



Santee Police Department

Application for Employment

Print Name _____ SSN _____

DOB _____ Telephone No. _____

Email Address _____

Date Application Completed _____

PLEASE RETURN ALL COMPLETED APPLICATIONS TO:

Santee Police Department
121 Dazzy Circle
Post Office Box 1220
Santee, SC 29142

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. _____
LASTNAME FIRST MIDDLE M AIDEN

2. Social Security Number _____

3. List ALL other names you have used. Include circumstances and dates when used.

4. Date of Birth _____ Place of Birth _____

5. Weight _____ Height _____

6. Beginning with present address, list ALL previous places of residence since age 17. (Attach a separate page, if necessary)

FROM	TO <i>Month/Year</i>	ADDRESS	CITY	STATE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

7. Have you ever been dismissed from school or been subject to any disciplinary action, such as scholastic probation?

Yes ☐ No ☐

If yes, please indicate circumstances of rules infraction and action taken by school or university.

8. List the names of three (3) professional references.

Name _____ Contact number _____

Home Address _____

Occupation _____ Years Known _____

Name _____ Contact number _____

Home Address _____

Occupation _____ Years Known _____

Name _____ Contact number _____

Home Address _____

Occupation _____ Years Known _____

9. List ALL previous jobs (Please include a separate sheet if more space is needed)

Employer _____ Position Held _____

Address _____

Dates: From // To // Salary _____ Full time ☐ Part time ☐

Supervisor _____ Contact number _____

Duties _____

Reason for Leaving _____

Employer _____ Position Held _____

Address _____

Dates: From // To // Salary _____ Full time ☐ Part time ☐

Supervisor _____ Contact number _____

Duties _____

Reason for Leaving _____

Employer _____ Position Held _____

Address _____

Dates: From // To // Salary _____ Full time ☐ Part time ☐

Supervisor _____ Contact number _____

Duties _____

Reason for Leaving _____

Employer _____ Position Held _____

Address _____

Dates: From // To // Salary _____ Full time ☐ Part time ☐

Supervisor _____ Contact number _____

Duties _____

Reason for Leaving _____

10. Are you currently a certified law enforcement officer (police officer/deputy)?

Yes ☐ 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 (2) years?

Yes ☐ No ☐

If yes, please give the name of the agency(ies) and dates of application:

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 ☐ No ☐

If yes, please list the type of training and date received:

14. Have you ever served in a military organization of the United States?

Yes ☐ 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 court, deck court, Captain's mast, company punishment, ARTICLE 15 UCMJ, or any other disciplinary action while in the armed forces?

Yes ☐ No ☐

If yes, please explain: _____

15. Starting with your CURRENT license, list all states in which you possessed a driver's license in the past five (5) years:

STATE	LICENSE NUMBER	FROM	TO Month/Year

16. List ALL arrests OR convictions within the last ten (10) years:

CHARGE	DATE	AGENCY	FINAL DISPOSITION

17. Are you know or have you ever been a member of any foreign or domestic organization, association, movement, group , or combination of persons which is totalitarian, fascist, communist, or subversive, or show a policy of advocating the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of Government of the United States by unconstitutional means?

Yes ☐ No ☐

If yes, please explain: _____

18. Are you a U.S. Citizen? Yes ☐ No ☐

By Birth? Yes ☐ No ☐ By Naturalization? Yes ☐ No ☐

(If by Naturalization, please attach Certificate of Naturalization)

19. Have you ever used illegal drugs? Yes ☐ No ☐

If yes, please use the list below to indicate use of illegal drugs:

Below you will find a list of various illegal drugs that will be used in determining your suitability for the job of a Commissioned Office with the Santee Police Department. It is imperative that you be truthful in all your responses. If you have never tried, experimented, or used any of these drugs, write the word "NEVER" in the space for "Date First Used".

TYPE OF DRUG	DATE FIRST USED	DATE LAST USED
Marijuana	_____	_____
Cocaine	_____	_____
Hashish	_____	_____
LSD	_____	_____
Opium	_____	_____
Heroin	_____	_____
Speed	_____	_____
Steroids	_____	_____
PCP	_____	_____
Other (specify)	_____	_____

20. Have you ever sold illegal drugs? Yes ☐ No ☐
If yes, were you ever convicted? Yes ☐ No ☐
If convicted, was the conviction a felony or a misdemeanor? _____

21. Has your credit record ever been considered unsatisfactory due to collections, write-offs with a balance, liens, involuntary repossession, or failure to pay just debts, judgements, or foreclosures?
Yes ☐ No ☐

Please read the following statement carefully:

I hereby swear or affirm that there are no willful misrepresentations or omissions on this document. I am aware that should an investigation disclose such willful misrepresentations, falsifications or omissions, my application will be rejected and I will be disqualified from applying for a fixed period of time for any position with the Santee Police Department. If after my acceptance for employment, subsequent investigation should disclose omissions or falsifications, it will be just cause for immediate dismissal.

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

Applicant's Name _____
Date of Birth _____
Social Security # _____

I respectfully request and authorize you to furnish the Santee Police Department any and all information that you may have concerning my work 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 an confidential or privileged nature and Photostats of the same if requested. This information is to be used to assist the Santee 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

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 PoliceDepartment
Polygraph Examination Consent

Applicant's Name _____
Date of Birth _____
Social Security # _____

I have beenadvisedand am fully aware that I will be requested to submit to a polygraph examination. The purpose of theexaminationistoassist in verifying all information furnished in this application and obtained during applicant investigation.Iamfully aware that my refusal to submit to the polygraph examination will terminate any further considerationformyemployment.

- ☐ Iam willing to take the polygraph examination.
☐ Iam NOT willing to take the polygraph examination.

Applicant's Signature

Date

Santee PoliceDepartment
Notice of ObtainingConsumer Report

To: Applicant's Name _____
Date of Birth _____
Social Security # _____

In connection with your application for employment, the Santee 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.

Ihave read and understand the above disclosure and hereby authorize the Santee Police Department o obtain a consumer report.

Applicant's Signature

Date