



SOUTH CONGAREE POLICE DEPARTMENT

119 West Berry Road
West Columbia, SC 29172
(803) 755-2760



Sworn Officer Employment Information
Please Read Prior to Beginning Your Application

DO NOT in any way bind, staple or paperclip **ANY** portion of your application packet. **DO NOT** print the application front to back.

Application Supplemental Requirements:

- Copy of 10 year certified driver's history from all states currently or previously licensed.
- Copy of current (within last 6 months) credit report with no missing pages
- Copy of college transcripts, if applicable
- Copy of social security card
- Copy of birth certificate
- Copy of high school diploma (or GED) and college diploma, if applicable
- Copy of DD-214, if applicable
- Copy of your SC Class 1 Law Enforcement Certification if you are currently certified
- Application completed in its ENTIRETY. All items that are not applicable should be marked N/A.

Duration of Process:

- All applications are kept on file until such time as we begin reviewing and processing them.
- This occurs on an as needed basis dependant upon personnel needs within the department.
- Once this occurs the process takes approximately 6-8 weeks.
- You will be notified during this process on the status of your application and of any tests/interviews.

Reapplication Process:

- Should you not be selected for any current position, you must re-submit the entire application package to be considered for any future positions. You may not reapply for one year from your initial application submission.

General Requirements for Job Applicants:

- 21 years of age
- High school diploma or equivalent
- Ability to complete the South Carolina Criminal Justice Academy
- Possession of valid South Carolina driver's license at time of any employment offer
- Vision correctable to 20/20

Revised 03/20/2024

General Selection Process Requirements

(Also see Appendix B "Selection Process for further information)

Successful completion of:

- Application Pre-Screening
- Appearance before interview board
- Thorough background investigation
- Psychological screening and Polygraph screening
- Oral interview(s) with Chief of Police and Town Council
- Physical exam and drug screen

Ineligibility Factors:

- Criminal History. Conviction (or plead guilty/no contest) of any of the following crimes:
 - Criminal domestic violence, including assault against a domestic partner, spouse, child or parent;
 - Crime of moral turpitude (crimes that involve fraud, dishonest behavior, breach of duty to society, etc.);
 - Crimes of any type which carries a six months jail sentence or more or the South Carolina State law equivalent within the last five years;
 - Adult commission of undetected crimes of a serious or repetitive nature; or
 - Any Felony.
- Traffic Violations.
 - More than four negative points on a South Carolina Operators License or the equivalent for out of state licenses. Points may be negated prior to application by attending defensive driving school offered by the Division of Motor Vehicles;
 - More than five moving violations on your ten year driving record;
 - Any conviction of eluding police, racing, leaving the scene of an accident, or driving under the influence of drugs or alcohol; or
 - Refusal to take a blood or breath test.
- Credit
 - Demonstrated history of financial irresponsibility (examples include unpaid collections or unsatisfactory judgments where no payment plan has been established. Bankruptcies will be evaluated based on the time frame, circumstances, other measures pursued and restoration of credit).
 - Being in default on a student loan guaranteed through the federal government.
- Drugs
 - Any involvement in the sale or distribution of illegal drugs as an adult;
 - Juvenile involvement in the sale or distribution of illegal drugs is an area of concern which will be given careful scrutiny in the context of the full investigation/review;
 - Any illegal possession of heroin, cocaine, hallucinogens or any other schedule 1 or 2 drug, or any derivative thereof, as defined in the Code of South Carolina within the last ten years;
 - Illegal possession of anabolic steroids within the last three years; or
 - Illegal possession of marijuana or a derivative thereof within the last 36 months.
- Others
 - Dishonorable discharge from military service;
 - Untruthfulness and/or intentional withholding of information on any application, interview, or paperwork associated with the position. Examples of intentional withholding of information would include deliberate inaccuracies or incomplete statements; or
 - Cheating on any examination or testing associated with the position.

