

Santee Police Department

Post Office Box 1220 Santee, SC 29142

Application for Employment

Print Name			SSN	
DOB Telephone #			_	
Date Application Completed	l			
PLEASE RETURN ALL COM	PLETED APPLICATIONS TO:		Police Department	

Minimum Requirements:

- You must be a United States citizen.
- You must be 21 years of age.
- You must possess a high school diploma or GED.
- You must be able to perform all essential job functions.
- You must submit a five (5) year driving record free of serious violations.
- You may be required to relocate to within 30 miles of the Town of Santee.
- You must submit a drug screening test.
- You must have a criminal record free of felony charges or crimes of moral turpitude.
- You may be asked to submit to a medical examination.
- You must provide official proof of your law enforcement status (certification) if applicable.

PLEASE NOTE:

ONE (1) COMPLETE APPLICATION INCLUDES THE FOLLOWING DOCUMENTS:

- Completed Santee Police Department Employment Application.
- Proof of current law enforcement certification from the criminal justice academy.
- A copy of your high school diploma or state GED Certificate.
- A professional resume and cover letter with your salary requirements.
- A copy of your DD214 or military discharge, if applicable. (If you are still active duty, please attach a note to your application stating your discharge date. Please forward a copy of your DD214 when received.
- A copy of your birth certificate (You must include a copy of Certificate of Naturalization if you became a United States citizen through the naturalization process).
- A current, full-length (head-to-toe) photograph (Driver's license pictures are not acceptable).
- A certified copy of driving record. (Driving record must cover all states where a license was held over the past five (5) years; South Carolina residents must provide a ten (10) year certified driving record).

PLEASE DO NOT SUBMIT YOUR APPLICATION UNTIL IT IS COMPLETE

Please read the following instructions carefully:

Any falsified information will result in the rejection of your application. Any incomplete or omitted answers to questions may delay the processing of your application.

- Type or print black ink.
- Answer all questions. If a question does not apply to you, write N/A by the number.
- If the space available is not sufficient, use a separate sheet of paper to complete your answer.

PLEASE COMPLETE THE FOLLOWING:

1					
LAST NAME	E	FIRST	MIDDLE	MAIDEN	
2. Social S	ecurity Number				
3. List ALL	other names you have	used. Include circumst	ances and dates wh	en used.	
4. Date of	Birth	Place	e of Birth		
5. Weight		Heig	ht		
6. Beginni	ng with present addres	ss, list ALL previous plac	ces of residence sinc	e age 17. (Attach a separate p	age, if necessary
FROM Month/Year	TO Month/Year	ADDRESS		CITY	STATE
7. Have yo	ou ever been dismissed	from school or been su	ubject to any discipli	nary action, such as scholastic	probation?
Yes	S No No				
If yes, p	please indicate circums	tances of rules infraction	on and action taken	by school or university.	
8. List the	names of three (3) pro	fessional references.			
Name _			Contact nu	umber	
Home A	Address				
Occupa	ation		Years Know	wn	
Name ₋			Contact nu	umber	
Home /	Address				
Occupa	ation		Years Know	wn	

Name			Contact number	
Home Address				
Occupation			Years Known	
9. List ALL previous jobs (Pleas	se include a	separate sheet if	f more space is needed)	
Employer			Position Held	
Address				
Dates: From / / To	o / /	Salary	Full time	Part time 🔲
Supervisor			Contact number	
Duties				
Reason for Leaving				
Employer			Position Held	
Address				
Dates: From / / To) / /	Salary	Full time \Box	Part time
			Contact number	
Duties				
Employer		·	Position Held	
Address				
			Full time 🔲	
Supervisor			Contact number	
Duties				
Reason for Leaving				
Employer			Position Held	
Address				
			Full time	
Supervisor			Contact number	
Duties				
Reason for Leaving				

10.	Are you currently a certified law enforcement office (police officer/deputy)? Yes No No If yes, please list state(s) of certification:	
11.	Have you ever applied to any law enforcement agency in South Carolina or any other state within the past two Yes No If yes, please give the name of the agency(ies) and dates of application:	o (2) years?
12.	Have you ever worked for any law enforcement agency in South Carolina or any other state? Yes No If yes, please give the name of the agency(ies) and dates of application:	
13.	Have you ever received any specialized training in the area of Commercial Vehicle Enforcement? Yes	
14.	Have you ever served in a military organization of the United States? Yes No No If yes, attach a copy of DD214 for each period of service. If no, go to question 16. Branch of service Service Number	
	Dates of service	
	Type(s) of Discharge:	
	General Honorable Other Than Honorable	
	Bad Conduct ☐ Dishonorable ☐ Other ☐ If Other, please list:	
	Were you ever court-martialed, tried on charges, or subject of a summary cour, deck court, Captain's mapping punishment, ARTICLE 15 UCMJ, or any other disciplinary action while in the armed forces? Yes \(\sum \) No \(\sum \)	st, company
	If yes, please explain:	

STATE	LICENSE NUMBER		FROM Month/Year	TO Month/Year
	convictions within the last ten			
CHARGE 	DATE	AGENCY	FINAL	DISPOSITION
group , or combinat advocating the com of the United States	ve you ever been a member of the control of persons which is totality mission of acts of force or vious, or which seeks to alter the force on the control of	tarian, fascist, communi plence to deny other per form of Government of	st, or subversive, o sons their rights ur the United States b	r show a policy of nder the Constitution y unconstitutional mear
Are you a U.S. Citize By Birth? Yes (If by Naturaliz		By Naturalization)	on? Yes 🗆	No 🗆
	illegal drugs? Yes ☐ se the list below to indicate u	No □ use of illegal drugs:		
· ·	find a list of various illegal dr Office with the Santee Police ver tried, experimented, or us	Department. It is impe	rative that you be t	ruthful in all your respo
				VER" in the space for "D
If you have new First Used". TYPE OF DRUG		DATE FIRST USED		VER" in the space for "D DATE LAST USED
If you have new First Used". TYPE OF DRUG Marijuana		DATE FIRST USED		·
If you have new First Used". TYPE OF DRUG Marijuana Cocaine		DATE FIRST USED		·
If you have new First Used". TYPE OF DRUG Marijuana Cocaine Hashish		DATE FIRST USED		·
If you have new First Used". TYPE OF DRUG Marijuana Cocaine Hashish		DATE FIRST USED		·
If you have new First Used". TYPE OF DRUG Marijuana Cocaine Hashish LSD Opium		DATE FIRST USED		·
If you have new First Used". TYPE OF DRUG Marijuana Cocaine Hashish LSD Opium Heroin		DATE FIRST USED		·
If you have new First Used". TYPE OF DRUG Marijuana Cocaine Hashish LSD Opium Heroin Speed		DATE FIRST USED		·
If you have new First Used". TYPE OF DRUG Marijuana Cocaine Hashish LSD Opium Heroin		DATE FIRST USED		·

20. Have you ever sold illegal drugs? Yes \(\square\) No \(\square\)	
If yes, were you ever convicted? Yes No	
If convicted, was the conviction a felony or a misdeme	eanor?
21. Has your credit record ever been considered unsatisfactory involuntary repossession, or failure to pay just debts, judge Yes ☐ No ☐	
Please read the following statement carefully:	
that should an investigation disclose such willful misre will be rejected and I will be disqualified from applying	epresentations or omissions on this document. I am aware epresentations, falsifications or omissions, my application g for a fixed period of time for any position with the Santee ment, subsequent investigation should disclose omissions missal.
Signature	 Date

THE SANTEE POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY AFFIRMATIVE ACTION EMPLOYER

Santee Police Department Personal Inquiry Waiver Release of Information Authorization

To:	Concerned person or Authorized	
	Representative of any Organization,	
	Institution or Repository	
Applic	cant's Name	<u></u>
Date	of Birth	
Social	Security #	
may h Please matio	ectfully request and authorize you to furnish the Santee Pol nave concerning my work record, school record, reputation, e include any records of detainment, arrest, and conviction on of an confidential or privileged nature and Photostats of t sist the Santee Police Department in determining my qualific	financial and credit status and military records. by any law enforcement agency including all infor- he same if requested. This information is to be used
	by release you, your organization, or others from any liabili	ry or damage which may result from furnishing the
inforn	nation requested above.	
	Applicant's Signature	Date
	Address	

Applicant's Signature	Date
Address	
Home Contact Number	
Cell Contact Number	
Work Contact Number	

DOCUMENT CHECKLIST:

THE FOLLOWING INFORMATION MUST BE INCLUDED WITH YOUR APPLICATION:

- 1. A copy of your high school diploma or State GED Certificate.
- 2. A certified copy of your college transcript(s).
- 3. A copy of your DD214.
- 4. A copy of your birth certificate.
- 5. A current full-length (head-to-toe) photograph.
- 6. A certified copy of your driving record(s) for the last five (5) years.

PLEASE DO NOT SUBMIT YOUR APPLICATION UNTIL IT IS COMPLETE!

Santee Police Department Polygraph Examination Consent

Applic	cant's Name	
Date o	of Birth	
Social	Security #	
the ex	camination is to assist in verifying a	that I will be requested to submit to a polygraph examination. The purpose of II information furnished in this application and obtained during applicant efusal to submit to the polygraph examination will terminate any further con-
	☐ I am willing to take	the polygraph examination.
	☐ I am NOT willing to	take the polygraph examination.
	Applicant's Signature	Date
		Santee Police Department Notice of Obtaining Consumer Report
To:	Date of Birth	
define		employment, the Santee Police Department may obtain a consumer report (as concerning you from a consumer reporting agency. This report will be used
	read and understand the above d	sclosure and hereby authorize the Santee Police Department o obtain a con-
	Applicant's Signature	