales reports.		
<b>REASON FOR LEAVING:</b> Increase in salary		
<b>DATES:</b> From: 4/1995 To: 4/1996	<b>EMPLOYER:</b> The High Museum of Art Shop	<b>POSITION TITLE:</b> Shift Leader
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1280 Peachtree Road, Atlanta, Georgia 30326		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (404) 733-4400	<b>SUPERVISOR:</b> Mrs. Mahaya - Operations Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$600.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Created window and store displays, prepared daily and weekly sales reports, and assisted customers with merchandise.		
<b>REASON FOR LEAVING:</b> Increase in salary		
<b>DATES:</b> From: 5/1994 To: 4/1995	<b>EMPLOYER:</b> Columbia Museum of Art	<b>POSITION TITLE:</b> Manager/Buyer
<b>ADDRESS:</b> (Street, City, State, Zip Code) Main Street, Columbia, South Carolina 20201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Managed all phases of operations: advertising, merchandising, sales, staff management, training, inventory and control, and daily and weekly sales reports.		
<b>REASON FOR LEAVING:</b> Relocated out of state.		
<b>DATES:</b> From: 8/1991 To: 5/1994	<b>EMPLOYER:</b> Historic Columbia Foundation	<b>POSITION TITLE:</b> House Curator/Education Assistant

<b>ADDRESS:</b> (Street, City, State, Zip Code) 1601 Richland Street, Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 252-7742	<b>SUPERVISOR:</b> Glenda Panter - Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,200.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Created and directed activities for two historic homes: developed education programs for the community, scheduled and directed tours for area schools as well as for schools and other organizations from nearby counties, coordinated annual Jubilee Festival, co-wrote proposal for grant to fund summer camp, developed summer camps and workshops, and implemented a docent program.		
<b>REASON FOR LEAVING:</b> Laid off, non-profit organization-no funds		
<b>DATES:</b> From: 5/1989 To: 8/1991	<b>EMPLOYER:</b> Benedict College	<b>POSITION TITLE:</b> Secretary/College Representative
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1600 Harden and Blanding Streets, Columbia, South Carolina 29204		<b>COMPANY URL:</b> www.benedict.edu
<b>PHONE NUMBER:</b> (803) 253-5000	<b>SUPERVISOR:</b> Reverend Williams - Director of Church Relations	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Disseminated correspondence to church constituents, planned church association conferences and meetings with statewide churches and assisted with student recruitment through area churches.		
<b>REASON FOR LEAVING:</b> Found position of more interest.		
<b>DATES:</b> From: 8/1989 To: 8/1990	<b>EMPLOYER:</b> Baptist E & M Convention	<b>POSITION TITLE:</b> Editor, "Baptist Informer"
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1531 Hampton Street, Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 10	<b>SALARY:</b> \$300.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Served as editor of quarterly newspaper that represented all of the Black Baptist churches in the state of South Carolina. assisted with layout and gathered information from church administrators for publication.		
<b>REASON FOR LEAVING:</b> Temporary		
<b>DATES:</b> From: 8/1988 To: 5/1989	<b>EMPLOYER:</b> Benedict College	<b>POSITION TITLE:</b> Health Educator, Columbia Quit Smoking Project
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1600 Harden and Blanding Streets, Columbia, South Carolina 29204		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 253-5000	<b>SUPERVISOR:</b> Ms.Williams - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Served as editor of newsletter, Healthy Families Don't Smoke, conducted Quit Smoking workshops, distributed brochures to neighborhood groups on the dangers of smoking and the health risks of secondhand smoke.		
<b>REASON FOR LEAVING:</b> Temporary grant		
<b>DATES:</b> From: 5/1987 To: 5/1988	<b>EMPLOYER:</b> Lab Technician	<b>POSITION TITLE:</b> Lab Technician
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1600 Harden and Blanding Streets, Columbia, South Carolina 29204		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 253-5000	<b>SUPERVISOR:</b> Ms. Green - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$875.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Provided assistance to students in the composition of research papers, developed practice materials on writing, scheduled student appointments.		
<b>REASON FOR LEAVING:</b> Increase in salary.		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills**

**OFFICE SKILLS:**

Typing:40  
Data Entry:0

**OTHER SKILLS:**

powerpoint - Skilled - 2 years and 0 months

**LANGUAGE(S):**

Spanish -  Speak  Read  Write

**ADDITIONAL INFORMATION**

Nothing Entered For This Section

**REFERENCES****REFERENCE TYPE:**

Personal

**NAME:**

Herbert Dula

**POSITION:**

Retired, IBM

**ADDRESS:** (Street, City, State, Zip Code)

13712 Riding Hills Avenue, Charlotte, North Carolina 28213

**EMAIL ADDRESS:****PHONE NUMBER:**

(770) 312-4968

**REFERENCE TYPE:**

Professional

**NAME:**

Wayne Bennett

**POSITION:**

Director

**ADDRESS:** (Street, City, State, Zip Code)

Department of Juvenile Justice, P.O. Box 214, Walterboro, South Carolina 29488

**EMAIL ADDRESS:****PHONE NUMBER:**

(843) 549-1509

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
Richland County Recreation Commission
- 5. Do you have any relatives employed with the State of South Carolina?**  
Yes
- 6. If yes, please provide below the name(s), relationship, and agency.**  
Darlynn Garrett-sister-Colleton County School District  
  
Patrick Thomas-Nephew-Colleton County School District (2014 Teacher of the Year for Colleton County High and for the Colleton County School District).
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Deborah McKenzie  
Director of Grant Accounting  
Benedict College  
Columbia, SC 20204  
(803) 705-4589 w  
  
Mr. Wayne Benett  
Director  
Colleton County Department of Juvenile Justice  
P.O. Box 204  
Walterboro, SC 29488  
(843) 549-1509
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I am currently responsible for the input of patron information and receiving payments for classes, trips, and events.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Helen P. Middleton on 10/28/14 4:27 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Mills, Stephanie D**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/21/14  
 12:30 PM  
**For Official Use Only:**  
**QUAL:** \_\_\_\_\_  
**DNQ:** \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Mills, Stephanie D		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 400 N. Emerald Rd. Apt. C1, Greenwood, South Carolina 29646		
<b>HOME PHONE:</b> 864-993-5704	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> siennas9375@gmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, On Call (as needed)	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: To:	<b>SCHOOL NAME:</b> Clemson University	
<b>LOCATION:</b> (City, State) Clemson, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> Education: community agency counseling		<b>UNITS COMPLETED:</b>

**WORK EXPERIENCE**

<b>DATES:</b> From: 7/2007 To: 6/2014	<b>EMPLOYER:</b> Greenwood DSS/IFCCS	<b>POSITION TITLE:</b> Service Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1118 Phoenix Ave., Greenwood, South Carolina 29646		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 864-993-5704	<b>SUPERVISOR:</b> Jacqueline Williams - Program supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> provided case management to children and families in Intensive foster care program; foster care review board, court presentations, on call services, etc.		
<b>REASON FOR LEAVING:</b> personal. will discuss in person		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills**

Nothing Entered For This Section

**ADDITIONAL INFORMATION**

Nothing Entered For This Section

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Jacqueline Williams	<b>POSITION:</b> program supervisor
--	-------------------------------------	--

<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 3061 , Greenwood, South Carolina 29648	
<b>EMAIL ADDRESS:</b> jacqueline.williams@dss.sc.gov	<b>PHONE NUMBER:</b> 864-388-0807

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
Yes
8. **If yes, please explain.**  
personal. will answer in person
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Jaqueline Williams P.O. Box3061 Greenwood, SC 29648 864-388-0807 ext. 153  
Deborah Martin P.O. Box 3061 Greenwood, SC 29648 864-388-0807 ext. 150
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
While working for the local DSS/IFCCS office, I often had to access different data bases and perform data entry to manage case files.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Stephanie D Mills on 10/21/14 12:30 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Moore, Roger E**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/16/14 8:02 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Moore, Roger E		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 831, Taylors, South Carolina 29687		
<b>HOME PHONE:</b> 864-414-5017	<b>ALTERNATE PHONE:</b> 864-414-3617	<b>EMAIL ADDRESS:</b> rogeremoore@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$55,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular, Temporary	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b> To offer my skills and services to better my country and the lives of citizens in need. To always work at a job I enjoy. To work with professionals from whom I can learn much. To repair the world.	

**EDUCATION**

<b>DATES:</b> From: 1/1982 To: 5/2003	<b>SCHOOL NAME:</b> University of Louisville	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Louisville, Kentucky	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Psychology		
<b>DATES:</b> From: 8/1973 To: 8/1976	<b>SCHOOL NAME:</b> University of Kentucky	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Lexington, Kentucky	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Psychology		

**WORK EXPERIENCE**

<b>DATES:</b> From: 3/2013 To: 7/2014	<b>EMPLOYER:</b> Aide and Healthcare Staffing Solutions LLC	<b>POSITION TITLE:</b> Psychological Technician
<b>ADDRESS:</b> (Street, City, State, Zip Code) 9331 Easy Oak Creek, Converse, Texas 78109		<b>COMPANY URL:</b> <a href="http://www.aideandhealth.com/">http://www.aideandhealth.com/</a>
<b>PHONE NUMBER:</b> 504-377-2139	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

- \* Compiled and analyzed over 2,000 USAREC Serious Incident Reports covering FY 2008-2013, using SPSS, Microsoft Excel, and PowerPoint in a procedure I devised to replace less effective data collection and analysis, and reported results to OCP staff for informational and training purposes, for 2011-2013.
- \* Reported quarterly statistical analyses of USAREC Serious Incident Reports to the Command Psychologist, for later review by the Commanding General, USAREC, for 2011-2013.
- \* Analyzed and reported in depth to OCP on known and suspected suicide deaths within USAREC in 2001-2013, for 2012-2013.
- \* Conducted interviews with and examined AHLTA medical records of incoming students (U.S. Army NCOs and officers) at the USAREC Recruiting and Retention School, Fort Jackson SC, then reported results and suggested dispositions to OCP-F psychologists for 2012-2014.
- \* Examined Recruiters' AHLTA medical records in special investigations, then reported results to OCP psychologists, for 2011-2014.
- \* Contributed to the implementation of the Department of the Army's ALARACT 147/2013, HQDA EXORD 161-13 Sexual Harassment/Assault Response and Prevention (SHARP) Program Army Stand-Down, working at Fort Knox KY and Fort Jackson SC, for summer 2013.

\* Worked at the Office of the Command Psychologist-Forward, Recruiting and Retention School, USAREC, Fort Jackson SC.

**REASON FOR LEAVING:**

My job with the Office of the Command Psychologist, in support of the U.S. Army Recruiting School at Fort Jackson SC, has been transferred to Fort Knox KY. I was unable to make the move to KY.

<b>DATES:</b> From: 11/2010 To: 3/2013	<b>EMPLOYER:</b> Zeitgeist Expressions Inc.	<b>POSITION TITLE:</b> Psychologist Technician
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1222 North Main, Suite 740 , San Antonio, Texas 78212		<b>COMPANY URL:</b> <a href="http://www.zeitgeistexpressions.com/">http://www.zeitgeistexpressions.com/</a>
<b>PHONE NUMBER:</b> 210-271-7411	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

\* Compiled and analyzed over 2,000 USAREC Serious Incident Reports covering FY 2008-2013, using SPSS, Microsoft Excel, and PowerPoint in a procedure I devised to replace less effective data collection and analysis, and reported results to OCP staff for informational and training purposes, for 2011-2013.

\* Reported quarterly statistical analyses of USAREC Serious Incident Reports to the Command Psychologist, for later review by the Commanding General, USAREC, for 2011-2013.

\* Analyzed and reported in depth to OCP on known and suspected suicide deaths within USAREC in 2001-2013, for 2012-2013.

\* Examined Recruiters' medical records in special investigations, then reported results to OCP psychologists.

\* Worked for Office of the Command Psychologist, USAREC, Fort Knox KY and for OCP-Forward, Recruiting and Retention School, Fort Jackson SC.

\* Interviewed and counseled Soldiers at a Fort Knox mental health facility, for November-December 2010.

**REASON FOR LEAVING:**

Zeitgeist lost its government contract, and so transferred all of its contract employees to Aide and Healthcare Staffing Solutions in March 2013.

<b>DATES:</b> From: 5/2005 To: 3/2010	<b>EMPLOYER:</b> Seven Counties Services	<b>POSITION TITLE:</b> Mental Health Counselor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 101 West Muhammad Ali Boulevard, Louisville, Kentucky 40202		<b>COMPANY URL:</b> <a href="http://www.sevendcounties.org/">http://www.sevendcounties.org/</a>
<b>PHONE NUMBER:</b> 502-589-8600	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

\* Assisted men in a special psychiatric unit who had significant legal issues (e.g., capital murder charges) and behavioral problems (e.g., interpersonal violence, sexually inappropriate or aggressive behavior, repeated attempts at escape).

\* Conducted scheduling, recreational, and educational groups for unit patients on numerous topics. Patients' favorite groups were those on historical figures with mental illnesses, who nonetheless contributed to the world's cultural and scientific wealth.

\* Transported patients to medical appointments or new treatment facilities.

\* Assisted nursing staff in emergencies, ensured security of unit, and maintained medical records.

\* Contributed to weekly staff meetings on the mental and physical health of unit patients, working to improve communication between the treatment team and the unit floor staff.

\* Assisted therapy groups for anger management.

**REASON FOR LEAVING:**

Illness (now resolved). There was a gap in my employment record from March 2010 to November 2010, when I was able to gain employment again. I spent that time job hunting.

<b>DATES:</b> From: 9/2003 To: 4/2005	<b>EMPLOYER:</b> Jefferson County Public Schools	<b>POSITION TITLE:</b> Substitute Teacher
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3332 Newburg Road, Louisville, Kentucky 40218		<b>COMPANY URL:</b> <a href="http://www.jefferson.k12.ky.us/">http://www.jefferson.k12.ky.us/</a>
<b>PHONE NUMBER:</b> 502-485-3011	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 16	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

\* Teach and manage students K-8 at public schools in every sort of class. The figure of 16 working hours per week is approximate, as working hours varied between 0 and 32 hours per week, if work was available.

**REASON FOR LEAVING:**

Gained full-time job with Seven Counties Services.

