

**DORCHESTER COUNTY SENIOR CITIZENS TAX WORK-OFF PROGRAM
APPLICATION**

Applicant Name _____ Phone# _____ DOB ____/____/____

Name Property is in: _____ Parcel (TMS)# _____ - _____ - _____ - _____

Address _____ City _____ Zip _____

Emergency Contact _____ Emergency Phone# _____

Social Security Number _____ - _____ - _____

Applicants work at the current minimum wage rate as independent contractors. Dorchester County will attempt to place tax work-off applicants into positions according to their skills and dates of application. This application is no guarantee of contract employment.

PREVIOUS PLACEMENT FOR SCTWOP?

Former or current occupation: _____

Hobbies/Interest: _____

Do have skills in any of the following?

Clerical _____	Computer _____	Financial/Bookkeeping _____
Typing _____	Engineering _____	Construction/Repair _____
Filing _____	Maintenance _____	Management _____
Research/Evaluation _____	Graphic Arts _____	Other _____

Do you prefer to work: Indoors _____ Outdoors _____ Time Available: Half Day ____ Full Day ____

Days Available: Every Day ____ or M ____ T ____ W ____ Th ____ F ____

Location Preference: St. George _____ Summerville _____

Could transportation present a problem? _____

Do you have any health conditions or physical problems that we should be aware of (trouble climbing stairs, lifting, etc)? _____

Comments: _____

Office Use Only →