- Note
 - This is not intended to be an exhaustive listing of background disqualifiers. Applicants who are successful in the initial phase will undergo a thorough background investigation which may include a polygraph examination. Areas of concern will be evaluated on a case by case basis within the context of the full investigation/review. Examples of areas of concern may include, but are not limited to the following:
 - Reduction of charges as a result of a plea agreement or other form of sentencing disposition prior to a conviction in any of the aforementioned criminal and driving history categories;
 - Crimes committed as a juvenile, including undetected crime;
 - Patterns of reckless and/or irresponsible driving;
 - Conviction(s) of driving under the influence;
 - Illegal drug possession that does not fall within the parameters defined above;
 - Less than honorable military discharge;
 - Erratic work record or unfavorable employment references; and
 - Pending litigation or prosecution for criminal offenses must be resolved prior to consideration for employment.
 - The South Congaree Police Department has a zero-tolerance concerning domestic violence.

Application Hints:

- Type or print legibly using **black ink**.
- Provide copies of all required documentation as listed on the Employment Information page. Copies cannot be made for you at the time you submit your application. The South Congaree Police Department cannot guarantee that any originals of the required documentation can be returned.
- Grossly incomplete applications are discarded. Minor omissions are still considered however may reflect poorly upon the applicant as well as delay your application process.
- Review your application thoroughly and make sure all information is supplied, directions are followed, and required documents submitted. Your application and the ability to follow directions in completing it is our first impression of you.
- You are strongly encouraged to mark areas that do not apply with “N/A” so as not to leave it to our interpretation as to why a line was blank.
- If there is not enough room supplied for the requested information or you wish to explain further, you may attach additional pages to the application. The additional pages should be properly referenced to the item and item number in the application.
- *Please have notarized the two required places within the application packet. This can be done by our front desk administrative personnel if you deliver your application to us.*
- While we appreciate the submission of a resume, copies of all certifications held, etc., such items are not necessary as all necessary information is thoroughly covered within the application itself. Such items often are discarded.
- Please return your loose (not stapled, bound, clipped, etc.) application to Town Hall
- Pursuant to Federal Legislation, you are entitled to a free annual credit report from all three of the major credit bureaus. These can be obtained by visiting www.annualcreditreport.com or calling 877-322-8228.
- Otherwise copies of your credit report can be requested from any of the three major credit reporting bureaus individually listed below for a fee.

<u>Company</u>	<u>Web Address</u>	<u>Telephone #</u>
Equifax	www.equifax.com	1-800-685-1111
Experian	www.experian.com	1-888-397-3742
Trans-Union	www.transunion.com	1-800-888-4213

Appendix A

9. PREVIOUS RESIDENCES

- a) List previous addresses for the last 10 years, beginning with the most recent. Include local law enforcement agency that has jurisdiction at the address and the time period which you resided there.

Number	Street	City	State	Zip	Dates	Police Agency
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Number	Street	City	State	Zip	Dates	Police Agency
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Number	Street	City	State	Zip	Dates	Police Agency
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- b) List any individuals you have resided with during the last ten years (excluding family members):

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

10. FAMILY INFORMATION

- a) Please list the following information:

Father:

Last	First	Middle	Present Address	Phone Number
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Mother:

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

Brothers/Sisters:

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

Step-Father:

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

Step-Mother:

Last	First	Middle	Present Address	Phone Number
------	-------	--------	-----------------	--------------

b) Please indicate all schools that you have attended beginning with high school.

School	City, State	Dates	Major	Type of Degree (or "None")

c) List any training, skills and/or experience that you feel would be particularly useful in the position for which you are applying: _____

d) Have you ever been suspended or expelled from any high school or post secondary school (any formal educational institution beyond the high school level)? Yes No
 If yes, please explain to include school, date and circumstances: _____

14. MILITARY SERVICE

a) Are you registered with the selective Service? Yes No
 If no and a male, please explain: _____

b) Have you ever served in the armed forces? Yes No
 If yes, please supply the following information (c) through (j):

c) Branch of Service: _____

d) If presently a member of the National Guard or any military reserve, give unit and location: _____

e) Dates of Service: _____ to _____

f) Total Years: _____ Highest Rank: _____

g) Type of Discharge: _____ Date and Location: _____

h) List all medals and decorations awarded you during your military service: _____

i) Have you ever been the subject of any judicial or non-judicial disciplinary action while in the military? Yes No
 If yes, please give details to include branch of service, when, where, and circumstances: _____

j) Have you ever been court-martialed while a member of the armed forces? Yes No
 If yes, explain: _____