<b>DATES:</b> From: 8/2002 To: 5/2003	<b>EMPLOYER:</b> University of Louisville	<b>POSITION TITLE:</b> Graduate teaching assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Louisville, Kentucky 40292		<b>COMPANY URL:</b> <a href="http://louisville.edu/">http://louisville.edu/</a>
<b>PHONE NUMBER:</b> 800-334-8635	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 8	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

\* Assist introductory psychology teachers with student testing.

\* Maintained website on weekly basis for students' grades and projects.

**REASON FOR LEAVING:**

Graduated from U of L with a Master's degree in Psychology. There was a gap in employment from May to September 2003 while I searched for a job in Louisville KY.

<b>DATES:</b> From: 1/2001 To: 8/2002	<b>EMPLOYER:</b> Self-employed	<b>POSITION TITLE:</b> Writer
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1407 Whisperwood Trace, Louisville, Kentucky 40245		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 864-414-5017	<b>SUPERVISOR:</b> Self	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> * Writing novels (finished 2.5).		
<b>REASON FOR LEAVING:</b> I spent this time writing novels, but I was unable to sell any stories and stopped writing for the time being. I entered graduate school as a result.		
<b>DATES:</b> From: 5/1983 To: 12/2000	<b>EMPLOYER:</b> Hasbro, Inc.	<b>POSITION TITLE:</b> Editor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1 Hasbro Place, Providence, Rhode Island 02903		<b>COMPANY URL:</b> <a href="http://www.hasbro.com/">http://www.hasbro.com/</a>
<b>PHONE NUMBER:</b> 800-844-3733	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 5
<b>DUTIES:</b> Magazine editor and periodicals editor-in-chief; article, editorial, short-story, novella, and novel writer (professionally published), product group leader, creative director TSR, Inc. (May 1983 to May 1997) Wizards of the Coast, Inc. (May 1997 to September 1999) Hasbro (September 1999 to December 2000)		
<ul style="list-style-type: none"> <li>* Editor, then Editor in Chief of Periodicals division: created one new magazine, supervised or edited four magazines total.</li> <li>* Hired and supervised editors and art directors, managed up to five employees.</li> <li>* Creative Director in Games division, supervised creation and completion of new products according to schedule.</li> <li>* Wrote two novels, over ten novellas and short stories, and hundreds of articles and editorials.</li> <li>* Contributed to the creation of successful subscription advertisements for magazines.</li> <li>* Won 1998 Origins Award for best game accessory design.</li> <li>* Two magazines in division won eight industry awards for best periodicals in gaming field.</li> <li>* Worked from offices in Lake Geneva WI: May 1983 to June 1995; worked as telecommuter from Lake Geneva WI and Louisville KY: June 1995 to December 2000</li> </ul>		
Editorial history: TSR Periodicals Division, Dragon Magazine, editor, May 1983 – Sep 1993; TSR Periodicals Division, Ares Magazine, editor, Jul 1983 – Jan 1984; TSR RPGA Network, Polyhedron Newszine, editorial staff & columnist, 1983-1985, 1990-1996; TSR Periodicals Division, editor-in-chief Sep 1986 – Sep 1993; TSR Periodicals Division, Dungeon Adventures, editor, Sep 1986 – Sep 1993; TSR Periodicals Division, Amazing Stories editorial staff, Jan 1987 – Mar 1991; SingleLife Magazine (non-TSR), freelance editor & writer, Sep 1992 – Jun 1995; TSR Games Division, product group leader, Oct 1993 – Aug 1994; TSR Games Division, creative director, Aug 1994 – Jun 1995; TSR Games Division, editor & designer, Jun 1995 – May 1997; Wizards of the Coast, Games Division, games editor May 1997 – Sep 1999; Hasbro, Inc., Wizards of the Coast Games Division, games editor, Sep 1999 – Dec 2000.		
<b>REASON FOR LEAVING:</b> Corporate-wide layoffs due to restructuring. In May 1983 I began working for TSR, Inc. (HQ: Lake Geneva, WI), which was bought out in May 1997 by Wizards of the Coast, Inc. (HQ: Renton, WA), which itself was bought out by Hasbro, Inc. (HQ: Providence, RI) in September 1999. My employment was continuous from 1983 to 2001. See "Duties Summary."		
There was a gap in employment from December 2000 to August 2002. During this time I wrote and attempted to sell several fiction novels to the publishing industry, but I was unsuccessful. (See above.)		
<b>DATES:</b> From: 1/1982 To: 5/1983	<b>EMPLOYER:</b> University of Louisville	<b>POSITION TITLE:</b> Graduate work assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Louisville, Kentucky 40292		<b>COMPANY URL:</b> <a href="http://louisville.edu/">http://louisville.edu/</a>
<b>PHONE NUMBER:</b> 800-334-8635	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 8	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> * Assisted Dr. Michel Loeb (professor of audiology) with experiments and testing. (Dr. Loeb has since passed.)		
<b>REASON FOR LEAVING:</b> Joined TSR, Inc. for editorial position in magazine department, leading to later employment with Wizards of the Coast and Hasbro, Inc. Graduate degree was completed in 2003.		
<b>DATES:</b> From: 10/1975 To: 10/1981	<b>EMPLOYER:</b> United States Army	<b>POSITION TITLE:</b> Behavioral Science Specialist (MOS 91G, old ver.)
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b> <a href="http://www.army.mil/">http://www.army.mil/</a>

<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> ■Yes □No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 3
<b>DUTIES:</b> * Duty stations were at the Department of Psychiatry and Neurology, USA MEDDAC, Womack Army Hospital, Fort Bragg, NC USA(1977-1978), and at the Mannheim Mental Health Clinic, (D CO., 8th Med BN, 8th ID), U.S. Army Sullivan Barracks, Mannheim, West Germany (1978-1981). * Performed detailed intake interviews for staff psychologists, completed and maintained medical records, and conducted weekly client therapy with Soldiers and their dependents. * Administered and scored MMPI tests for sniper-school candidates and other clients as assigned, conducting further interviews with sniper-school candidates. * Served as on-call rape-crisis counselor about 12 victims at Womack Army Hospital, Fort Bragg NC, after training by Cumberland County Mental Health Center, for 1977-1978. * Acted as on-call interviewer and assistant for numerous emergency psychiatric cases. * Participated in staff meetings at Mannheim and at Heidelberg Hospital, and discussed cases with supervisors. * Taught deep-muscle relaxation courses and gave inservice training at Fort Bragg. * Awarded: Army Commendation Medal (1979), NCO Professional Development Ribbon (1979), Army Achievement Medal (1981), Good Conduct Medal (1981), Overseas Service Ribbon (1981), Army Service Ribbon. * Distinguished Graduate, Primary Leadership Course, 8th Infantry Division Noncommissioned Officers' Academy (Baumholder, West Germany), Class 79-5, 25 May 1979.		
<b>REASON FOR LEAVING:</b> Completed foreign tour of duty, prepared to enter graduate school.		
<b>DATES:</b> From: 2/1974 To: 4/1975	<b>EMPLOYER:</b> Eastern State Hospital	<b>POSITION TITLE:</b> Volunteer
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1350 Bull Lea Road (new facility; I worked at the old facility), Lexington, Kentucky 40511		<b>COMPANY URL:</b> <a href="http://ukhealthcare.uky.edu/eastern-state-hospital/">http://ukhealthcare.uky.edu/eastern-state-hospital/</a>
<b>PHONE NUMBER:</b> 859-246-8000	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> ■Yes □No
<b>HOURS PER WEEK:</b> 6	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> * Participated in games, conversation, walks, and assistance with clients at state psychiatric hospital.		
<b>REASON FOR LEAVING:</b> Ended volunteer work when undergraduate school workload increased and I got married. Work dates are approximate.		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**Typing:  
Data Entry:**OTHER SKILLS:**

Division manager and creative director - Expert - 8 years and 6 months  
Writer, fiction & nonfiction, published - Expert - 40 years and 0 months  
Editor (books, magazines, other products) - Expert - 10 years and 0 months  
Sexual assault counselor - Skilled - 1 years and 0 months  
Microsoft Office Word, Excel, PowerPoint, Outlook - Skilled - 10 years and 0 months  
SPSS, IBM statistical software, current version - Skilled - 3 years and 0 months  
Public speaking on detailed topics - Skilled - 20 years and 0 months  
AHLTA, U.S. Army electronic medical records system - Expert - 3 years and 6 months  
HTML coding to create Internet websites & webpages - Skilled - 10 years and 0 months  
MOAB (Management of Aggressive Behavior) technique - Beginner - 4 years and 6 months  
Microsoft SharePoint platform - Beginner - 1 years and 0 months  
CPR (not currently certified, trained 6+ times) - Beginner - 40 years and 0 months  
Bereavement and death & dying counselor - Beginner - 1 years and 0 months  
Infection Control, including MRSA (Central State) - Beginner - 4 years and 6 months

**LANGUAGE(S):****ADDITIONAL INFORMATION****Additional Information**

Strong knowledge of and experience with:  
\* HIPAA and the protection of personal information.  
\* Computer & Internet security practices.  
\* U.S. Army Battlemind, Mental Toughness, Warrior Mentality, & Military Resilience programs, military combat veterans' issues, making psychiatric diagnoses, determining Global Assessment of Functioning, evaluating for PTSD and Traumatic Brain Injury, highly familiar with DSM-IV-TR.  
\* Clear, informative, and entertaining writing on any topic.

**Additional:**

\*\* Large home library with collection of books on SPSS and statistics, military psychology, civilian psychology, crisis intervention, psychiatric medications, American history, editing, and writing.  
\*\* Honors Program, 1973-1976, and Psi Chi, 1975-1976, at UK.

\*\* Distinguished Graduate, Primary Leadership Course, 8th Infantry Division Noncommissioned Officers' Academy (Baumholder, West Germany), Class 79-5, 25 May 1979.

\*\* Past member of Science Fiction Writers of America (1982-2008).

REFERENCES		
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Ingrid Lim	<b>POSITION:</b> Command Psychologist (former), LTC U.S. Army
<b>ADDRESS:</b> (Street, City, State, Zip Code) Office of the Command Psychologist, Recruiting and Retention School, USAREC (might be at new post), Fort Knox, Kentucky 40121		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 502-386-5861
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Brenda Matlock	<b>POSITION:</b> Director of Infection Control at Central State Hospital, RN
<b>ADDRESS:</b> (Street, City, State, Zip Code) Central State Hospital, 10510 LaGrange Road, Louisville, Kentucky 40223		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 502-253-7060
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Elizabeth Dixon	<b>POSITION:</b> Coach, Recruiting Center Commanders
<b>ADDRESS:</b> (Street, City, State, Zip Code) Recruiting and Retention School, USAREC, Fort Jackson, South Carolina 29207		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 803-751-7502
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Thomas Anderson	<b>POSITION:</b> Psychologist, LTC U.S. Army (retired)
<b>ADDRESS:</b> (Street, City, State, Zip Code) Office of the Command Psychologist - Forward, Recruiting and Retention School, USAREC, Fort Jackson, South Carolina 29207		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 803-751-8794
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Chaska Barksdale	<b>POSITION:</b> Psychologist, CPT U.S. Army
<b>ADDRESS:</b> (Street, City, State, Zip Code) Office of the Command Psychologist - Forward, Recruiting and Retention School, USAREC, Fort Jackson, South Carolina 29207		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 803-751-7502
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Tyiesha Williams-Reynolds	<b>POSITION:</b> SFC U.S. Army
<b>ADDRESS:</b> (Street, City, State, Zip Code) Office of the Command Psychologist - Forward, Recruiting and Retention School, USAREC, Fort Jackson, South Carolina 29207		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 803-751-8838
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Nicole Cox	<b>POSITION:</b> AAHSS Director of Operations, RN, BSN
<b>ADDRESS:</b> (Street, City, State, Zip Code) 9331 Easy Oak Creek, Converse, Texas 78109		
<b>EMAIL ADDRESS:</b> nicole@aideandhealth.com		<b>PHONE NUMBER:</b> 504-377-2139
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Jessica Cox	<b>POSITION:</b> AAHSS Human Resources
<b>ADDRESS:</b> (Street, City, State, Zip Code) 9331 Easy Oak Creek, Converse, Texas 78109		
<b>EMAIL ADDRESS:</b> jessica@aideandhealth.com		<b>PHONE NUMBER:</b> 504-239-2872

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**  
n/a
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**  
n/a
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**  
n/a
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**  
n/a
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Dr. Thomas Anderson, Fort Jackson SC, 8037518794; CPT Chaska Barksdale, Fort Jackson SC, 8037517502
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
\* Compiled and analyzed over 2,000 USAREC Serious Incident Reports covering FY 2008-2013, using SPSS, Microsoft Excel, and PowerPoint in a procedure I devised to replace less effective data collection and analysis, and reported results to OCP staff for informational and training purposes, for 2011-2013. \* Reported quarterly statistical analyses of USAREC Serious Incident Reports to the Command Psychologist, for later review by the Commanding General, USAREC, for 2011-2013. \* Analyzed and reported in depth to OCP on known and suspected suicide deaths within USAREC in 2001-2013, for 2012-2013.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Roger E Moore on 10/16/14 8:02 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Postell, Cecil A**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/17/14 8:17 AM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Postell, Cecil A		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 445 Sawtooth Lane, Columbia, South Carolina 29229		
<b>HOME PHONE:</b> (803) 361-8298	<b>ALTERNATE PHONE:</b> (803) 699-3854	<b>EMAIL ADDRESS:</b> cecilpostell@bellsouth.net
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$38,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: 10/1999 To: 11/2002	<b>SCHOOL NAME:</b> Coker	
<b>LOCATION:(City, State)</b> Hartsville, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Sociology	<b>UNITS COMPLETED:</b>	

**WORK EXPERIENCE**

<b>DATES:</b> From: 4/2008 To: 8/2011	<b>EMPLOYER:</b> State Election Commission	<b>POSITION TITLE:</b> Information Resource Coordinator I
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 734-9086	<b>SUPERVISOR:</b> Howard Snider - Director of Voter Services	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$2,900.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Uses various specialized software programs, to create, test and debug simple and complex elections definitions. Provide assistance to users by analyzing and troubleshooting problems on site or via phone and communicate regularly with county personnel with set-up of computerized voting equipment and take action to meet their needs. Assist counties using statewide electronic voting system with election day technical field support. Assist in training users to operate electronic voting system hardware and software. Assist with preparation and maintenance of guidelines and training materials provided to office staff and county personnel. Assist with various duties of the voter services division during peak workload periods.		
<b>REASON FOR LEAVING:</b> Presently Working		
<b>DATES:</b> From: 2/2004 To: 12/2008	<b>EMPLOYER:</b> Primerica	<b>POSITION TITLE:</b> Financial Analyst
<b>ADDRESS:</b> (Street, City, State, Zip Code) 445 Sawtooth Lane, Columbia, South Carolina 29229		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 699-3854	<b>SUPERVISOR:</b> N/A - N/A	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 15	<b>SALARY:</b> \$1,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 4

<b>DUTIES:</b> Advise clients with guidance on investment decisions Gather financial information for analysis Perform Consultations with clients Educate clients on realistic expectations Process Accounts Payable, including managing, and training new hires, Process purchase orders invoices, travel invoices and related documents accurately.		
<b>REASON FOR LEAVING:</b> Working Part-Time		
<b>DATES:</b> From: 3/2007 To: 3/2008	<b>EMPLOYER:</b> SC Department Of Juvenile Justice	<b>POSITION TITLE:</b> Instructor/Administration Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 4678 Broad River Rd., Columbia, South Carolina 29210		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 869-9163	<b>SUPERVISOR:</b> Audrey Houston - Academic Enrichment Program Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> * Instructor to Youth that are incarcerated * Visit release youth to help in finding employment and get them back in school * Provide assistance with administrative work * Assist with computer related issues * Arrange proper placement for released youths with the Boys and Girls Club. * Revise policies and brochures as needed		
<b>REASON FOR LEAVING:</b> Obtain New Position		
<b>DATES:</b> From: 6/1999 To: 3/2006	<b>EMPLOYER:</b> SC Department of Corrections	<b>POSITION TITLE:</b> Assistant Director of Health Information Resources
<b>ADDRESS:</b> (Street, City, State, Zip Code) 4542 Broad River Rd., Columbia, South Carolina 29210		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 896-08549	<b>SUPERVISOR:</b> Brenda Dash-Frasier - Director of Health Information resources	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$2,400.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Audit medical records for thirty-one Correctional Institutions Compile, analyze, report and maintain statistical medical data for quality improvement Supervise medical records analysts/auditors Update and revise medical record review forms Assist with planing and organizing of medical records review forms to ensure compliance Tabulate medical reviewed data and record into the database Utilize various computer application programs to prepare reports, charts and graphs Train staff members according to documented procedures. Produced reports for Senior Management monthly. Created operating work instructions and procedures. Interviewed and hired new employees as needed.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 4/1992 To: 8/1998	<b>EMPLOYER:</b> US Army	<b>POSITION TITLE:</b> Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) Ft Jackson, Columbia, South Carolina 29209		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 751-3656	<b>SUPERVISOR:</b> Mark Donahoe - Colonel	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,100.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Manage facility with a staff of thirty employees. Serve as unit dental Liaison. Conduct training sections for the staff. Coordinate administrative and logistic assignments. Integrate computer system used for reporting dental classification. Supervise staff of 15-20 personnel. Compile weekly and monthly statistical reports. Audit dental records on monthly and quarterly basis. Maintained an operating budget over \$550,000.00 Interviewed and hired new employees. Trained staff members according to documented procedures. Evaluated staff members annually. Order and received all supplies and materials. Responsible for maintaining good relationship with all vendors.		
<b>REASON FOR LEAVING:</b> Retired		

<b>DATES:</b> From: 2/1983 To: 2/1988	<b>EMPLOYER:</b> US Army	<b>POSITION TITLE:</b> Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (000) 000-00000	<b>SUPERVISOR:</b> David Thompson - Colonel	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,840.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Manage facility with a staff of twenty-two employees Establish training programs which improved proficiency of staff Reviewed and updated operation policies Trained staff and other post employees Conducted inventories and accountability of supplies and equipment Counseled employees Supervise mail room employees Perform all audits Served as Equal Opportunity representative Served as Human Resource Specialist. Supervisor supply and logistic personnel. Evaluated and hired new employees as needed.		
<b>REASON FOR LEAVING:</b> Change of duty station		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Insurance Agent	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Primerica Financial Services
<b>TYPE:</b> DENTAL ASSISTANT	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> US ARMY
<b>TYPE:</b> PERSONELL MANAGEMENT SPECIALIST	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> US ARMY
<b>TYPE:</b> SUPPLY SPECIALIST	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> US ARMY
<b>TYPE:</b> Instructor	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> US ARMY

#### Skills

<b>OFFICE SKILLS:</b> Typing:35 Data Entry:0
<b>OTHER SKILLS:</b> WRITING - Expert - 30 years and 0 months COMPUTER - Expert - 29 years and 0 months
<b>LANGUAGE(S):</b> Spanish - <input checked="" type="checkbox"/> Speak <input checked="" type="checkbox"/> Read <input checked="" type="checkbox"/> Write

#### ADDITIONAL INFORMATION

<b>Military Service</b> Retired after 20 years
<b>Interests &amp; Activities</b> TEACHING PUBLIC SPEAKING
<b>Clinical Experience</b> RECORDS ANALYST, DENTAL ASSISTANT, MANAGER
<b>Honors &amp; Awards</b> NUMEROUS MILITARY AWARD AND DECORATIONS
<b>Professional Associations</b> BOY & GIRL SCOUTS EXECUTIVE
<b>Volunteer Experience</b> HOMELESS SHELTER, PRISON MINISTRY, SPORTS MINISTRY, SUNDAY SCHOOL SUPERINTENDANT

#### REFERENCES

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Howard Snider	<b>POSITION:</b> Director of Voter Services
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<b>ADDRESS:</b> (Street, City, State, Zip Code) 2221 Devine Street, COLUMBIA, South Carolina 29205		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 734-9004
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> James Posey	<b>POSITION:</b> Information Resource Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) 605 West Main Street, Lexington, South Carolina 29072		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 260-6671
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Cheryl Goodwin	<b>POSITION:</b> Supervisor Voter Services
<b>ADDRESS:</b> (Street, City, State, Zip Code) 2221 Devine Street, COLUMBIA, South Carolina 29221		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 240-9140
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Gary Walton	<b>POSITION:</b> REVERAND
<b>ADDRESS:</b> (Street, City, State, Zip Code) 308 ROCKINGHAM RD, COLUMBIA, South Carolina 29229		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 479-9917

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
State Election Commission
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
James Posey - 803 260-6671  
Cheryl Goodwin - 803 240-9140
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
I build election databases for the counties of South Carolina.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Cecil A Postell on 10/17/14 8:17 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Scanlan, Mark**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/27/14 9:13 AM**  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Scanlan, Mark		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1615 Carissa Dr, Sumter, South Carolina 29154		
<b>HOME PHONE:</b> 8034682019	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> markscanlan@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$30,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular, Internship	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time, Part Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends, On Call (as needed)	
<b>OBJECTIVE:</b> I wish to find work that is challenging and rewarding. After a 28 year career in the military I would like to be a part of South Carolina's future.	

**EDUCATION**

<b>DATES:</b> From: 9/1982 To: 5/1986	<b>SCHOOL NAME:</b> Milton High School	<b>DEGREE RECEIVED:</b> High School Diploma
<b>LOCATION:(City, State)</b> Milton, Massachusetts	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>DATES:</b> From: 5/2011 To:	<b>SCHOOL NAME:</b> American Military University	<b>DEGREE RECEIVED:</b> Other
<b>LOCATION:(City, State)</b> Charles Town, West Virginia	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>MAJOR:</b> Public Administration		<b>UNITS COMPLETED:</b> 21 - Semester
<b>DATES:</b> From: To:	<b>SCHOOL NAME:</b> University of Phoenix	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Phoenix, Arizona	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>MAJOR:</b> Criminal Justice Organization		<b>UNITS COMPLETED:</b>

**WORK EXPERIENCE**

<b>DATES:</b> From: 5/2012 To: 9/2014	<b>EMPLOYER:</b> US Air Force/361st Training Squadron	<b>POSITION TITLE:</b> Training Superintendent/Instructor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 501 Missile Rd, Wichita Falls, Texas 76311		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 940-676-5204	<b>SUPERVISOR:</b> Major Christopher Tooman - Commander	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 55	<b>SALARY:</b> \$5,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 112

**DUTIES:**

- Led enterprise's most diverse technical school--graduated 10K students/99% graduation rate; best in organization
- Overhauled Metals Technology training course; cut 448 hours from curriculum/obsolete information--saved Air Force \$665K annually
- Mentored/trained 30 instructors for induction of 75 international students--best international graduation rate in organization; 98%
- Managed training facility \$1.75M upgrades; modernized training environment--facility profiled as Air Force success
- Launched initiative with Air Force Safety Center to review 3K pages of course material/privileged information--first in 5 years/protected privacy of victims
- Led publication of 20 study guide volumes for 3K+ non-resident graduates; first to test electronic file transfer--cut lags/100% success
- Proposed 300-minute training day; improved efficiency--returned 22.5% of schoolhouse's lost training time/anticipated to revolutionize the way the Air Force does training

- Meticulous training equipment/devices review yielded 6K+ maintenance contract hours deleted; \$372K first year savings--zero training losses
- Managed content, currency, and accuracy of six Air Force specialty code development course materials while answering customer assistance requests
- Overhauled 3 outdated multimedia presentations/teaching aids; augmented performance task training--reduced demonstration time 27%
- Trained & inspired 36 students/nine internationals; 300 training hours--provided superbly instructed students to 10 Air Force Major Commands/International Air Forces
- Completed Air Force Instructor internship in maintenance/safety/security fundamentals at Sheppard Air Force Base

**REASON FOR LEAVING:**

Retirement from Air Force

<b>DATES:</b> From: 5/2011 To: 5/2012	<b>EMPLOYER:</b> USAF/20th MXG	<b>POSITION TITLE:</b> Quality Assurance Superintendent
<b>ADDRESS:</b> (Street, City, State, Zip Code) 705 Sycamore St, Shaw AFB, South Carolina 29152		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Lt Col Carolyn Forner 814-571-8092 - Commander	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 60	<b>SALARY:</b> \$5,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 26

**DUTIES:**

- Performed as Quality Assurance Chief leading 28 inspectors observing, documenting, investigating, analyzing and reporting negative trends affecting occupational safety/maintenance standards of 78 aircraft and 1.5K personnel
- Supervised investigation of \$2M aircraft accident recovering critical evidence and reviewing 500+ pages of historical documentation
- Investigated 6 incidents of aircraft nose-wheel tire blowouts; pinpointed cause to training practices and faulty equipment
- Penned/coordinated maintenance/safety instructions supplement to Air Force parent document
- Prepared unit for Air Force Inspection Agency Egress program audit; 433 document files/explosive safety program--zero safety/zero major discrepancies
- Prepared unit for Air Force logistics/safety/maintenance standards inspections--received "Excellent" rating
- Global reach; advised Foreign Military Sales team on establishment of quality assurance function establishment for Iraqi Air Force
- Organized F-16 aircraft depot support visit; set schedule for 24 sections--identified 65 F-16 maintenance and safety items for agenda

**REASON FOR LEAVING:**

Transfer to Sheppard AFB Texas

<b>DATES:</b> From: 1/2008 To: 5/2011	<b>EMPLOYER:</b> USAF/Squadron Chief	<b>POSITION TITLE:</b> US Air Force Quality Assurance Chief
<b>ADDRESS:</b> (Street, City, State, Zip Code) 20 CMS , Shaw AFB , South Carolina 29152		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Major Adam Gubitosi 412-657-6498 - Maintenance Officer	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$4,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 250

**DUTIES:**

- Instituted maintenance/safety improvements to aircraft maintenance manuals--impacted personnel/safety of flight
- Networked with NASA to test/verify hazardous material sampling testing--saved organization in \$4.2K replacement costs
- Awarded 2009 nominee for Wright Bothers Memorial Trophy, 2010 Maintenance Manager of the Year and 2011 Maintenance Professional of the Year
- Identified external tank modification issue--safety issue highlighted Air Force-wide
- Developed electronic-routing/tracking process; for employee recognition/evaluations--decreased unit's overdue evaluations by 50%
- Led 135 Airmen/12 aircraft to Bagram Air Base Afghanistan; protected convoys and lives of soldiers on the battlefield
- Synchronized elements from three different maintenance units into one unit--simultaneously supported 2 separate combat aircraft deployments
- Led maintenance team down to Khandahar Air Base Afghanistan to recover disabled aircraft--returned aircraft to unit in less than 48 hours
- Developed field test/repair of F-16 display generator units--netted \$438K savings across 18 units
- Oversaw \$2M military construction project--ensured on-schedule/on-budget project met requirements
- Streamlined avionics/aircraft fuel systems maintenance/logistics processes--slashed return/repair times by 50%
- Unit Radiation Safety Officer--effectiveness proven during Air Force safety inspection/zero discrepancies noted

**REASON FOR LEAVING:**

Promotion/transfer to different unit

**CERTIFICATES AND LICENSES****TYPE:**

- Certified Air Force Instructor Technical Training

**LICENSE NUMBER:****ISSUING AGENCY:****Skills****OFFICE SKILLS:**

Typing:50  
Data Entry:0

**OTHER SKILLS:****LANGUAGE(S):**

**ADDITIONAL INFORMATION****Nothing Entered For This Section****REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Gary Stevenson	<b>POSITION:</b> Training Support Flight Chief/Evaluations Chief
<b>ADDRESS:</b> (Street, City, State, Zip Code) 501 Missile Road , Sheppard AFB, Texas 76301		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 940-733-4279
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Paul Fanning	<b>POSITION:</b> Instructor Supervisor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 501 Missile Road, Sheppard AFB , Texas 76311		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 940-704-3473
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> David Ferry	<b>POSITION:</b> Training Manager/Flight Chief Training Support
<b>ADDRESS:</b> (Street, City, State, Zip Code) 501 Missile Rd, Sheppard AFB, Texas		
<b>EMAIL ADDRESS:</b> David.ferry@us.af.mil		<b>PHONE NUMBER:</b> 940-676-5207

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Adam Gubitosi Wesco Distribution  
225 West Station Square Drive  
Pittsburgh, PA 15219 412-657-6498  
  
