

THE CITY OF ANDERSON, SOUTH CAROLINA

PERSONNEL DEPARTMENT

JOB POSTING APPLICATION

NAME _____ DATE SUBMITTED _____

PRESENT POSITION _____ DEPARTMENT _____

HOW LONG HAVE YOU BEEN IN THIS POSITION? _____ DATE OF HIRE _____

POSITION APPLYING FOR _____ DEPARTMENT _____

QUALIFICATIONS (State related experience, special skills, training, etc)

HIRING SUPERVISOR

Applicant Approved? Yes _____ No _____ Date of Interview _____

State Reasons _____

Please print your name _____ Signature _____ Date _____

PRESENT SUPERVISOR

Applicant Recommended? Yes _____ No _____

State Reasons _____

Please print your name _____ Signature _____ Date _____

The City of Anderson, South Carolina

Personnel Department

Job Posting Applicant

Name _____

Department _____

Requested Job Title _____

Has been evaluated with the following results:

_____ I am pleased to offer you the position for which you have applied. You will be contacted for further instructions.

_____ Thank you for applying, but you were not selected.

_____ The posted position has been canceled.

_____ Your request was received too late.

_____ You voluntarily withdrew your request.

_____ Other _____

Department Head (Please Print)

Department Head Signature Date

Listed below are some training, education, or additional experience possibilities which might be helpful to you:
