USC Temporary Application for Administrative Assistant

Submitted January 11, 2024 at 12:37 PM (confirmation number: CN000617331)

Personal Information

For security purposes, this system automatically logs you off when it senses no activity for 60 minutes. Please click either the **Next** button or you can go to different pages of the application by selecting the page from the dropdown menu and clicking **GO** button every 60 minutes in order to avoid losing your data.

Contact Information

Legal First Name Zechariah

Legal Middle Name Clarence Jacob

Legal Last Name Fisher-Coleman

Preferred Name Zach

Address Line 1 1051 southern drive Apt 202C

Address Line 2

City Columbia

County of Residence Richland

State SC

Zip Code 29229-8176

Primary Phone 8033973771

Secondary Phone

Email zechfc@gmail.com

Linkedin Url www.linkedin.com/in/zechariah-fisher-coleman-b1a3b0218

General Information

Citizenship/Employee

Sponsorship

I am a U.S. Citizen.

Are you presently

employed by the State of

SC?

No

If yes, provide the state

agency.

N/A

Are you presently employed by the University of South Carolina in a non-student employment category?

No

Have you ever been discharged or forced to resign for misconduct or unsatisfactory service from any job?

No

Do you have any relatives employed by the University of South Carolina?

No

If yes, please provide name, relationship, department and campus.

USC ID, if applicable Y22288062

Referral Source Indeed

Educational History

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Please enter educational history beginning with the most recent by clicking the **Add Education Entry** button. If not applicable, put N/A.

Education

School Name University of South Carolina

School City Columbia

School State SC

School Country United States of America

Major Accounting

Degree Type Master's

Have you graduated? No

If you are currently enrolled, what is your expected date of graduation?

12/16/2024

Training and Additional Information

Other Education/Training/Skills Computer Science Minor, Data Analytics Concentration

Computer Skills (hardware or

software)

Excel VBA, JAVA, SQL, Alteryx, PowerBI, Tableau

Current Professional

Licenses/Certifications/Memberships

IMA membership

Other Skills or Talents Organization, Time management, Communication

What foreign languages do you

speak and/or read?

Indicate the highest education you

have completed.

3 Years + College

Certification

Education Certification Yes

Employment History

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Please enter your employment history beginning with the most recent by clicking the Add Employment Entry button. If not applicable, put N/A.

Please Note: A Resume/CV will not be accepted in place of employment history. Check your application thoroughly before submitting to ensure all relevant fields are completed and the information you have supplied is accurate. An incomplete application can exclude you for consideration.

Employment

Position Title Freight Associate

Employer Name Home Depot

285 Forum Drive **Employer Address**

Employer City Columbia

SC **Employer State**

Employer Country United States of America

Employer Contact Phone (803)419-9336

Supervisor Name Jason Werny

Employment Type Part Time

Employment Start Date 07/07/2021

Employment End Date

Duties Tasked with unloading trucks, sorting the contents, and then moving the products to their

respective location within the store.

Ending Base Salary 10,000

Reason For Leaving Currently employed by them

Is this your current

employer?

Yes

If you become a finalist, may we contact this

employer?

Yes

Certification

Employment Certification Yes

Position Related Internship/Volunteer Information

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Please enter your Internship/Volunteer Information history beginning with the most recent by clicking the Add Internship/Volunteer Information Entry button.

Internship/Volunteer Information

Employer/Organization Name

Eaton

Employer/Organization Address

11642 Old Baltimore Pike

Employer/Organization

City

Beltsville

Employer/Organization

State

MD

Employer/Organization

Contact Phone

4703508627

Supervisor Name

Thomas Dietch

Plant Financial Analyst

Internship/Volunteer Title Internship/Volunteer Start

Date

05/22/2023

Internship/Volunteer End

Date

08/11/2023

Was this a paid internship or volunteer experience?

Paid

Average Hours Worked

Per Week

40

Duties

Tasked with creating dashboards for material usage variance, earned hours for research and development, and sales using PowerBI. As well as automating the dashboards by linking the PowerBi to a SQL database on Impala. Helped automate and implement a new process for streamlining the physical inventory asset count, by implementing QR based stickers. Helped plan the forecast for next year's budget.

Employer/Organization Name

Eaton

Employer/Organization

Address

24 E Glenolden Ave

Employer/Organization

City

Glenolden

Employer/Organization

State

PA

Employer/Organization Contact Phone

6105224918

Supervisor Name

Charlie Ross

Internship/Volunteer Title

Plant Financial Analyst

Internship/Volunteer Start

05/01/2023

Date

Internship/Volunteer End

Date

08/01/2023

Was this a paid internship or volunteer experience?

Paid

Average Hours Worked

Per Week

40

Duties

Tasked with automating certain tasks in excel using excel VBA. Analyzed data and created reports discussing possible trends within the data, as well as made reports and graphs to display the data. Reviewed journal entries to ensure that were accurate, as well as manual data entry. Worked with an end-to-end team in India to go over financial data and ensure that the plant was meeting its financial and production goals.

Certification

Internship/Volunteer Certification

Yes

Voluntary Self-Identification of Disability

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Voluntary Self-Identification of Disability

Form CC-305 OMB Control Number 1250-0005 Expires 04/30/2026

Name Zechariah C.J Fisher-Coleman

Date 12/06/2023

Why are you being asked to Complete this form?

We are a federal contractor or subcontractor. The law requires us to provide equal employment opportunity to qualified people with disabilities. We have a goal of having at least 7% of our workers as people with disabilities. The law says we must measure our progress towards this goal. To do this, we must ask applicants and employees if they have a disability or have ever had one. People can become disabled, so we need to ask this question at least every five years.

Completing this form is voluntary, and we hope that you will choose to do so. Your answer is confidential. No one who makes hiring decisions will see it. Your decision to complete the form and your answer will not harm you in any way. If you want to learn more about the law or this form, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

How do you know if you have a disability?

A disability is a condition that substantially limits one or more of your "major life activities." If you have or have ever had such a condition, you are a person with a disability. **Disabilities include, but are not limited to:**

- Alcohol or other substance use disorder (not currently using drugs illegally)
- Autoimmune disorder, for example, lupus, fibromyalgia, rheumatoid arthritis, HIV/AIDS
- Blind or low vision
- Cancer(past or present)
- Cardiovascular or heart disease
- Celiac disease
- Cerebral palsy
- Deaf or serious difficulty hearing
- Diabetes
- Disfigurement, for example, disfigurement caused by burns, wounds, accidents, or congenital disorders

- Epilepsy or other seizure disorder
- Gastrointestinal disorders, for example, Crohn's Disease, irritable bowel syndrome
- Intellectual or developmental disability
- Mental health conditions, for example, depression, bipolar disorder, anxiety disorder, schizophrenia, PTSD
- Missing limbs or partially missing limbs
- Mobility impairment, benefiting from the use of a wheelchair, scooter, walker, leg brace(s) and/or other supports

- Nervous system condition for example, migraine headaches, Parkinson's disease, multiple sclerosis (MS)
- Neurodivergence, for example, attention-deficit/hyperactivity disorder (ADHD), autism spectrum disorder, dyslexia, dyspraxia, other learning disabilities
- Partial or complete paralysis (any cause)
- Pulmonary or respiratory conditions, for example, tuberculosis, asthma, emphysema
- Short stature (dwarfism)
- Traumatic brain injury

Please select one of the options:

No, I do not have a disability and have not had one in the past

PUBLIC BURDEN STATEMENT

According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.

Reasonable Accommodation Notice

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Reasonable Accommodation Notice

The University of South Carolina is an equal opportunity employer and is required by federal law to provide a reasonable accommodation to qualified individuals with disabilities. Please tell us if you require an accommodation to apply for a job or perform a job. The disclosure of this information is voluntary.

Reasonable Accommodations

N/A

Voluntary Self-Identification of "Protected" Veteran Status

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Why Are You Being Asked to Complete This Form?

This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA). VEVRAA requires Government contractors to take affirmative action to employ and advance in employment protected veterans. To help us measure the effectiveness of our outreach and recruitment efforts of veterans, we are asking you to tell us if you are a veteran covered by VEVRAA. Completing this form is completely voluntary, but we hope you fill it out. Any answer you give will be kept private and will not be used against you in any way.

For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp

How Do You Know if You Are a Veteran Protected by VEVRAA?

Contrary to the name, VEVRAA does not just cover Vietnam Era veterans. It covers several categories of veterans from World War II, the Korean conflict, the Vietnam era, and the Persian Gulf War which is defined as occurring from August 2, 1990 to the present.

If you believe you belong to any of the categories of protected veterans please indicate by checking the appropriate box below. The categories are defined on the next page and explained further in an "Am I a Protected Veteran?" infographic provided by OFCCP.

Please select one of the

I am not a protected veteran.

options:

Zechariah C.J Fisher-Coleman

Date

Name

12/06/2023

What Categories of Veterans Are "Protected" by VEVRAA?

"Protected" veterans include the following categories: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. These categories are defined below.

- 1. A "disabled veteran" is one of the following:
 - a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or
 - · a person who was discharged or released from active duty because of a service-connected disability.
- 2. A "recently separated veteran" means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- 3. An "active duty wartime or campaign badge veteran" means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- 4. An "Armed forces service medal veteran" means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Voluntary Demographics Information

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Voluntary Demographic Information

Gender Male

Are you Hispanic or

Nο Latino?

Black or African American What is your race?

Are you retired from the State of South Carolina?

No

Criminal History Information

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Criminal History

Have you ever been convicted of any offense other than a minor traffic violation? This includes felonies or misdemeanors, even if you paid a fine or received a suspended sentence. An example of a common misdemeanor is..."Worthless Check".

Criminal History Detail

If yes, list every conviction since you were 18 years of age or older even if you believe you made restitution, paid a fine, etc. You must list all convictions. A "yes" answer to this question will not necessarily bar you from employment. The nature, severity, and date of the offense in relation to the position for which you are applying will be considered.

Documents Needed To Apply

You may be asked to attach any optional or required documents. If you begin applying, but do not finish attaching all of your documents, the documents that you have attached will be held in the system.

- Resume (PDF | 662 KB)
- List of References and Contact Information (PDF | 241 KB)
- Cover Letter (PDF | 410 KB)

References

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Please enter your reference information by clicking the Add References Entry button.

When finished, please click either the Next button or you can go to different pages of the application by selecting the page from the dropdown menu and clicking GO button every 60 minutes in order to avoid losing your data.

References

Name Charlie Ross

Email CharlieRoss@eaton.com

Phone Number 6105224918

How do you know this

reference?

Former Manager

Name Thomas Dietrich

Email ThomasRDietrich@eaton.com

Phone Number 4703508627

How do you know this

reference?

Former Manager

Name Laura Self

Email LAURA.SELF@moore.sc.edu

Phone Number

How do you know this reference?

area of employment?

Accounting Professor

Supplemental Questions

1.	* Do you have at least a Bachelor's degree, or High School diploma and 4 years of work experience that is directly related to the
	area of employment?
	Do you have at least a Bachelor's degree, or High School diploma and 4 years of work experience that is directly related to the

Yes

No

Certification

I certify that all statements made on this application and the information contained in all other documents I have submitted in support of my application are true and complete to the best of my knowledge. I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. I understand and agree that any misrepresentation, omission, or falsification of information provided constitutes grounds for immediate dismissal and may disqualify me for employment at this institution. I understand that any job offer or subsequent employment may be conditioned on the institution's receipt of a satisfactory background inquiry. I agree to cooperate in such inquiry and understand that providing misleading information may result in disqualification and/or termination. By electronically submitting this application, I certify that I have read and agree with these statements and conditions. By electronically submitting this application, I agree to these conditions.

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.

If hired, I understand that I will be required to participate in mandatory direct deposit of my paycheck.

I certify that I have read and agree with these statements.

Please enter your initials to verify your identity.

I certify that I have read and agree with these statements.

Please enter your initials to verify your identity. zfc