Carolyn Forner  
21337 River Park Dr  
Eagle River AK 99577 Cell 814-571-8092
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Worked with both Quality Assurance Databases analyzing metric and trend data; Worked with Student Management Databases analyzing graduations, eliminations, course scheduling and analysis of trends affecting student population.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Mark Scanlan on 10/27/14 9:13 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Stephenson, Sondra D**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/20/14  
 11:42 AM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Stephenson, Sondra D		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 618 Bryton Place, Columbia, South Carolina 29210		
<b>HOME PHONE:</b> (803) 218-8540	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> harvestpsalms231@hotmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day	
<b>OBJECTIVE:</b>	

**EDUCATION**

<b>DATES:</b> From: 9/2002 To: 5/2005	<b>SCHOOL NAME:</b> Vermont Law School	<b>DEGREE RECEIVED:</b> Professional
<b>LOCATION:(City, State)</b> South Royalton, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Law		
<b>DATES:</b> From: 9/1983 To: 5/1996	<b>SCHOOL NAME:</b> Columbia College	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Public Affairs/History		
<b>DATES:</b> From: 3/1983 To: 12/1994	<b>SCHOOL NAME:</b> Midlands Technical College	<b>DEGREE RECEIVED:</b> Associate's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Business Management		

**WORK EXPERIENCE**

<b>DATES:</b> From: 3/2014 To: Present	<b>EMPLOYER:</b> The Housing Authority of the City of Columbia	<b>POSITION TITLE:</b> Occupancy Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1917 Harden Street, Columbia, South Carolina 29204		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 803-254-3886	<b>SUPERVISOR:</b> Yvonne Manley - Director, Occupancy	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37.5	<b>SALARY:</b> \$1,890.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Interview applicants and process applications to determine eligibility and placement; Perform credit and criminal background checks for potential tenants. Calculate interim rent changes. Draft Occupancy department policy and procedure manual. Respond to public/applicant/tenant inquiries regarding housing programs.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 11/2012 To: 3/2014	<b>EMPLOYER:</b> Unemployed	<b>POSITION TITLE:</b> Unemployed
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>

<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 0	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> N/A		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 3/2012 To: 11/2012	<b>EMPLOYER:</b> Nelson Mullins Riley Scarborough (Carolina Legal Associates)	<b>POSITION TITLE:</b> Contract Attorney
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 799-8835	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Provide document review including initial and quality control, privileged/non-privileged and competitively sensitive redactions.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 1/2011 To: 3/2012	<b>EMPLOYER:</b> Unemployed/Reduction in Workforce	<b>POSITION TITLE:</b> Unemployed
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 0	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> N/A		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 5/2008 To: 1/2011	<b>EMPLOYER:</b> South Carolina Department of Labor, Licensing, and Regulation	<b>POSITION TITLE:</b> Project Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29210		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 896-4586	<b>SUPERVISOR:</b> Ruby Brice - Director (Retired)	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$4,166.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 1
<b>DUTIES:</b> ?Managed multidisciplinary team of up to 14 developers, designers, testers working on multiple projects simultaneously, to implement Agency's \$3.2 million enterprise data management system project. ?Clarified client requirements, business needs and project objectives, via feedback sessions and client meetings, in collaboration with all stakeholders. ?Strategized project scoping and specifications documents, to clearly communicate project roadmap. ?Created required project documentation, including scope document, design document, and implementation document. ?Planned, designed and recommended business processes to improve and support business activities. ?Maintained project schedule(s) to ensure delivery of all work products within established timeframes and standards of quality. ?Working with team of developers, launched agency contact center, which included analyzing and documenting agency's business requirements and processes and communicating these requirements by constructing conceptual data and process models. ?Assisted in the development and promotion of agency project management processes and procedures.		
<b>REASON FOR LEAVING:</b> Reduction in Workforce		
<b>DATES:</b> From: 5/2007 To: 5/2008	<b>EMPLOYER:</b> South Carolina Department of Labor, Licensing, and Regulation	<b>POSITION TITLE:</b> Administrator
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29210		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 896-4586	<b>SUPERVISOR:</b> Ruby E. Brice - Associate Deputy Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$3,916.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 1
<b>DUTIES:</b> ?Managed day-to-day operations of the Boards of Chiropractic and Veterinary Medical Examiners, which included supervision of two (2) senior-level administrative staff persons. ?Drafted South Carolina Code of Regulations for Boards of Chiropractic and Veterinary Medical Examiners, which became effective April 2009. ?Monitored pending board regulations as well as testified before South Carolina Senate Committee on Higher Education ?Directed the adjudication of Boards' disciplinary actions, including serving as member of Investigative Review Committee, drafting and serving hearing notifications and drafting Final Orders. ?Designed Microsoft Articulate presentation for Veterinary Board online continuing education course testing statutes and regulations. ?Sponsored project proposal for Veterinary Board electronic facilities inspection process. ?Developed Chiropractic and Veterinary Boards' disciplinary flowcharts to establish procedural history. ?Designed, developed and conducted Veterinary Board Investigative Review Committee Training Session.		

?Responded to public, licensee (both current and pending), general assembly and gubernatorial inquiries regarding Boards' statutes and regulations.

?Served as liaison with corresponding professional organizations.

**REASON FOR LEAVING:**

Re-Assignment

<b>DATES:</b> From: 9/2007 To: 12/2007	<b>EMPLOYER:</b> South University	<b>POSITION TITLE:</b> Adjunct Professor
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29223		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 8	<b>SALARY:</b> \$1,250.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

?Created and developed curriculum to instruct under- and post-graduate paralegal candidates in Bankruptcy Law by providing both theoretical and practical experience.

?Created and developed curriculum for under-graduate students to instruct theories of Constitutional Law.

**REASON FOR LEAVING:**

<b>DATES:</b> From: 8/2006 To: 5/2007	<b>EMPLOYER:</b> South Carolina Retirement Systems	<b>POSITION TITLE:</b> Law Clerk/Paralegal
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29223		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> David Avant - General Counsel	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

?Assisted in trial preparation, which included drafting: Prehearing Statements; Agency Information Sheets; Motions; Interrogatories and Requests for Production.

?Attended Administrative Law Hearings to assist General Counsel.

?Organized trial exhibits, which included: Chronology of events and witness lists.

?Drafted Final Agency Determinations for member appeals for service or disability retirement application denials.

?Reviewed Qualified Domestic Relations Orders for Agency approval.

**REASON FOR LEAVING:**

Obtained full-time employment

<b>DATES:</b> From: 12/2005 To: 6/2006	<b>EMPLOYER:</b> Association of Trial Lawyers of America	<b>POSITION TITLE:</b> Program Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) Washington, District of Columbia		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 1

**DUTIES:**

?Managed day-to-day operations for two (2) membership programs with more than 6000 members.

?Coordinated logistics and recruitment efforts for National Student Trial Advocacy Competition, which included more than 228 teams from 129 law schools.

?Raised more than \$69,000 in registration and membership dues.

?Acquired 924 new law student members.

?Composed and edited Law Student and Minority Caucus quarterly newsletters.

?Developed content for Law Student and Minority Caucus websites.

?Managed departmental budgets totaling more than \$125,000.

**REASON FOR LEAVING:**

Relocation

<b>DATES:</b> From: 8/2005 To: 12/2005	<b>EMPLOYER:</b> Dickstein, Shapiro, Morin & Oshinsky LLP	<b>POSITION TITLE:</b> Document Analyst
<b>ADDRESS:</b> (Street, City, State, Zip Code) Washington, District of Columbia		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

?Reviewed and catalogued electronic discovery for litigation support.

**REASON FOR LEAVING:**

<b>DATES:</b> From: 5/1998 To: 1/2000	<b>EMPLOYER:</b> National Council of Senior Citizens	<b>POSITION TITLE:</b> Member Relations/Direct Marketing Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) Silver Spring, Maryland		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Patrick Burns - Communications Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 7

**DUTIES:**

?As Member Relations Manager, responsible for departmental administration and management of member service relations.  
?Authored Member Relations Procedural Manual.  
?Conducted staff development and training seminars on topics such as interdepartmental communications and customer service enhancement.  
?Developed mailing system for membership renewal notices.

?As Direct Marketing Manager, responsible for the coordination of agency direct marketing efforts.  
?Prepared RFPs for contractor solicitation.  
?Negotiated agreements to establish project objectives.  
?Monitored and reviewed contractor performance and budget.  
?Realized \$300,000 in print cost savings through circulation database management.  
?Raised \$250,000 in special appeals campaign.  
?Drafted copy for special appeals and membership brochures.

**REASON FOR LEAVING:****CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills**

Nothing Entered For This Section

**ADDITIONAL INFORMATION****Additional Information**

?Completed 32 hour continuing education course in project management for Project Management Institute certification

**Additional Information**

?Phi Alpha Delta Law Fraternity, International  
?Recipient: Outstanding Community Service Award

**Additional Information**

Worked for the South Carolina Association of Counties, 1991 - 1996, as the first Setoff Debt Collection liaison.

**REFERENCES**

Nothing Entered For This Section

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Ruby Brice 691-9497  
Linda Perkins 477-1525
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Served as project manager for implementation of agency wide data management system to include business analysis, workflow development, application testing and launch.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Sondra D Stephenson on 10/20/14 11:42 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Trammell, Maria N**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/23/14  
 11:36 AM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Trammell, Maria N		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 301 Winterberry Loop, Lexington, South Carolina 29072		
<b>HOME PHONE:</b> (803) 546-3622	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> marusevitch@gmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$57,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time, Part Time, Per Diem	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Rotating	
<b>OBJECTIVE:</b> To apply my professional experience in managing and implementing state and federally funded programs, and workforce development. To work with South Carolinians changing lives and making a difference.	

**EDUCATION**

<b>DATES:</b> From: 8/2004 To: 5/2006	<b>SCHOOL NAME:</b> University of South Carolina	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 4 - Semester
<b>MAJOR:</b> Linguistics/ Second Language Acquisition		
<b>DATES:</b> From: 9/1999 To: 7/2004	<b>SCHOOL NAME:</b> Moscow State Linguistic University	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Moscow, International	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b> 10 - Semester
<b>MAJOR:</b> Teaching English and Spanish and Intercultural Communications		

**WORK EXPERIENCE**

<b>DATES:</b> From: 5/2011 To: Present	<b>EMPLOYER:</b> SC Department of Employment and Workforce	<b>POSITION TITLE:</b> Migrant and Seasonal Farm Worker State Monitor Advocate
<b>ADDRESS:</b> (Street, City, State, Zip Code) 631 Hampton st., Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 737-0277	<b>SUPERVISOR:</b> Bill Beckham - Director of Organizational Integrity	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37.5	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

- Interpret federal statutes and regulations on the Migrant and Seasonal Farmworker Program
- Assist in strategic planning for the MSFW program at the Department of Employment
- Ensure that the South Carolina Department of Employment and Workforce (SC DEW) conducts an effective migrant worker outreach program and has a job service delivery system in place to assist migrant workers.
- Assist in interpreting program data to the executive management
- Work with executive management across the divisions to reach most effective solutions in program delivery
- Advise on the statewide issuance of program policies and procedures
- Train staff on the delivery of the MSFW outreach program; provide ongoing technical and programmatic assistance.
- Advocate for the employment rights and protections of Farmworkers
- Handle and process statewide Job Service complaints
- Monitor the performance of the Job Service Complaint system in the local offices

- Monitor Employment Services program delivery and services for migrant workers
- Advocate for the employment and training rights of the migrant population
- Assist with audits and reviews performed by Internal Audit and Quality Assurance staff
- Conduct annual monitoring reviews of local workforce centers
- Conduct frequent field visits to the working and living areas of MSFWs, and discuss job services and other employment-related programs with MSFWs, crew leaders, and employers
- Collaborate with other state, federal, and private entities serving Migrant and Seasonal Farmworkers

<b>REASON FOR LEAVING:</b> presently employed		
<b>DATES:</b> From: 11/2008 To: 5/2011	<b>EMPLOYER:</b> Department of Employment and Workforce	<b>POSITION TITLE:</b> Performance & Reporting Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Courtney Nowak - Performance & Reporting Program Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$3,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> - develop and maintain the performance management, customer satisfaction, and evaluation systems of the federal programs; - communicate with the vendor of the database system on the latest changes, fixes, advancements of the electronic job search database - prepare and submit federally required reports - timely and accurately maintain database - write regulation letters - provide statewide training - troubleshoot reporting software issues		
<b>REASON FOR LEAVING:</b> promoted		
<b>DATES:</b> From: 2/2007 To: 11/2008	<b>EMPLOYER:</b> ITT Technical Institute	<b>POSITION TITLE:</b> Educational Recruiter
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1628 Browning Road, Columbia, South Carolina 29210		<b>COMPANY URL:</b> www.itt-tech.edu
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Paul Wherum - Director of ITT TECH, Columbia	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,200.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> • Initiate contact with prospective students • Maintain contact with current students • Assist students in their goal to graduate • Give product knowledge demonstrations • Maintain electronic database of records and tracking • Act as a student liaison		
<b>REASON FOR LEAVING:</b> career advancement		
<b>DATES:</b> From: 8/2004 To: 5/2007	<b>EMPLOYER:</b> University of South Carolina	<b>POSITION TITLE:</b> Instructor of Spanish
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29208		<b>COMPANY URL:</b> www.sc.edu
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> David Hill - Chair of the Spanish program at USC	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,600.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> • Teach Spanish courses to advanced - beginner-level USC students ( age group 18-40; class size 20-25) • Develop teaching materials for students such as syllabus, handouts, daily assignments and class activities.		
<b>REASON FOR LEAVING:</b> moved on to a full time position		
<b>DATES:</b> From: 5/2005 To: 8/2005	<b>EMPLOYER:</b> General Motors Russia	<b>POSITION TITLE:</b> Project Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Moscow, International		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 30	<b>SALARY:</b> \$1,800.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> • Assist in Cadillac Project development • Communication • Interpreting		
<b>REASON FOR LEAVING:</b>		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills**

**OFFICE SKILLS:**

Typing:  
Data Entry:

**OTHER SKILLS:**

Russian Language - Expert - 28 years and 0 months

**LANGUAGE(S):**

Spanish - ■ Speak ■ Read ■ Write  
Russian - ■ Speak ■ Read ■ Write  
German - ■ Speak ■ Read ■ Write

**ADDITIONAL INFORMATION**

**Honors & Awards**

Graduated with Honors ( Red Diploma) from Moscow State Linguistic University;  
Master's in Teaching English and Spanish

**Honors & Awards**

The Director's Award in Appreciation for hard work and commitment to succeed

ITT Technical Institute, Columbia, SC March 2008

**Honors & Awards**

Employee of the Month November 2012, SC Department of Employment and Workforce

**Additional Information**

Supervisory Development Program Graduate, January 2013

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Barbara Coleman	<b>POSITION:</b> Director Telamon Corporation SC
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b> bcoleman@telamon.org		<b>PHONE NUMBER:</b> (803) 667-4215
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Marlon James	<b>POSITION:</b> Former Command Inspector General, Ft. Jackson
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina 29201		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 446-5688
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Keri Dowd-Pugh	<b>POSITION:</b> Audit Manager, SCDEW
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b> KPugh@dew.sc.gov		<b>PHONE NUMBER:</b> (803) 7372610

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
Department of Employment and Workforce
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Keri Dowd- Pugh 803 737 2610  
Barbara Coleman 803-667-4216
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
 Yes
- 2. Do you have at least a bachelor's degree?**  
 Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
 Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
 As part of my experience I was involved directly in database management for the state and federal employment and training programs. The experience includes maintaining the database, trouble shooting, information entry, analysis and data interpretation for management and staff.
- 5. Do you have experience in human and/or constituent services?**  
 Yes
- 6. Are you willing to travel in and out of state?**  
 Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
 Yes

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Maria N Trammell on 10/23/14 11:36 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Vazquez, Ruth B**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/21/14 9:12 AM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Vazquez, Ruth B		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3912 Oakmont Dr, Columbia, South Carolina 29223		
<b>HOME PHONE:</b> (803) 727-6649	<b>ALTERNATE PHONE:</b>	<b>EMAIL ADDRESS:</b> ruthbvazquez@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b>	
<b>TYPES OF WORK YOU WILL ACCEPT:</b>	
<b>SHIFTS YOU WILL ACCEPT:</b>	
<b>OBJECTIVE:</b> To contribute to public service using and applying experience and skills in the human services field , while pursuing a position of growth and expansion .	

