EMPLOYMENT APPLICATION

Walterboro Police Department

242 Hampton St., Walterboro, SC, 29488
Telephone: (843)-549-1811

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, veteran status, or disability.

PLEASE TYPE OR PRINT ALL ANSWERS IN BLACK OR BLUE INK

1. PERSONAL DATA

Name: _____
(Last) (First) (Middle)

List other names by which you have been known: _____ _____
Social Security Number

Address: _____
(Street) (City/Town) (County) (State) (Zip Code)

Phone (Include Area Code) Home: (_____) _____ Business: (_____) _____

POSITION APPLIED FOR _____ Date Available to Work: _____

2. EDUCATION AND TRAINING

CIRCLE THE HIGHEST GRADE COMPLETED:
7 or less 8 9 10 11 12 13 14 15 16 17 18

DID YOU GRADUATE? ☐YES ☐NO

HIGH SCHOOL EQUIVALENT TEST (GED)
DATE/STATE AWARDED _____

TYPE OF SCHOOL	SCHOOL NAME CITY AND STATE	TYPE DIPLOMA OR DEGREE AWARDED	MAJOR FIELD	GRADE AVERAGE
LAST HIGH SCHOOL ATTENDED				
COLLEGES ATTENDED				
OTHER (MILITARY, TRADE, BUSINESS, SECRETARIAL, GRADUATE,SCHOOL, ETC.)				

SPECIAL QUALIFICATIONS: (INCLUDE TECHNICAL/PROFESSIONAL LICENSES AND NUMBERS, ACADEMIC AND/OR PROFESSIONAL CREDENTIALS.)

3. SKILLS

TYPING _____ CWPM SHORTHAND _____ WPM OTHER: _____

COMPUTER EXPERIENCE: _____

SOFTWARE USED: _____

4. DRIVER'S LICENSE

DO YOU POSESS A VALID DRIVER'S LICENSE?		STATE	DRIVER'S LICENSE NUMBER	CLASS
☐ YES	☐ NO			

5. EMPLOYMENT HISTORY

In the spaces provided below, give your employment history beginning with your present or most recent employer and list all positions held including military, part-time, summer, volunteer work, and any periods of unemployment. An explanation of any period of unemployment should be included under item 9.

A. NAME AND ADDRESS OF COMPANY	FROM (MO./YR.)	TO (MO./YR.)	REASON FOR LEAVING	NAME OF SUPERVISOR
	TITLE OF POSITION AND DESCRIPTION OF DUTIES:			
TELEPHONE NUMBER ( )				

B. NAME AND ADDRESS OF COMPANY	FROM (MO./YR.)	TO (MO./YR.)	REASON FOR LEAVING	NAME OF SUPERVISOR
	TITLE OF POSITION AND DESCRIPTION OF DUTIES:			
TELEPHONE NUMBER ( )				

C. NAME AND ADDRESS OF COMPANY	FROM (MO./YR.)	TO (MO./YR.)	REASON FOR LEAVING	NAME OF SUPERVISOR
	TITLE OF POSITION AND DESCRIPTION OF DUTIES:			
TELEPHONE NUMBER ( )				

(This section continued on next page)

(Section continued from previous page)

D. NAME AND ADDRESS OF COMPANY	FROM (MO./YR.)	TO (MO./YR.)	REASON FOR LEAVING	NAME OF SUPERVISOR
	TITLE OF POSITION AND DESCRIPTION OF DUTIES:			
TELEPHONE NUMBER ( )				

May we contact the employers listed above? ☐ YES ☐ NO. If not, indicate by a letter which one(s) you do not wish us to contact:

6. **CRIMINAL, TRAFFIC, AND/OR CIVIL COURT RECORD:** Have you ever been convicted of, pled guilty to, or pled nolo contendere to an offense other than for a minor traffic violation?

☐ YES ☐ NO If answer is YES, give complete details under item 9. (A conviction will not necessarily exclude you from employment consideration.)

7. **HAVE YOU EVER BEEN AN APPLICANT OR EMPLOYEE OF THE CITY OF WALTERBORO?**

If applicant: - Date of application: _____ Position applied for: _____

If employee: - Employment dates: _____ Position held: _____

8. **LIST ANY RELATIVES OF YOURS CURRENTLY WORKING FOR THE CITY OF WALTERBORO:**

NAME	RELATIONSHIP	DEPARTMENT

9. **LIST THREE PERSONAL REFERENCES NOT RELATED TO YOU:**

NAME	ADDRESS	PHONE #
1.		
2.		
3.		

10. SPACE FOR DETAILED ANSWERSTO OTHER QUESTIONS

ITEM NUMBER	NARRATIVE

GENERAL INFORMATION

IN ORDER TO PREVENT A DELAY IN THE PROCESSING OF YOUR APPLICATION, PLEASE BE SURE YOU HAVE SIGNED AND DATED THIS FORM AND ANSWERED EVERY QUESTION CLEARLY AND COMPLETELY.

