

AIKEN COUNTY

SENIOR CITIZENS TAX WORK-OFF PROGRAM APPLICATION

Applicant Name _____ Phone# _____ DOB _____

Name Property is in: _____ Parcel# _____

Address _____ City _____ Zip _____

Emergency Contact _____ Emergency Phone# _____

Applicants work at the current minimum wage rate as independent contractors. Aiken 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.

Former or current occupation _____

Hobbies/Interest _____

Do have skills in any of the following?

Clerical _____ Financial/Bookkeeping _____ Maintenance _____

Typing _____ Engineering _____ Construction/Repair _____

Filing _____ Computer _____ Management _____

Graphic Arts _____ Research/Evaluation _____

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

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

Seasonal Preference: _____ Location Preference: _____

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: _____

Return this form to the:
Aiken County Administrator's Office
Senior Citizen's Tax Work-Off Program
828 Richland Avenue West
Aiken, SC 29801