**EDUCATION**

<b>DATES:</b> From: 6/2002 To: 8/2002	<b>SCHOOL NAME:</b> Agency for Children Services, New York City	
<b>LOCATION:(City, State)</b> new york, New York	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Certification
<b>MAJOR:</b> child protective specialist		<b>UNITS COMPLETED:</b>
<b>DATES:</b> From: 3/1998 To: 7/1998	<b>SCHOOL NAME:</b> Consortium For Worker Education	
<b>LOCATION:(City, State)</b> New York, New York	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>MAJOR:</b> Certificate of Computer and office Skills		<b>UNITS COMPLETED:</b> na - Quarter
<b>DATES:</b> From: 9/1993 To: 12/1995	<b>SCHOOL NAME:</b> Hunter College	
<b>LOCATION:(City, State)</b> New York, New York	<b>DID YOU GRADUATE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DEGREE RECEIVED:</b> No Degree
<b>MAJOR:</b> Science Education		<b>UNITS COMPLETED:</b> 12 - Semester
<b>DATES:</b> From: 8/1984 To: 12/1992	<b>SCHOOL NAME:</b> University of Puerto Rico	
<b>LOCATION:(City, State)</b> Rio Piedras Puerto Rico, Puerto Rico	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Home Economics \Education		<b>UNITS COMPLETED:</b> 130 - Semester

**WORK EXPERIENCE**

<b>DATES:</b> From: 12/2008 To: 11/2010	<b>EMPLOYER:</b> DEPT OF HEALTH & HUMAN SERVICES	<b>POSITION TITLE:</b> Human Services Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1801 Main St, Columbia, South Carolina 29202		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 898-2525	<b>SUPERVISOR:</b> Daisy Myers - Program Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Process applications for QI		

**GAPS program,review and evaluate information received , complete yearly reviews . Prepare budget sheets , determine eligibility , maintain case files , update information on meds , process mail,determine retroactive eligibility . etc . refer cases to appropriate division if needed .**

**REASON FOR LEAVING:**

Did not leave

<b>DATES:</b> From: 10/2007 To: 12/2008	<b>EMPLOYER:</b> Dept of Health and Human Services	<b>POSITION TITLE:</b> Program Assitant
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1801 Main St, Columbia, South Carolina 29202		<b>COMPANY URL:</b> scdhhs.gov
<b>PHONE NUMBER:</b> (803) 898-2904	<b>SUPERVISOR:</b> Martha Chandler - Program Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 35	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

Recieve and respond telephone calls and written inquiries from applicants , beneficiaries,providers and DHHS Staff concerning Medicaid and SCHIPS benefits ,services, and general elegibility issues. Provides direct services to beneficiaries who need/request replacement cards, forms or information. Access MMIS records to research and retrieve information that might help solve claims /benefits issues

**REASON FOR LEAVING:**

moved to another department

<b>DATES:</b> From: 7/2006 To: 10/2007	<b>EMPLOYER:</b> South Carolina DHHS	<b>POSITION TITLE:</b> Human Services Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1081 Main st, Columbia, South Carolina 29202		<b>COMPANY URL:</b> scdhhs.gov
<b>PHONE NUMBER:</b> (803) 898-3008	<b>SUPERVISOR:</b> Jean Richadrson - Program Coordinator II	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,400.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

Process applications for FI programs,review and evaluate information recieved , complete yearly reviews . prepare budget sheets , determine elegibility , maintain case files , update infromation on meds , process mail,detrimine retroactve elegibility . ect . refer cases to appropriate division if needed .

**REASON FOR LEAVING:**

Bureau reorganization. transferred to another dept.

<b>DATES:</b> From: 7/2004 To: 8/2005	<b>EMPLOYER:</b> Palmetto GBA	<b>POSITION TITLE:</b> Customer Service rep
<b>ADDRESS:</b> (Street, City, State, Zip Code) Technolgy Circle, Columbia, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 763-0049	<b>SUPERVISOR:</b> Brian Butlter - Bilingual Spanish Call Center Manager	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$1,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

Answered medicare questions to Spanish speaking beneficiaries, providing information requested , guidance ,clarification or referral to proper department as needed.Provided information regarding available drug plans. Information regarding other federal /state assistance programs available.Verified covered/non covered services by medicare; ordered medicare replacement cards and medicare and you handbooks and other publications , if requested .Clarified to callers changes in policy /procedures as they were implemented /enforced.

**REASON FOR LEAVING:**

mother sick took care of her

<b>DATES:</b> From: 9/2001 To: 10/2002	<b>EMPLOYER:</b> CTI\Federal gov contractor DEA , FBI , US Customs	<b>POSITION TITLE:</b> Translator /wire monitor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3951 peder dr siute 120, Fair Fax, Virginia 22030		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Martha Robinson - Project MANAGER	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

**DUTIES:**

Monitored and translated wired conversations from Spanish into English and informed agents of relevance /importance of conversations to their investigation. Revised and proofread translations to to send to transcript, paticipated in voice/person identification;assisted agents in decoding keywords/phrases in Spanish that might contribute to their investigation. Appeared in court if required to support agents case .

**REASON FOR LEAVING:**

moved to sc

<b>DATES:</b> From: 1/1999 To: 9/2001	<b>EMPLOYER:</b> United Cerebral Palsy of NYC	<b>POSITION TITLE:</b> Developmental Specialist (QMRP)
<b>ADDRESS:</b> (Street, City, State, Zip Code) Brooklyn, New York, New York 11230		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (718) 436-7600	<b>SUPERVISOR:</b> Verinica Mccormmack - Day treatment Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 30	<b>SALARY:</b> \$3,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

<b>DUTIES:</b> Coordinated services and developed /implemented functional programs for individuals with cerebral palsy/mrdd, in accordance with federal and state regulations .Prepared all required reports ,attended mandated meetings .Supervised , trained and evaluated staff.Kept record of monthly, semi-annual and annual reviews of participants. Assisted director with program management as needed, by delegating or reassigning duties,making schedules changes , conducting intrviews , evaluations and preparation for audits . Kept participants files updated , secured and organized as required by program. Worked , commnicated as needed with participants families , advocates or other agencies involved with the participant or program .		
<b>REASON FOR LEAVING:</b> Child care/shchedule conflicts		
<b>DATES:</b> From: 9/1992 To: 11/1997	<b>EMPLOYER:</b> New York City Board OF Education	<b>POSITION TITLE:</b> Bilingual teacher K-6
<b>ADDRESS:</b> (Street, City, State, Zip Code) CSD19 PS 72 605 Shepperd ave, Brooklyn, New York 11208		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (718) 345-4100	<b>SUPERVISOR:</b> Serge Rene - Principal	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 36	<b>SALARY:</b> \$4,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Developed ,planned and implemented instructional units and lesson plans to meet curriculum standards for the early childhood students of Hispanic origin, calssified as LEP; which English is not their native language . Taught ESL and all subject areas . Evaluated Students to identify needs and prepare them for standard testing . Participated in School comittees , prepared and designed activities for curriculum enrichment, staff development,and parent education. Involved in multi-cultural awareness activities and community outreach . Kept sudetnf files accurate and assured appropriate services were rendered to sudents with specific needs . Collaborated with School based support team to ascertain behavioral, social, physical or health disorders of sudents were serviced and referred by proper agency.Outreach to to community resources and agencies to improve, enrich,complement and integrate varied elements that made a positive contribution or experience to the student life of children serviced ,and their families . Utilizing curriculum , assisted students with the asimilation of their new culture and language, at the same time assured that their culture and language of origin was validated , reinforced ,respected and acknowledged . Planned and scheduled activities outside school to enrich ,expand, and expose sudents to real life experiences that allowed them to associate,apply and integrate the instruction recieved with their enviroment , society and daily living		
<b>REASON FOR LEAVING:</b> Temporay Provisional License		

#### CERTIFICATES AND LICENSES

<b>TYPE:</b> Bilingual Common Branches Certification	
<b>LICENSE NUMBER:</b> 127936	<b>ISSUING AGENCY:</b> New York State Dept of Education
<b>TYPE:</b> Child Protective Specialist	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Agency For Childre Services , New York City
<b>TYPE:</b> Tier I Bilingual Customer Service	
<b>LICENSE NUMBER:</b>	<b>ISSUING AGENCY:</b> Palmetto GBA -Government Contract

#### Skills

<b>OFFICE SKILLS:</b> Typing:35 Data Entry:0
<b>OTHER SKILLS:</b> Staff Training and supervision - Skilled - 2 years and 0 months Computer applications - Skilled - 7 years and 0 months Team/Independent work ability - Skilled - 10 years and 0 months Translations\Interpretation - Skilled - 7 years and 0 months
<b>LANGUAGE(S):</b> Spanish - <input checked="" type="checkbox"/> Speak <input checked="" type="checkbox"/> Read <input checked="" type="checkbox"/> Write

#### ADDITIONAL INFORMATION

<b>Professional Associations</b> National Elegibility Workers Association
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#### REFERENCES

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Rudy Long	<b>POSITION:</b> Bureau of Elegibility Chief
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b> LONGRY@scdhhs.gov		<b>PHONE NUMBER:</b> (803) 898-3985
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Marina Rodriguez	<b>POSITION:</b> BC K--12
<b>ADDRESS:</b> (Street, City, State, Zip Code) 58 Lincoln Ave, Brooklyn, New York 11208		

<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (718) 235-0870
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Linda Dingman	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code) 105 Brookview Lane, Irmo, South Carolina 29063		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 917-0297

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
DHHS
- 5. Do you have any relatives employed with the State of South Carolina?**  
No
- 6. If yes, please provide below the name(s), relationship, and agency.**
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Daisy Myers 803-898-2629  
Betsy Fuller 803-898-2515
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
human services specialist @ DHHS reports required and nature of job consists of all of the above duties
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Ruth B Vazquez on 10/21/14 9:12 AM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Walters, Annie M**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received: 10/19/14 5:56 PM**

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Walters, Annie M		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 356 country club rd, blackville, South Carolina 29817		
<b>HOME PHONE:</b> (803) 671-4184	<b>ALTERNATE PHONE:</b> (803) 284-3201	<b>EMAIL ADDRESS:</b> waltersbarnwell@yahoo.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> State: SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$35,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Weekends	
<b>OBJECTIVE:</b> A highly skilled, compassionate, empathetic, and solution-oriented Program Coordinator & Counselor. Dedicated to providing exceptional program service and implement effective treatment plans for clients' experiencing various issues.	

**EDUCATION**

<b>DATES:</b> From: 3/2008 To: 6/2010	<b>SCHOOL NAME:</b> South University	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Professional counseling		
<b>DATES:</b> From: 8/2005 To: 1/2007	<b>SCHOOL NAME:</b> Springfield College	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Boston, Massachusetts	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Human Service/community counselor		
<b>DATES:</b> From: 8/2000 To: 5/2002	<b>SCHOOL NAME:</b> Claflin University	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Orangeburg, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> organizational management		
<b>DATES:</b> From: 8/1998 To: 5/2000	<b>SCHOOL NAME:</b> Denmark Technical College	<b>DEGREE RECEIVED:</b> Associate's
<b>LOCATION:(City, State)</b> Denmark, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Human Service		

**WORK EXPERIENCE**

<b>DATES:</b> From: 8/2013 To: Present	<b>EMPLOYER:</b> Blackville Public Schools	<b>POSITION TITLE:</b> Program Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code) Jonesbridge rd, Blackville, South Carolina 29817		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 803-671-4184	<b>SUPERVISOR:</b> Dr Carolyn Anderson - Principal, Maceonia, Elementary	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 26	<b>SALARY:</b> \$1,588.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 10

**DUTIES:**

Structure the schedule of activities the Developing Reader Literacy Block.  
 Work Healthy Choices Coordinator and literacy staff to organize children into groups  
 Support literacy tutors in the planning and implementations of daily read-aloud, guide independent reading practice and fluency-building activities during in-school, afterschool and summer programs.  
 Provide feedback to literacy staff concerning best practices in daily read –aloud, guide independent reading practice and fluency-building activities.  
 Communicate regularly with Program Specialist at the field office.  
 Work with school librarian to organize books used for Save the Children Program.  
 Administer Star and Start Early test to children Macedonia Elementary.  
 Incorporate one hour into weekly schedule to run and analyze AR reports.  
 Address individual children's need with appropriate staff and devise possible solutions.  
 Work with school personnel to identify struggling readers.  
 Work with teachers and administrator to compose a plan for struggling readers.  
 Assist parents with interventions to enhance reading and learning skills.  
 Compose plan to decrease inappropriate and negative behavior in program  
 Administer pre-and post-assessments for children participating in STC tutorials  
 Host a kick-off event and end of the year celebration for families when program begins and end.  
 Provide four Progress Reports at specified times.  
 Record daily program attendance in the online Monitoring and Evaluation (M&E) system on the US Program Portal.  
 Follow rules, regulation of Save The Children and Blackville Public Schools.  
 Prepare monthly reports and data to monitor children progress.  
 Help parent identify things they can do to enhance child behavior and academic success.  
 Make sure employees time is correct and completed in a timely manner.

**REASON FOR LEAVING:**

<b>DATES:</b> From: 2/2013 To: 2/2014	<b>EMPLOYER:</b> South Carolina Youth Advocate Program	<b>POSITION TITLE:</b> Wrap Advocate Advocate
<b>ADDRESS:</b> (Street, City, State, Zip Code) 140 Stoneridge Dr., Columbia, South Carolina 29210		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 779-5500	<b>SUPERVISOR:</b> Kat - Wrap Services Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 6	<b>SALARY:</b> \$475.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

Engage in treatment support activities consistent client's Total Service/Treatment plan  
 Provide appropriately detailed written reports or other documentation as to the activities engaged in and the client's behavior, including observations, evaluation and reporting on specific behavioral traits to document the client's progress or regression in achievement of any treatment objectives.  
 Assist the client to learn to appropriately express her/his feelings under a wide range of circumstances.  
 Provide a range of activities which help the client to enhance his/her social, decision making and problem solving skills.  
 Help the client build appropriate relationship with others.  
 Provide interventions in her/his home environment to enable the client to remain in the home.  
 Promote development of healthy coping skills, adaptive patterns of interacting with others, and appropriate responses to environmental stimuli.  
 Provide temporary crisis interventions support during episodes of acting out.  
 Provide supplemental support to other agencies or individuals working with client, and follow rules and regulations of that agency or individual.  
 Assist the client to develop independent living skills such as food planning, and preparation, maintenance of the living environment, community awareness and mobility skills.  
 Attend and/or provide input to the client's treatment team meetings.

**REASON FOR LEAVING:**

full time employment		
<b>DATES:</b> From: 2/2011 To: 2/2013	<b>EMPLOYER:</b> Longevity Personal Care Home,	<b>POSITION TITLE:</b> case manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) Lumpkin rd, augusta, Georgia		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (706) 951-7514	<b>SUPERVISOR:</b> Caletha Taylor - Owner/Operator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,440.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0

**DUTIES:**

Provided therapeutic services to diverse group of clients.  
 Referred clients to community resources or to specialists as necessary.  
 Modified treatment activities and approaches as needed in order to comply with changes in clients' status.  
 Collaborate with workers to make sure clients living conditions are appropriate.  
 Participated in training and staff meetings to enhance clinical practice.  
 Conduct intake and assessment activities and maintain reports.  
 Coordinated outreach activities that will enhance clients social skills.  
 Maintained daily documentation on client behavior, medication and activities.  
 Compliant with Longevity and Medicaid guidelines, policies and procedures.

**REASON FOR LEAVING:**

Contract ended		
<b>DATES:</b> From: 10/2012 To: 12/2012	<b>EMPLOYER:</b> Family Interventions, Inc	<b>POSITION TITLE:</b> qualified mental health professional

<b>ADDRESS:</b> (Street, City, State, Zip Code) 5820 East WT Harris Blvd Suite 205,, Charlotte, North Carolina 28215		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> William T. Utley - Chief Executive Officer	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 10	<b>SALARY:</b> \$640.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Teaching the client age appropriate interpersonal skills including conflict resolution, asking for help, communicating needs, boundary setting, and developing healthy family/ peer support systems. Teaching skills for improving functioning in the family setting including seeking attention appropriately, creating structure and routine in the home, accepting consequences for behavior, and facilitating healthy role development. Assisting clients in developing skills for success in the classroom including overcoming anxiety about asking for help, communicating effectively with faculty, creating a system for organization, reducing distractions and focusing on tasks, following instructions, and completing assignments. Helping clients develop age-appropriate self-care habits, problem solving, and safety skills. Teaching developmentally appropriate symptom management skills including anger management and cognitive behavioral skills for reducing depression and anxiety. Responding to crisis situations and supporting the client during times of increased stress.		
<b>REASON FOR LEAVING:</b> No clients available		
<b>DATES:</b> From: 1/2011 To: 8/2011	<b>EMPLOYER:</b> Children's Place	<b>POSITION TITLE:</b> Family Service Worker
<b>ADDRESS:</b> (Street, City, State, Zip Code) 310 Barnwell Ave, Aiken, South Carolina 29801		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 641-4144	<b>SUPERVISOR:</b> Laura Donatelli - Program Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$33,500.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Interview clients individually, in families, or in groups, assessing their situations, capabilities, and problems, to determine what services are required to meet their needs. Counsel individuals, families, or communities regarding issues including mental health, poverty, unemployment, substance abuse, physical abuse, rehabilitation, social adjustment, child care, and/or medical care. Conduct assessment and maintain case history records and prepare reports. Counsel parents with child rearing problems, interviewing the child and family to determine whether further action is required. Provide counseling services to families, teach social skills, provide outreach and crisis intervention. Refer clients to community resources for services such as job placement, debt counseling, legal aid, housing, medical treatment, or financial assistance, and provide concrete information, such as where to go and how to apply.Reduce family's isolation by enhancing and developing skills, abilities and support network.		
<b>REASON FOR LEAVING:</b> resigned		
<b>DATES:</b> From: 5/2003 To: 1/2011	<b>EMPLOYER:</b> Aiken Barnwell Mental Health	<b>POSITION TITLE:</b> Clinical Counselor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1135 Gregg Hwy, Aiken, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 641-7700	<b>SUPERVISOR:</b> Tamara Smith - program Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$29,560.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Guide clients in the development of skills and strategies for dealing with their problems. Counsel clients, individually and in group sessions, to assist in overcoming dependencies, adjusting to life, and making changes. Act as client advocates in order to coordinate required services or to resolve emergency problems in crisis situations. Refer clients, or family members to community resources or to specialists as necessary. Counsel family members to assist them in understanding, dealing with, and supporting clients. Evaluate the effectiveness of counseling programs and clients' progress in resolving identified problems and moving towards defined objectives. Plan, organize and lead structured programs of counseling, recreation and social activities for clients. Prepare and maintain all required treatment records and reports. Collect information about clients through interview and observations. Modify treatment activities and approaches as needed in order to comply with changes in clients' status. Develop and implement treatment plans based on clinical experience and knowledge. Collaborate with other staff members to perform clinical assessments and develop treatment plans.		
<b>REASON FOR LEAVING:</b> Career Advancement		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**Typing:35  
Data Entry:0**OTHER SKILLS:**

<b>LANGUAGE(S):</b>
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ADDITIONAL INFORMATION
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Nothing Entered For This Section
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REFERENCES
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<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Sherry Donaldson	<b>POSITION:</b> Human Resource manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) barnwell, South Carolina 29812		
<b>EMAIL ADDRESS:</b> sdonaldson@bchospital.org		<b>PHONE NUMBER:</b> (803) 259-1000 ext 6
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Teresa Pope,	<b>POSITION:</b> Superintendent -Blackville Public Schools
<b>ADDRESS:</b> (Street, City, State, Zip Code) Blackville, South Carolina 29817		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 284-5605

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
Yes
4. **If so, in which agency do you currently work?**  
Blackville Hilda Public Schools
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Bernard Price (803) 543-7455  
Sharonda Burison-Harris (803) 348-7655
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Familiar with collecting, inputting and analyzing data using various software.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Annie M Walters on 10/19/14 5:56 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Wilson, Marikay**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/31/14  
 10:24 PM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Wilson, Marikay		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 1838 Fairlawn Circle, Cayce, South Carolina 29033		
<b>HOME PHONE:</b> (803) 414-1773	<b>ALTERNATE PHONE:</b> (662) 843-7031	<b>EMAIL ADDRESS:</b> mkaywilson@gmail.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> MS <b>Number:</b>	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b>	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Weekends	
<b>OBJECTIVE:</b> Seeking an opportunity to promote services and programs for older citizens and their caregivers.	

**EDUCATION**

<b>DATES:</b> From: 6/1994 To: 5/1999	<b>SCHOOL NAME:</b> Delta State University	<b>DEGREE RECEIVED:</b> Doctorate
<b>LOCATION:(City, State)</b> Cleveland, Mississippi	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Curriculum & Instruction, Supervision, and Research with an emphasis in Adult Education		
<b>DATES:</b> From: 9/1976 To: 12/1983	<b>SCHOOL NAME:</b> University of Illinois at Springfield	<b>DEGREE RECEIVED:</b> Master's
<b>LOCATION:(City, State)</b> Springfield, Illinois	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Gerontology		
<b>DATES:</b> From: 9/1971 To: 5/1975	<b>SCHOOL NAME:</b> MacMurray College	<b>DEGREE RECEIVED:</b> Bachelor's
<b>LOCATION:(City, State)</b> Jacksonville, Illinois	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>UNITS COMPLETED:</b>
<b>MAJOR:</b> Psychology/Biology		

**WORK EXPERIENCE**

<b>DATES:</b> From: 9/2000 To: Present	<b>EMPLOYER:</b> Mississippi Valley State University	<b>POSITION TITLE:</b> Coordinator of Public Education
<b>ADDRESS:</b> (Street, City, State, Zip Code) 14000 Hwy 82, Itta Bena, Mississippi 38941		<b>COMPANY URL:</b> <a href="http://www.mvsu.edu/index.php">http://www.mvsu.edu/index.php</a>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Coordinate the College of Education Professional Development Outreach services to K-12 Public Schools in the Mississippi Delta Region. Responsible for the development and delivery of the training curriculum.		
<b>REASON FOR LEAVING:</b> Relocating to South Carolina. Husband already working in South Carolina.		
<b>DATES:</b> From: 9/1999 To: 8/2000	<b>EMPLOYER:</b> Delta State University	<b>POSITION TITLE:</b> PT3 Project Coordinator

<b>ADDRESS:</b> (Street, City, State, Zip Code) Cleveland, Mississippi 38732		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 3
<b>DUTIES:</b> Coordinated the planning, development and implementation of a one-year federally funded faculty technology training grant. Responsible for supervision of student support staff.		
<b>REASON FOR LEAVING:</b> Short-Term Grant Project		
<b>DATES:</b> From: 8/1998 To: 7/1999	<b>EMPLOYER:</b> Mississippi Valley State University	<b>POSITION TITLE:</b> Instructional Technology Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) 14000 Hwy 82, Itta Bena, Mississippi 38941		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Reid Jones	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Engaged educators in training activities designed to promote the awareness, adaptation, application and assessment of instructional technology.		
<b>REASON FOR LEAVING:</b> Accepted another employment opportunity.		
<b>DATES:</b> From: 8/1991 To: 12/1992	<b>EMPLOYER:</b> North Delta Area Agency on Aging	<b>POSITION TITLE:</b> Director Area Agency on Aging
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Leonard Morris	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 6
<b>DUTIES:</b> Directed a full spectrum of community based older adult programs with an annual budget of \$1.5 million. Provided administrative oversight of budget and program operations. Developed education and training curriculum. Supervised six staff members responsible for assessing, planning, and evaluating comprehensive community-based services for a seven county region.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 3/1990 To: 8/1991	<b>EMPLOYER:</b> Delta State University	<b>POSITION TITLE:</b> Project Coordinator for Intergenerational After-School Program
<b>ADDRESS:</b> (Street, City, State, Zip Code) Cleveland, Mississippi 38732		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Reid Jones	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 2
<b>DUTIES:</b> Initiated a block grant school-age child care program. Managed the budget and fiscal reports, purchasing, community outreach, curriculum development, and direct delivery of child care services. Established a collaborative partnership between the program, and elementary school and children's families.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 1/1986 To: 10/1989	<b>EMPLOYER:</b> Bolivar County Hospital	<b>POSITION TITLE:</b> Case Manager - Discharge Planner
<b>ADDRESS:</b> (Street, City, State, Zip Code) Cleveland, Mississippi 38732		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Alinda Sledge	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 32	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Served as a liaison between physicians, patients, and families. Facilitated crisis intervention in a hospital setting. Coordinated comprehensive discharge planning and needs assessment of at risk patients.		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 5/1978 To: 5/1981	<b>EMPLOYER:</b> State of Illinois Employee Retirement System	<b>POSITION TITLE:</b> Executive I - Public Education / Training Division
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Robert Knox	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

<b>DUTIES:</b> Developed and managed a statewide, two day retirement benefit training program. Managed the Chicago-based SERS office to provide ancillary services for employees in Northern Illinois. Provide benefit clarification/explanation to active and retired state employees. Conducted on site Benefit Seminars throughout the state.		
<b>REASON FOR LEAVING:</b> Unable to continue extensive travel schedule throughout the state due to birth of my son.		
<b>DATES:</b> From: 2/1976 To: 8/1976	<b>EMPLOYER:</b> Berwyn-Cicero Council on Aging	<b>POSITION TITLE:</b> Community Outreach Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 3
<b>DUTIES:</b> Initiated a community outreach project to inform community residents of aging services and identified at risk older adults.		
<b>REASON FOR LEAVING:</b>		

CERTIFICATES AND LICENSES
Nothing Entered For This Section

Skills
Nothing Entered For This Section

ADDITIONAL INFORMATION
Nothing Entered For This Section

REFERENCES		
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Camille Branton	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code) Indianola, Mississippi		
<b>EMAIL ADDRESS:</b> camille.branton@gmail.com		<b>PHONE NUMBER:</b> (662) 719-0170
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> JoAnne Heisterkamp	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code) Greenville, Mississippi		
<b>EMAIL ADDRESS:</b> hkamp@mail.com		<b>PHONE NUMBER:</b> (662) 332-3507
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Jeannette Bennett	<b>POSITION:</b> Economic Education Specialist
<b>ADDRESS:</b> (Street, City, State, Zip Code) Nashville, Tennessee		
<b>EMAIL ADDRESS:</b> Jeannette.N.Bennett@stls.frb.org		<b>PHONE NUMBER:</b> 901-734-8011

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
No
4. **If so, in which agency do you currently work?**
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Jo Anne Heisterkamp  
1827 Jacqueline Dr. Greenville, MS. 38701  
662-332-3507 Email: hkamp@mail.com  
  
Jeannette Bennett  
Economic Education Specialit - Federal Reserve Bank  
901-734-8011  
Jeannette.N.Bennett@stls.frb.org
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
While employed at the AAA, I supervised the adoption and implementation of the new state-wide aging services database system.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Marikay Wilson on 10/31/14 10:24 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Wynn, Morris**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/18/14  
 12:15 PM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Wynn, Morris		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 504 Eighty Oak Ave, Mt. Pleasant, South Carolina 29464		
<b>HOME PHONE:</b> (864) 325-8155	<b>ALTERNATE PHONE:</b> (864) 845-7704	<b>EMAIL ADDRESS:</b> morriswynn@msn.com
<b>DRIVER'S LICENSE:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State: Number:</b>	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$45,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b> Regular, Temporary	
<b>TYPES OF WORK YOU WILL ACCEPT:</b> Full Time	
<b>SHIFTS YOU WILL ACCEPT:</b> Day, Evening, Night, Rotating, Weekends	
<b>OBJECTIVE:</b> To make use of my work experience of the just completed 2010 Census as the Manager of Quality Assurance (AMQA) as well as my experience in recovery efforts in Mississippi & Louisiana from Hurricane Katrina. My family and I have returned home to SC and I am seeking long term employment.	