Each applicant considered for employment in a Walterboro City Police position must meet the minimum requirements established for that position. This may include the successful completion of verbal and written examinations, a polygraph examination, a psychological examination, and an employment physical (which includes a medical examination, laboratory tests, and a drug screen).

In compliance with Title VI of the Consumer Protection Act, this is to advise you that as part of our processing of employment applications, an inquiry may be made concerning an applicant's credit standing, general reputation, character, and personal characteristics. This information may be from previous employers, personal references, law enforcement agencies, and/or consumer reporting agencies. Upon an applicant's written request, additional information as to the nature and scope of any report will be provided.

SIGNATURE AND CERTIFICATION

I hereby affirm that the information provided on this application (and accompanying resume and/or documentation, if any) is true and complete to the best of my knowledge. I also understand that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date. I further understand that this application becomes the property of the City of Walterboro and will not be returned.

I authorize persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying resume and/or documentation, if any) to provide any relevant information that may be required to arrive at an employment decision.

I understand that my employment can be terminated, with or without cause, at any time at the discretion of either the City of Walterboro or myself. I understand that no management official other than the Chief of Police has any authority to enter into any agreement contrary to the foregoing or make any oral assurance or promise of continued employment.

Applicant's Signature _____ Date _____

WE THANK YOU FOR SUBMITTING THIS APPLICATION FOR EMPLOYMENT WITH THE WALTERBORO POLICE DEPARTMENT, AN EQUAL OPPORTUNITY EMPLOYER.

The U.S. Government requires that we verify your eligibility for U.S. employment. As evidence of eligibility and identity, the government requires new hires to submit originals of one document from Group "A" or one document from BOTH Groups "B" and Group "C" below.

Please check the evidence you will submit to us, should an offer of employment be made. *UNDER FEDERAL LAW, YOUR INABILITY TO PRODUCE ADEQUATE PROOF OF ELIGIBILITY AND IDENTITY (WITHIN 3 DAYS OF EMPLOYMENT) WILL RESULT IN YOUR TERMINATION FROM CITY EMPLOYMENT.*

GROUP A	GROUP B	GROUP C
☐ U.S. Passport	☐ State Driver's License with photograph	☐ Social Security Card. (Original)
☐ Certificate of U.S. Citizenship	☐ U.S. Military Card	☐ U.S. Birth Certificate bearing seal or other certification
☐ Certificate of Naturalization	☐ Other form of State I.D. with photo	☐ Other document approved by Attorney General authorizing employment by the applicant in the U.S.
☐ Unexpired foreign passport with unexpired work authorization endorsement of the attorney General	☐ Photo I.D. approved by Attorney General	☐ Other. Specify:
☐ Alien Registration card with Photo	☐ Other. Specify:	
☐ Other. Please Specify:		

Applicant Data Record

City of Walterboro
Personnel Department
248 Hampton Street
Walterboro, SC 29488
(PLEASE PRINT)

Qualified applicants are considered for all positions and employees are treated during employment process and employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap.

As employers / government contractors, we comply with governmental regulations and affirmative action responsibilities.

Solely, to help us comply with government record keeping, reporting and other legal requirements please fill out the Data Record.

This Data is for periodic government reporting and will be kept in a Confidential File.

Position Applied for _____

Referral source: ___Advertisement ___Friend ___Relative

___Employment Agency ___Other

Name: Last	First	Middle	Phone Number
Address: Number	Street	City	State Zip Code

Affirmative Action Survey

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applicants. This data is for analysis and affirmative action only. Submission of information about a handicap is voluntary.

Check one: ___ Male ___ Female

Check one of the following:

Race / Ethnic: ___ White ___ Black ___ Hispanic

___ American Indian / Alaskan Native ___ Asian / Pacific Islander

Check if any of the following are applicable:

___ Vietnam Era Veteran ___ Disabled Veteran ___ Handicapped Individual

Applicant Information Sheet

Conditional Offer of Employment

- Each applicant who successfully completes all phases of the employment process will be offered a position with Walterboro Public Safety.

Phases of the Employment Process

- Completion of the Application
- Nelson-Denny Reading Test
- Officer Candidate Test
- Completion of the Applicant Questionnaire
- Background Investigation (includes credit check, drivers license check, criminal history check, and previous employment check)
- Polygraph Examination
- Oral interview
- Psychological Examination

After completion of the application process and Conditional Offer of Employment is offered, the applicant will submit to a Medical Examination and Drug Test.

Applicant may keep this page. It is not required to be submitted with the application.

Walterboro Police Department
Authority for Release of Information

THE LANGUAGE USED IN THIS DOCUMENT DOES NOT CREATE AN EMPLOYMENT CONTRACT, EXTEND ANY CONTRACTUAL RIGHTS, OR PROVIDE ANY ENTITLEMENTS BETWEEN THE APPLICANT AND THE AGENCY. ANY ASSURANCES OR DECLARATIONS, WHETHER WRITTEN OR ORAL, WHICH ARE CONTRARY TO OR INCONSISTENT WITH THE TERMS HEREIN DO NOT CREATE A CONTRACT OF EMPLOYMENT AND ARE UNENFORCEABLE. THE AGENCY RESERVES THE RIGHT TO REVISE THE CONTENT OF THIS DOCUMENT, IN WHOLE OR IN PART, AT ANY TIME.

