



OPERATION PALMETTO EMPLOYMENT

OPERATIONPALMETTOEMPLOYMENT.SC.GOV

Event: _____

Date: _____

INTAKE FORM | DATA SHEET

PRIVACY ACT STATEMENT

PURPOSE: To provide the SCNG Employment Services Coordinator(s) a ready source of information for the purpose of gathering and inputting Veteran/Soldier data into the secured and approved SCNG employment database. This disclosure is voluntary, with no effect for not providing information. This document and the attachments are being maintained in the Employment Service Coordinators office in a secured filing system and facility as required by HIPPA and the Privacy Act.

Name: _____ Rank: _____ MOS: _____
LAST, FIRST, MIDDLE INITIAL

Military Affiliation: National Guard Reserves Active Duty Prior Service Spouse / Family Member

Branch: Army Air Force Navy Marines Coast Guard

DOB: _____ Sex (circle one): M or F
MM/DD/YYYY

Civilian Email: _____

Cell phone (w/ area code): _____ Home phone (w/ area code): _____

Home Address: _____ Mailing Address: _____
STREET (if different)
CITY, STATE AND ZIP CODE CITY, STATE AND ZIP CODE

CHECK THE BOX THAT BEST DESCRIBES YOUR SITUATION CURRENTLY, OR WHEN YOU COME OFF MILITARY ORDERS.

Employed: Unemployed: Underemployed: In School:

Employer Name: _____ How long have you been unemployed? _____

THIS SECTION IS FOR CURRENTLY SERVING MEMBERS OF THE MILITARY.

Unit: _____ Unit City: _____ MSC: _____

Commander: _____ Readiness NCO's Name/Phone: _____

Please be sure to fill out additional information on the reverse side.

Are you registered with SC Works (the unemployment office)? *Circle one.* Y or N

Are you receiving unemployment benefits? Y or N

Have you put in any applications recently? Y or N

If so, where and when? _____

Do you have a current résumé? Y or N Would you like assistance with composing or updating your résumé? Y or N

What shifts are you willing to work? *Check all that apply.* 1st 2nd 3rd Rotating

What is the minimum hourly pay or annual salary you will accept? \$ _____ hourly annually

How far are you willing to drive for a job? _____ minutes and/or _____ miles

Are you willing to relocate to another area? Y or N

Which fields do you have experience in? *Check all that apply.*

- | | | |
|---|--|---|
| <input type="checkbox"/> Accounting / Tax / Finance | <input type="checkbox"/> Food Services / Chef | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Admin / Human Resources / Clerical | <input type="checkbox"/> Health & Safety | <input type="checkbox"/> Power / Utilities (Line Servicing) |
| <input type="checkbox"/> Automotive Mechanic | <input type="checkbox"/> Heavy Equipment Operator | <input type="checkbox"/> Robotics |
| <input type="checkbox"/> Broadcast Media | <input type="checkbox"/> Law Enforcement / Security / Criminal Justice | <input type="checkbox"/> Sales |
| <input type="checkbox"/> Business | <input type="checkbox"/> Logistics | <input type="checkbox"/> Shipping / Receiving |
| <input type="checkbox"/> Chemical / HAZMAT | <input type="checkbox"/> Loss Prevention | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Computer Science / IT / Telecommunications | <input type="checkbox"/> Maintenance (Mechanical / Electrical) | <input type="checkbox"/> Teaching / Education |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Management | <input type="checkbox"/> Training / Operations |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Truck Driving |
| <input type="checkbox"/> Customer Service / Retail | <input type="checkbox"/> Medical / Healthcare | <input type="checkbox"/> Warehouse |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Ministry | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Fitness / Personal Trainer | <input type="checkbox"/> Legal / Paralegal | _____ |
| | | _____ |
| | | _____ |

Of your top three items checked above: what kind of experience, and for how long? _____

What sort of position are you looking for? _____

Have you taken any college courses? Y or N

If so, how many credit hours or what degree level have you completed? _____

What school do/did you attend? _____

What is/was your major? _____

How did you hear about us? _____