**EDUCATION**

<b>DATES:</b> From: 1/2003 To: 11/2003	<b>SCHOOL NAME:</b> Juvenile Drug Court Planning Initiative	
<b>LOCATION:(City, State)</b> different national locales, Massachusetts	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>MAJOR:</b> Juvenile Drug Court Planning InitiativeDOJ	<b>UNITS COMPLETED:</b> 3 - Quarter	
<b>DATES:</b> From: 2/2001 To: 9/2001	<b>SCHOOL NAME:</b> Adult Drug Court Planning Initiative	
<b>LOCATION:(City, State)</b> different national locales, New York	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>MAJOR:</b> Adult Drug Court Planning Initiative-US DOJ	<b>UNITS COMPLETED:</b> 3 - Quarter	
<b>DATES:</b> From: 10/1991 To: 5/1994	<b>SCHOOL NAME:</b> mississippi state personnel board/university of southern mississippi	
<b>LOCATION:(City, State)</b> jackson, Mississippi	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Certification
<b>MAJOR:</b> certified public manager CPM	<b>UNITS COMPLETED:</b> 300 - Quarter	
<b>DATES:</b> From: 6/1977 To: 5/1978	<b>SCHOOL NAME:</b> mississippi state university	
<b>LOCATION:(City, State)</b> starkville, Mississippi	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Master's
<b>MAJOR:</b> public administration	<b>UNITS COMPLETED:</b> 33 - Semester	
<b>DATES:</b> From: 1/1975 To: 5/1977	<b>SCHOOL NAME:</b> university of south carolina upstate	
<b>LOCATION:(City, State)</b> spartanburg, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> general studies (political science/history)	<b>UNITS COMPLETED:</b> 120 - Semester	

**WORK EXPERIENCE**

<b>DATES:</b> From: 8/2014 To: Present	<b>EMPLOYER:</b> The Citadel, The Military College of South Carolina	<b>POSITION TITLE:</b> Night Officer in Charge
<b>ADDRESS:</b> (Street, City, State, Zip Code) 171 Moultrie Street , Charleston , South Carolina 29409		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 843-953-6925	<b>SUPERVISOR:</b> Kenneth C. Greene - SFC	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,080.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 450
<b>DUTIES:</b> Night Officer in Charge Office of the Commandant The Citadel, The Military College of South Carolina, 843-953-6925 (SFC Kenneth C. Greene) As a Night Officer in Charge I work from 9:00 PM until 6:00 AM. Using the established procedures and direction from the Commandant's Office maintains protocols, safety, and Corp of Cadet procedures at the resident/Brigade level for the prescribed period of night operations. Activities include interaction with Cadets and Cadet leadership-college staff-night staff on duty. Promote proper building protocols in operations, returning students, and final evening security of the premises. (Daily routine of activities and final reports of evening activities).		
<b>REASON FOR LEAVING:</b>		
<b>DATES:</b> From: 9/2013 To: 3/2014	<b>EMPLOYER:</b> SC Dept of Human Services	<b>POSITION TITLE:</b> Human Services Coordinator I
<b>ADDRESS:</b> (Street, City, State, Zip Code) 93 Human Services RD, Clinton, South Carolina 29325		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (864) 617-6966	<b>SUPERVISOR:</b> Stan Brown - Supervisor	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,750.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 9
<b>DUTIES:</b> As the County Supervisor I manage a staff of nine. Our office takes in reviews and processes Medicaid clients at our main office as well as three outside locations. Medicaid is now part of the Affordable Care Act and we process ACA applicants granting them Medicaid eligible status or referring them to the Insurance Exchanges (and receive referrals to us from the Exchanges). Supervision, personnel matters, and agency/functional procedures.		
<b>REASON FOR LEAVING:</b> Other Opportunities		
<b>DATES:</b> From: 9/2009 To: 9/2010	<b>EMPLOYER:</b> US Census Bureau	<b>POSITION TITLE:</b> Manager for Quality Assurance, AMQA
<b>ADDRESS:</b> (Street, City, State, Zip Code) 850 S. Pleasantburg Drive Suite 300, Greenville, South Carolina 29607		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (864) 553-6506	<b>SUPERVISOR:</b> Dave Burns - Local Census Office Manager, LCOM	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,900.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 100
<b>DUTIES:</b> Manage QA office staff, field staff, develop and present findings, and serve as technical contact on QA matters. Office resolves issues determined by Office Control Sysytem review of incoming Census data. All work must meet prescribed timeline and deadlines to accomplish 2010 Census. Supervision, accountability, reporting documentation, presentation, and final reporting of completed work.		
<b>REASON FOR LEAVING:</b> Temporary 2010 Census position		
<b>DATES:</b> From: 12/2008 To: 6/2009	<b>EMPLOYER:</b> U S Census Bureau	<b>POSITION TITLE:</b> Crew Leader
<b>ADDRESS:</b> (Street, City, State, Zip Code) 400 N.E. Dr. STE M, Columbia, South Carolina 29203		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 239-5010	<b>SUPERVISOR:</b> Rick Kuppins - Asst ELCO Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,360.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 18
<b>DUTIES:</b> Recruiting Assistant scheduling and testing prospective employees for the 2010 Census. Conducted the training sessions, completed and FedEx materials, and related community work. In 2009 became Crew Leader of 18 employee team which, using HHC's (hand held computers), locates and plots living structures in assigned area of the county.		
<b>REASON FOR LEAVING:</b> This is a temporary position		
<b>DATES:</b> From: 8/2007 To: 11/2007	<b>EMPLOYER:</b> Louisiana Spirit Hurricane Recovery	<b>POSITION TITLE:</b> Crises Counselor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 445 N 12St, Baton Rouge, LA 70805, Louisiana 70805		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (225) 219-5028	<b>SUPERVISOR:</b> Chad Hartman - Team Leader Grief & Loss Team	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Crises Counselor Grief & Loss Team Greater New Orleans Metro Area (four Parishes). Personal /group counseling, community outreach, and presentations/event participation		

<b>REASON FOR LEAVING:</b> Program will end 08 and I am returning to SC		
<b>DATES:</b> From: 3/2005 To: 5/2007	<b>EMPLOYER:</b> Mississippi Department of Mental Health	<b>POSITION TITLE:</b> Team Leader
<b>ADDRESS:</b> (Street, City, State, Zip Code) Robert E. Lee BLG, Jackson, Mississippi 39201		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (601) 359-1288	<b>SUPERVISOR:</b> Carrie Walt - Dir of Personnel	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,750.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> As the Team Leader, I interviewed/hired as well as supervised and directed a staff of 26 crises outreach workers in a four county disaster area. I conducted ongoing needs assessment, planned and coordinated with service providers, and documented activities of the Team		
<b>REASON FOR LEAVING:</b> Hurricane Katrina Project Recovery Program ended		
<b>DATES:</b> From: 10/2000 To: 12/2006	<b>EMPLOYER:</b> Virginia College of Jackson	<b>POSITION TITLE:</b> Adjunct Professor
<b>ADDRESS:</b> (Street, City, State, Zip Code) Jackson, Mississippi 39211		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (601) 977-0960	<b>SUPERVISOR:</b> Sue Middleton - Director Business Department	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$1,166.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Adjunct Professor Business Program. (Classes taught included: Intro to Business, Management & Supervision, and Human Resources)		
<b>REASON FOR LEAVING:</b> Project Recovery duties & travel to other parts of the state		
<b>DATES:</b> From: 2/2003 To: 7/2004	<b>EMPLOYER:</b> Mississippi Department of Human Services	<b>POSITION TITLE:</b> Director of the Prevention Unit
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 352, Jackson, Mississippi 39205		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (601) 359-4500	<b>SUPERVISOR:</b> Gloria Salters - Division Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,750.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> As the Director of the Prevention Unit, I supervised and directed a staff of eight professionals operating and overseeing \$12.5 million in state/ federal programs statewide. Our Unit also planned training sessions, did site reviews, and planned/hosted a statewide conference		
<b>REASON FOR LEAVING:</b> time limited position		
<b>DATES:</b> From: 5/1999 To: 6/2002	<b>EMPLOYER:</b> Mississippi State Supreme Court A O C	<b>POSITION TITLE:</b> Project Manager
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 117, Jackson, Mississippi 39205		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (601) 354-7406	<b>SUPERVISOR:</b> Kevin Lackey - Director Administrative Office of Courts	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,833.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> As a Project Manager, I developed and administered various grants and projects undertaken on behalf of the Supreme Court. Which included technical upgrades for courts and court security issues		
<b>REASON FOR LEAVING:</b> took six month position as executive director of non-profit agency (coalition for citizens with disabilities)		
<b>DATES:</b> From: 5/1997 To: 11/1998	<b>EMPLOYER:</b> Tennessee Department of Mental Retardation	<b>POSITION TITLE:</b> Unit Director
<b>ADDRESS:</b> (Street, City, State, Zip Code) P.O. Box 14055, Nashville, Tennessee 37124-0500		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Frances Washburn - Superintendent	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$3,916.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> As a Unit Director, I supervised a staff of 100 and was responsible for the overall operation of patient residential buildings. I was on call 24/7 for the facilities in my Unit		
<b>REASON FOR LEAVING:</b> returned to Mississippi		
<b>DATES:</b> From: 12/1988 To: 5/1997	<b>EMPLOYER:</b> Mississippi Department of Mental Health	<b>POSITION TITLE:</b> Evening Administrator

<b>ADDRESS:</b> (Street, City, State, Zip Code) Mississippi State Hospital, Whitfield, Whitfield, Mississippi 39139		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (601) 351-8000	<b>SUPERVISOR:</b> James G Chastain - Director	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$4,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> As the Evening Administrator, I was responsible for the overall operation of a 1,340 bed, 32 building hospital from 4:00 p.m. - midnight. A staff of some 250 skilled, semi-skilled, and professionals made up the evening or B shift		
<b>REASON FOR LEAVING:</b> took TN job offer		
<b>DATES:</b> From: 8/1989 To: 5/1997	<b>EMPLOYER:</b> Hinds Community College	<b>POSITION TITLE:</b> Adjunct Professor
<b>ADDRESS:</b> (Street, City, State, Zip Code) 3805 Hwy 80 E, Pearl, Mississippi 39208		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (601) 932-5237	<b>SUPERVISOR:</b> Jimmy Smith - President	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 20	<b>SALARY:</b> \$700.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Adjunct Professor Political Science/Hist. Department. (Classes taught State & Local Government and American National Government)		
<b>REASON FOR LEAVING:</b> took TN job offer		

#### CERTIFICATES AND LICENSES

Nothing Entered For This Section

#### Skills

**OFFICE SKILLS:**

Typing:32  
Data Entry:32

**OTHER SKILLS:**
**LANGUAGE(S):**

#### ADDITIONAL INFORMATION

**Additional Information**

To Whom It May Concern

I want to express my interest in the opportunity available with the organization. I have a Master's degree in Public Policy & Administration and have the Certified Public Manager (CPM) designation.

I have excellent people skills and have a career of organization/administrative experience. I also have years of staff training work as well as some thirteen years of presentation/training work as an adjunct professor in a business college and junior college. I have years of residential unit experience providing daily living services to clients served.

My work counseling and team leader work during Hurricane Katrina recovery work is an invaluable and priceless people and problem solving skills experience.

I believe that I have the direct work experience and educational background to be a viable candidate for this position.