To: Concerned person or Authorized Representative of any Organization, Institution or Repository

Applicant's Name _____

Date of Birth _____

_____

Social Security # _____

I respectfully request and authorize you to furnish the Walterboro Police Department any and all information that you may have concerning my work and/or employment record, school record, reputation, financial and credit status and military records. Please include any records of detainment, arrest, and conviction by any law enforcement agency including all information of a confidential or privileged nature, and Photostats of the same if requested. This information is to be used to assist the Walterboro Police Department in determining my qualifications and fitness for the position I am seeking.

I hereby release you, your organization, or others from any liability or damage which may result from furnishing the information requested above.

Applicant's Signature _____ **Date** _____

Address _____

Walterboro Police Department
Notice of Obtaining Consumer Report

THE LANGUAGE USED IN THIS DOCUMENT DOES NOT CREATE AN EMPLOYMENT CONTRACT, EXTEND ANY CONTRACTUAL RIGHTS, OR PROVIDE ANY ENTITLEMENTS BETWEEN THE APPLICANT AND THE AGENCY. ANY ASSURANCES OR DECLARATIONS, WHETHER WRITTEN OR ORAL, WHICH ARE CONTRARY TO OR INCONSISTENT WITH THE TERMS HEREIN DO NOT CREATE A CONTRACT OF EMPLOYMENT AND ARE UNENFORCEABLE. THE AGENCY RESERVES THE RIGHT TO REVISE THE CONTENT OF THIS DOCUMENT, IN WHOLE OR IN PART, AT ANY TIME.

To: Applicant's Name _____

Date of Birth _____

Social Security # _____

In connection with your application for employment, the Walterboro Police Department may obtain a consumer report (as defined by the Fair Credit Reporting Act) concerning you from a consumer reporting agency. This report will be used for employment purposes.

I have read and understand the above disclosure and hereby authorize the Walterboro Police Department to obtain a consumer report.

Applicant's Signature _____ **Date** _____

Address _____

Home phone _____

Work phone ( ) _____

Other Contact Numbers _____ ( ) _____

Primary Cell Phone **Alternate Number**

E-Mail Address: _____

The City of Walterboro is an equal opportunity employer and provider.

Walterboro Police Department
Applicant Waiver

THE LANGUAGE USED IN THIS DOCUMENT DOES NOT CREATE AN EMPLOYMENT CONTRACT, EXTEND ANY CONTRACTUAL RIGHTS, OR PROVIDE ANY ENTITLEMENTS BETWEEN THE APPLICANT AND THE AGENCY. ANY ASSURANCES OR DECLARATIONS, WHETHER WRITTEN OR ORAL, WHICH ARE CONTRARY TO OR INCONSISTENT WITH THE TERMS HEREIN DO NOT CREATE A CONTRACT OF EMPLOYMENT AND ARE UNENFORCEABLE. THE AGENCY RESERVES THE RIGHT TO REVISE THE CONTENT OF THIS DOCUMENT, IN WHOLE OR IN PART, AT ANY TIME.

I, _____ , have submitted application with the Walterboro Police Department, (WPD)

for the position of Police Officer. I am currently employed by

_____ as a/an _____ . _____
(Employer) (Title) **(Initial)**

In consideration of the opportunity to submit an application for employment with WPD and review of my application by, WPD, I hereby agree as follows:

I fully understand that WPD will conduct a complete and thorough background investigation to ensure that I have the necessary skills, abilities and integrity to perform the required duties of the position with WPD. I recognize and understand that this background investigation will include but not be limited to matters pertaining to personal history, use of illegal drugs, criminal misconduct, domestic violence, and any other behaviors considered by WPD to have a negative impact upon the position. I also fully understand that information learned by WPD may result in my not being hired.

_____
(Initial)

Recognizing all of the above, I hereby consent to WPD conducting the aforesaid background investigation and further consent to WPD disclosing the findings and results of this comprehensive background investigation to my current employer as WPD deems appropriate. I understand that these disclosures may result in adverse consequences for me with my current employer, including but not limited to termination from employment, negative references for future employment, and possible criminal prosecution. I agree to hold WPD harmless from any and all claims made by me as a result of the release of this information.

_____
(Initial)

I have initialed each of the above paragraphs and have signed this Waiver at the bottom of this page. I fully understand this Waiver, have been offered the opportunity to withdraw my application for employment with WPD to avoid the foregoing background investigation/disclosures and have declined to do so, and voluntarily elect to continue with the application process under the above-stated terms and conditions.

_____
(Initial)

_____ _____
Applicant signature **Date**

The City of Walterboro is an equal opportunity employer and provider.