Andrews Police Department

101 North Morgan Avenue, Andrews, South Carolina 29510

Telephone: 843.264.5223 Fax: 843.264.8121

POLICE OFFICER
EMPLOYMENT APPLICATION

Completion of the Police Officer Employment Application is the first step in the employment process. The information in this application will be used to judge your qualifications for the position of police officer. Read all of the questions carefully and answer all questions completely and honestly.

Return the completely filled out application and required documentation to:

Andrews Police Department
101 N. Morgan Avenue (Physical)
Post Office Box 378 (Mailing)
Andrews, SC 29510
-or-
townhall@townofandrews.sc.gov

Minimum Requirements for all Positions:

- Must have a High School diploma or GED.
- Must have a clear criminal history.
- Must be a United States citizen.
- Driving record must not show a disregard for the law.
- Credit history must show sound financial management with the ability to keep accounts paid up-to-date.
- Results of all pre-employment tests and interviews must meet standards.
- Past employment record must be satisfactory.
- Must pass a drug test.
- Medical examination results must show that you are capable of performing all of the essential functions of the job for which you are applying, with reasonable accommodation.
- Must work rotating shifts

The following documents are <u>REQUIRED</u> in order for your application to be processed:

- Copy of Birth Certificate
- Copy of Social Security Card
- Copy of High School Diploma or GED
- Copy of a valid S.C. Driver's License
- Certified ten year driving record *(You must provide a copy of your driving record from every state you have been licensed to drive in within the past ten years.)*
- Credit report *(This can be obtained from companies such as Equifax, Experian, etc.)*
- Copy of form DD-214 *(if a veteran)*
- Copies of other documents which may be applicable to employment *(Certifications, training documents, etc.)*

Qualified applicants and employees are treated without regard to race, religion, sex, national origin, age, marital status, or disability.

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Basic Personal Information

Name:_____
Last *First* *Middle*

Please list any other names that you have used: _____

Home Address: _____
Street *City* *State* *Zip*

Telephone: _____
Home Number *Daytime Number* *Cell Number*

Social Security Number: _____ Date of Birth: _____

Place of birth:_____
City *State* *Country*

Driver's License: _____
Number *State* *Type*

1. Are you at least 21 years of age? ☐Yes ☐No
2. Do you have a legal right to work in the United States? ☐Yes ☐No
3. Are you a Certified Police Officer in the State of South Carolina? ☐Yes ☐No
   Agency/Academy_____ Certification#_____ Date _____
4. Has your certification ever been suspended? ☐Yes ☐ No If yes, explain on a separate sheet.
5. Are you a Certified Police Officer in another state of the U.S.? ☐Yes ☐No
6. If yes, in which state did you receive your certification? _____
   Agency/Academy_____ Certification#_____ Date _____
7. Are you pending any internal or external reviews by another agency? ☐ Yes ☐ No
   If yes, please explain _____
   _____
8. Have you applied for a position with the Andrews Police Department before?☐Yes ☐No
   If yes, when and previous position(s) applied for:
   _____
9. Do you have any tattoos? ☐Yes ☐No If yes, give a description and the location on your body?
   You may be asked to supply photos. _____
   _____

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Personal History

1. Do you know of any reason that you could not pass a background check? ☐ Yes ☐ No

2. Have you ever been fired or asked to resign from a job? ☐ Yes ☐ No

3. Have you ever received disciplinary action from an employer? ☐ Yes ☐ No

4. Have you ever stolen from an employer? ☐ Yes ☐ No

5. Have you ever committed a crime for which you were not arrested? ☐ Yes ☐ No

6. Have you ever assisted someone in committing a crime? ☐ Yes ☐ No

7. Have you ever falsified a police report? ☐ Yes ☐ No

8. Have you ever accepted money not to report a crime? ☐ Yes ☐ No

9. Have you ever slept on the job? ☐ Yes ☐ No

10. Has any driver's license issued to you ever been suspended or revoked? ☐ Yes ☐ No

11. Have you ever used, sold, or otherwise handled in an illegal manner any controlled substance? ☐ Yes ☐ No

12. Have you ever been bonded? ☐ Yes ☐ No

13. Have you ever been refused bond? ☐ Yes ☐ No

If you answered yes to any of the questions listed above, please write a brief explanation for that question below. List the question by number. If you are interviewed, you will be asked about any "yes" answers. Any "yes" answers will be closely examined during a background check. A "yes" answer does not automatically eliminate you from consideration for employment. Your omission of these facts will automatically eliminate you from consideration. Add a separate sheet of paper if additional space is needed.

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References

List two references other than relatives

Name: _____ Name: _____
Address: _____ Address: _____
_____ _____
Telephone #: _____ Telephone #: _____
(Cell/Home/Work) (Cell/Home/Work)

Military Service

Please complete the information that applies to your military background.

Branch: _____ Serial Number: _____

Date of service: _____ to _____ Reserve Status: _____

Type of discharge: _____ If not honorable, explain: _____
_____
_____

Grade and duty assignment at discharge/separation: _____

Education

Please complete the information that applies to your educational background.

School Name	City/State	Dates Enrolled	Study/Major
High School			
College			
Graduate School			
Trade School			
Other			

If you did not complete high school, do you have a GED? ☐Yes ☐No

Do you speak another language other than English? ☐Yes ☐No Fluent? ☐Yes ☐No
If yes, please list language (s) _____

List any computer skills you have**:** _____
_____

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Employment History

Please complete the information that applies to your employment background.

NOTICE: **Start with your current job, if employed, and list your past employment in reverse order**.

Company:_____ Position: _____ FT or PT

Address: _____ City: _____ State: ___ ZIP:_____

Dates from _____ to_____ Starting Salary: _____ Ending Salary: _____

Supervisor's Name: _____ Telephone No.: _____

Job Duties: _____

Reason for leaving: _____

Company:_____ Position: _____ FT or PT

Address: _____ City: _____ State: ___ ZIP:_____

Dates from _____ to_____ Starting Salary: _____ Ending Salary: _____

Supervisor's Name: _____ Telephone No.: _____

Job Duties: _____

Reason for leaving: _____

Company:_____ Position: _____ FT or PT

Address: _____ City: _____ State: ___ ZIP:_____

Dates from _____ to_____ Starting Salary: _____ Ending Salary: _____

Supervisor's Name: _____ Telephone No.: _____

Job Duties: _____

Reason for leaving: _____

Company:_____ Position: _____ FT or PT

Address: _____ City: _____ State: ___ ZIP:_____

Dates from _____ to_____ Starting Salary: _____ Ending Salary: _____

Supervisor's Name: _____ Telephone No.: _____

Job Duties: _____

Reason for leaving: _____

Please Read Carefully Before Signing

I declare that the foregoing statements are true and correct to the best of my knowledge and belief. I realize that falsification of any information on this application is grounds for disqualification. By signing I authorize investigation of all statements contained in this application AND a full background check.

Applicant Signature: _____ Date: _____