Morris Wynn  
864-325-8155  
morriswynn@msn.com

**Additional Information**

2003 Juvenile Drug Court Planning Initiative-US  
Department of Justice/National Drug Court Institute.  
Three session workshops held in different national locales

2001 Adult Drug Court Planning Initiative-US Department of Justice/National Drug Court Institute. Note, our second session was in Buffalo, NY on September 11, 2001 and was interrupted by the events of the day

1999 Threat Management Training Program-US Department of the Treasury Federal Law Enforcement Training Center. (Court security training)

#### REFERENCES

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Amandia Carnahan	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code) Jacksonville , Florida		

<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 904-571-2676
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Diane McCurley	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code) Greenville, South Carolina		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> 864-420-9301

**Agency-Wide Questions**

1. **Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
2. **If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
3. **Are you currently employed by the State of South Carolina?**  
Yes
4. **If so, in which agency do you currently work?**  
The Citadel, The Military College of South Carolina
5. **Do you have any relatives employed with the State of South Carolina?**  
No
6. **If yes, please provide below the name(s), relationship, and agency.**
7. **Have you ever been terminated or forced to resign from any job?**  
No
8. **If yes, please explain.**
9. **Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
10. **Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Amandia Carnahan  
Jacksonville FL  
904-571-2676  
  
Diane McCurley  
Greenville SC  
864-420-9301
11. **Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Manager of Quality Assurance (AMQA) Greenville and Spartanburg Counties with the US Census Bureau As the AMQA managed QA office staff, field staff, developed and presented findings, and served as technical contact on QA matters. Strict deadlines, accountability, reporting documentation, and final reporting of completed work.
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Morris Wynn on 10/18/14 12:15 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**EMPLOYMENT APPLICATION**

**STATE OF SOUTH CAROLINA**  
 Division of Human Resources 8301 Parklane Road, Suite A220  
 Columbia, South Carolina 29223  
 (803) 896-5300  
<http://www.jobs.sc.gov>

**Yon, Kimberly M**  
**43647 PROGRAM COORDINATOR II - 60008528**

**Received:** 10/21/14  
 12:49 PM  
**For Official Use Only:**  
 QUAL: \_\_\_\_\_  
 DNQ: \_\_\_\_\_  
 Experience  
 Training  
 Other: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>POSITION TITLE:</b> PROGRAM COORDINATOR II - 60008528		<b>EXAM ID#:</b> 43647
<b>NAME:</b> (Last, First, Middle) Yon, Kimberly M		<b>SOCIAL SECURITY NUMBER:</b> N/A
<b>ADDRESS:</b> (Street, City, State, Zip Code) 232 Woodcote dr, Gaston, South Carolina 29053		
<b>HOME PHONE:</b> (803) 378-2528	<b>ALTERNATE PHONE:</b> (803) 378-2528	<b>EMAIL ADDRESS:</b> monick13@msn.com
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>DRIVER'S LICENSE:</b> <b>State:</b> SC Number: [REDACTED]	<b>LEGAL RIGHT TO WORK IN THE UNITED STATES?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**PREFERENCES**

<b>PREFERRED SALARY:</b> \$38,000.00 per year	<b>ARE YOU WILLING TO RELOCATE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Maybe
<b>WHAT TYPE OF JOB ARE YOU LOOKING FOR?</b>	
<b>TYPES OF WORK YOU WILL ACCEPT:</b>	
<b>SHIFTS YOU WILL ACCEPT:</b>	
<b>OBJECTIVE:</b> OBJECTIVE: To obtain a challenging and stimulating position in which my experience, education and punctual work ethic will offer career growth.	

**EDUCATION**

<b>DATES:</b> From: 11/2009 To: 6/2011	<b>SCHOOL NAME:</b> University of Phoenix	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Other
<b>MAJOR:</b> Masters of Business Administration		<b>UNITS COMPLETED:</b>
<b>DATES:</b> From: 3/2007 To: 9/2009	<b>SCHOOL NAME:</b> University of Phoenix	
<b>LOCATION:(City, State)</b> Phoenix, AZ, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Bachelor's
<b>MAJOR:</b> Bachelor's of Science in Health Administration		<b>UNITS COMPLETED:</b>
<b>DATES:</b> From: 6/2003 To: 8/2006	<b>SCHOOL NAME:</b> Midland Technical College	
<b>LOCATION:(City, State)</b> Columbia, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> Associate's
<b>MAJOR:</b> Associate of Science		<b>UNITS COMPLETED:</b>
<b>DATES:</b> From: 8/1997 To: 5/2001	<b>SCHOOL NAME:</b> North High School	
<b>LOCATION:(City, State)</b> North, South Carolina	<b>DID YOU GRADUATE?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>DEGREE RECEIVED:</b> High School Diploma

**WORK EXPERIENCE**

<b>DATES:</b> From: 6/2014 To: Present	<b>EMPLOYER:</b> South Carolina Department of Corrections	<b>POSITION TITLE:</b> Program Coordinator
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> 803-896-8542	<b>SUPERVISOR:</b> Ronald Entzminger - Program Coordinator II	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37.5	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b>

<b>DUTIES:</b> . Performs tasks of arranging transfers and approving transfers through the state-wide bus system. Prioritizing for appropriate use of beds. Ensure that information provided and entered is accurate and complete. Coordinates transfers for regional court. 2. Assist SCC members in transfers of Inmates from institution to institution. Ensures correspondence and transfer requests are filed, logged and sent to the appropriate institution for responses and filing. 3. Maintains appropriate files for all transfers & any changes made to the institution bed counts. Ensures transfers & bed changes are filed correctly. 4. Ensure accuracy of daily agency count. Contact institutions when the count is not verified for adjustments, instructions and sends CRT messages to wardens and State Classification Committee members for notification. 5. Assists institutions to ensure that all bed types are accurate and that additions/deletions/changes are justified. Maintain log to document all additions/deletions and changes to beds with justification reasons. 6. Compile required information to be reported to the DPPPS on inmates scheduled for parole hearings. Request pertinent information from institutions via CRT. Follow-up on those not reported on time and report to DPPPS prior to hearings. 7. Performs other related duties: Fixed Assets Liaison, reading & logging mail, typing, responds to inmates, families, staff and other agencies, orders supplies, enters leave and attendance, compiles monthly report and monthly calendar. 8. Sends Victim/Witness notification letters daily and makes CRT entries for Labor Crew/Work Program.		
<b>REASON FOR LEAVING:</b> Career Advancement		
<b>DATES:</b> From: 5/2013 To: 6/2014	<b>EMPLOYER:</b> South Carolina Dept of Corrections	<b>POSITION TITLE:</b> Administrative Assistant
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b> Deborah Garrell - Administrative Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$0.00/month	<b># OF EMPLOYEES SUPERVISED:</b> 0
<b>DUTIES:</b> Provides administrative support to the Regional Director, compose and prepares responses to inmate related inquiries, responses to executive staff inquiries, and receives & processes monthly reports from approx 130 classification field personnel. Assist in open enrollment and charitable programs for division staff.		
<b>REASON FOR LEAVING:</b> Career Advancement		
<b>DATES:</b> From: 6/2009 To: 5/2013	<b>EMPLOYER:</b> SC Dept. of Health and Human Services	<b>POSITION TITLE:</b> Human Service Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 898-2997	<b>SUPERVISOR:</b> Daisy Myers - Program Coordinator	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$2,074.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> <ul style="list-style-type: none"> <li>• Conduct all task while complying to HIPAA rules and regulations</li> <li>• Process Medicaid applications for Qualifying Individuals and GAPS program</li> <li>• Maintain client cases</li> <li>• Answer incoming client call and call clients for appropriate information regarding program</li> <li>• Lock incoming applications for the Aged, Blind, and Disabled program and the Specified Low Medicaid program</li> </ul>		
<b>REASON FOR LEAVING:</b> To promote and establish career.		
<b>DATES:</b> From: 8/2007 To: 9/2010	<b>EMPLOYER:</b> Palmetto Health	<b>POSITION TITLE:</b> Patient Placement Registration Rep
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina		<b>COMPANY URL:</b> www.palmettohealth.org
<b>PHONE NUMBER:</b> (803) 434-6881	<b>SUPERVISOR:</b> Gwendolyn Martin - Team Leader	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>HOURS PER WEEK:</b> 10	<b>SALARY:</b> \$350.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> <ul style="list-style-type: none"> <li>• Receive requests for patient bed reservations from physicians, physician's office staff and clinics, hospitals.</li> <li>• Submittal of reservation request utilizing internal software.</li> <li>• Admitting and processing patients ie: demographic and insurance information. Data Entry.</li> <li>• Screens admission charts for appropriateness (meets inpatient criteria) and preferred provider status as well as financial class and diagnosis to make direct referrals to the social worker or case manager.</li> <li>• Communicates with internal and external physicians and nurses to determine if alternative placement is possible during high census.</li> <li>• Communicates with all floors to include PACU, ER, CATH LAB, and Dialysis to assessments for transfers.</li> <li>• Communicates with the Administrator on Duty concerning patient flow, receiving patients, transfer, hospital bed status, and daily operations.</li> </ul>		
<b>REASON FOR LEAVING:</b> Pursue career with an well established organization that will also give me the opportunity to gain experience while completing Healthcare Administration degree. Left fulltime status, but currently works prn status.		
<b>DATES:</b> From: 9/2008 To: 6/2009	<b>EMPLOYER:</b> Department of Health and Human Services	<b>POSITION TITLE:</b> Administrative Specialist II
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 898-3985	<b>SUPERVISOR:</b> Sharon Mondier - Administrative Assistant	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>HOURS PER WEEK:</b> 37	<b>SALARY:</b> \$1,704.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> Answer telephones, filing, track and log incoming and outgoing mail,utilize HIPAA guidelines with all daily task, credit card audits, confirm bank fees for fiscal by confirming medicaid clients through meds, update BEP and LEP phone and address information for the intranet and internet, purchasing supplies, gathering data and compling information through microsoft excel, send employee information regarding hotel reservations for training and any task that is delegated by supervisor. Assisting CEP and QI Dept when needing. Answer client calls by utilizing MEDS. Assist in locking and tracking of applications and calling clients for addition application information.		
<b>REASON FOR LEAVING:</b> Career Advancement Only		
<b>DATES:</b> From: 2/2004 To: 8/2006	<b>EMPLOYER:</b> South Carolina Dept. of Corrections	<b>POSITION TITLE:</b> Shift Sergeant
<b>ADDRESS:</b> (Street, City, State, Zip Code) Columbia, South Carolina		<b>COMPANY URL:</b>
<b>PHONE NUMBER:</b> (803) 896-1484	<b>SUPERVISOR:</b> Yvonne Dreher - Captain of Security	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>HOURS PER WEEK:</b> 40	<b>SALARY:</b> \$2,000.00/month	<b># OF EMPLOYEES SUPERVISED:</b>
<b>DUTIES:</b> <ul style="list-style-type: none"> <li>• Display and execute SCDC's Mission Statement: To protect the public, all employee, and all inmates.</li> <li>• Instruct and explain all rules, regulations and procedures.</li> <li>• Instruct and counsel officers in required duty performance standards (EPMS).</li> <li>• Review and comment on incident reports.</li> <li>• Scheduling employee training and maintaining leave and attendance.</li> <li>• Audit and review of departmental policies.</li> <li>• Ensuring all shift officers are up to date with policy and procedures.</li> <li>• Training new hires and interview employees for promotions.</li> </ul>		
<b>REASON FOR LEAVING:</b> Pursuing a career in healthcare		

**CERTIFICATES AND LICENSES**

Nothing Entered For This Section

**Skills****OFFICE SKILLS:**Typing:50  
Data Entry:0**OTHER SKILLS:****LANGUAGE(S):****ADDITIONAL INFORMATION****Additional Information**

Microsoft Word, Microsoft Excel, Microsoft Works, Microsoft Outlook, Microsoft Power Point, Word Perfect, MEDS,MMIS, CRT, GroupWise, GAFRS, PreAdmit Tracking, Electronic Bedboard, Star, Medical Terminology, Anatomy &amp; Physiology

**REFERENCES**

<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Gail Boyd	<b>POSITION:</b> Patient Placement Representative
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (803) 479-6424
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (706) 399-9232
<b>REFERENCE TYPE:</b> Personal	<b>NAME:</b> Tanesha Osborne	<b>POSITION:</b> Chemisty Professor
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (706) 399-9232
<b>EMAIL ADDRESS:</b> tosborne@georgiasouthern.edu		<b>PHONE NUMBER:</b> (706) 399-9232
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> Daisy Myers	<b>POSITION:</b> Program Coordinador
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (803) 898-2696
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 898-2696
<b>REFERENCE TYPE:</b> Professional	<b>NAME:</b> SHOTASHA MILHOUSE	<b>POSITION:</b> Accounts Payable
<b>ADDRESS:</b> (Street, City, State, Zip Code)		<b>PHONE NUMBER:</b> (803) 608-6823
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b> (803) 608-6823

**Agency-Wide Questions**

- 1. Have you ever been convicted of a criminal offense? Note: Omit minor vehicle violations and any offense committed before your 17th birthday which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not necessarily an absolute bar to state government employment in all cases. Each conviction is evaluated individually.**  
No
- 2. If yes, please list charge(s), indicate where you were convicted, the date, and the disposition status of the conviction.**
- 3. Are you currently employed by the State of South Carolina?**  
Yes
- 4. If so, in which agency do you currently work?**  
SC Department of Corrections
- 5. Do you have any relatives employed with the State of South Carolina?**  
Yes
- 6. If yes, please provide below the name(s), relationship, and agency.**  
Peter Peeples SCDC  
Abraham Peeples SCDC
- 7. Have you ever been terminated or forced to resign from any job?**  
No
- 8. If yes, please explain.**
- 9. Can you, after employment, submit proof of your legal right to work in the United States?**  
Yes
- 10. Give the name, address, and phone number of two people, not relatives, who are familiar with your work.**  
Connie Reaves 741-7272  
  
Deborah Garrell 893-2151
- 11. Have you been separated from South Carolina State Government employment as a part of a reduction-in-force within the past 12 months?**  
No

**Job Specific Supplemental Questions**

- 1. Supplemental questions are considered part of your official application. Any misrepresentation will result in your disqualification from employment. Please complete the State application to include all current and previous work history and education. A resume will not be accepted nor reviewed to determine if an applicant has met the qualifications for the position. I have read and acknowledge the above statement.**  
Yes
- 2. Do you have at least a bachelor's degree?**  
Yes
- 3. Do you have relevant program experience, to include database operations consisting of data management, collection, entry, analysis, software, and etc.?**  
Yes
- 4. If you answered yes to question 3, please briefly describe your experience?**  
Data collection and entry with Palmetto Health Richland and SC Department of Health and Human Services
- 5. Do you have experience in human and/or constituent services?**  
Yes
- 6. Are you willing to travel in and out of state?**  
Yes
- 7. Are you able to occasionally lift, carry, push, and/or pull up to 20 lbs.?**  
Yes
- 

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button as my electronic signature, I hereby certify that every statement I have made in this application and accompanying material is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. Student Loan: State law (59-111-50) prohibits employment with the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By clicking on the "Accept" button as my electronic signature, I certify that I am not currently in default on any student loan. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the State of South Carolina and will not be returned.

Authority to Release Information: By clicking on the "Accept" button as my electronic signature, I consent to the release of information to authorized officers, agents, and/or employees of the State of South Carolina which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I consent to authorize appropriate officers, agents, and/or employees of the State to make inquiries of third parties in connection with my application for employment. I further release the organization, educational entity, present and former employers, law enforcement organizations, all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment. If I requested that my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer prior to beginning work.

I understand that I must notify the agency with the vacant position of any changes in my name, address, or phone number.

This application was submitted by Kimberely M Yon on 10/21/14 12:49 PM

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_