15. MEDICAL INFORMATION

- a) Have you ever used illegal drugs? Yes No

If yes, state substance, date of use and approximate number of times of used: _____

- b) Do you habitually use alcoholic beverages to excess? Yes No

- c) Have you ever been treated for drug or alcohol addiction? Yes No

If yes, state substance, dates and location of treatments: _____

- e) Are you presently in a physical fitness program? Yes No

List type: _____

16. FINANCIAL INFORMATION

a)

Monthly Income	
Salary:	\$
Spouses Salary:	\$
Other Income - Describe	\$
	\$
	\$
	\$
Total Monthly Income	\$

- b) How many persons do you support, including yourself? _____

- c) Have you ever been sued? Yes No

If yes, give details to include date, circumstances and disposition:

- d) List your total amount of debts at present. Include charge accounts, contracts, and any financial liabilities.

Name of Debt Holder	City	State	Telephone	Total Debt	Monthly Payment
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
Total					\$

- e) Have you ever filed for or declared bankruptcy? Yes No
 If yes, please give details to include when, where, court and circumstances: _____
- f) Have you ever had any of your bills turned over to a collection agency? Yes No
 If yes, please give details to include when, firms involved, and circumstances: _____
- g) Have you ever had purchased goods repossessed? Yes No
 If yes, please give details to include when, firms involved and circumstances: _____
- h) Have your wages ever been garnished? Yes No
 If yes, please give details to include when, where, and why: _____
- i) Have you ever been delinquent on income or other tax payment? Yes No
 If yes, please give details to include when, where, and why: _____

17. PERSONAL QUESTIONNAIRE

- a) Do you object to wearing a uniform? Yes No
- b) Do you object to working overtime? Yes No
- c) Do you object to being away from home for long periods of time? Yes No
- d) Do you object to working regular shifts? Yes No
- e) Do you object to working rotating shifts? Yes No
- f) Do you object to working nights and/or weekends? Yes No
- g) Do you object to working in adverse environmental conditions? Yes No
- h) Can you operate a motor vehicle? Yes No
- i) Do you fluently speak any foreign language? Yes No
 If yes, list language(s): _____
- j) Do you hold any professional licenses? Yes No
 If yes, list: _____

18. CRIMINAL HISTORY

- a) Have you ever been arrested by law enforcement? Yes No
 If yes, give details:

*Offense Charged	Police Agency	State	Date	Disposition

*If a charge was reduced, the original charge should be listed and the reduced charge listed under "disposition"

- b) Have you ever been convicted of a felony? Yes No
 If yes, give details: _____

- c) Have you ever been investigated, arrested, prosecuted or convicted for Domestic Violence? Yes No
 If yes, please explain: _____

- d) Have you ever been the subject of a court order or placed on probation? Yes No
 If yes, please explain: _____

- e) Have you ever been prohibited by a court from possessing a firearm? Yes No
 If yes, please explain: _____

- f) Were you ever required to appear before a juvenile court for an act which would have been a crime if committed by an adult? Yes No
 If yes, give details to include when, where, and why: _____

- g) Have you ever been reported to a law enforcement agency as a missing person or runaway? Yes No
 If yes, please give details to include; date, law enforcement agency, and circumstances: _____

- h) Did you ever lie about anything really important or to stay out of trouble? Yes No
 If yes, explain: _____

- i) Has anyone ever taken out a warrant on you? Yes No
 If yes, please give details to include; date, law enforcement agency, and circumstances: _____

- j) Have you ever been contacted and/or questioned by law enforcement as a possible suspect for any kind of criminal investigation? Yes No
 If yes, please give details to include; date, law enforcement agency, and circumstances: _____

- k) Have you ever stolen anything or altered price tags in a store? Yes No
 If yes, explain to include date, from who, and circumstances: _____

- l) Were you ever in court as a defendant? Yes No
 If yes, please explain to include dates: _____

m) Have you ever lied under oath in court or on any official document? Yes No
 If yes, please explain to include dates and circumstance(s): _____

- n) Please check any of the following **undetected** crimes you may have ever committed or participated in and explain.
- | | | |
|---|--|--|
| <input type="checkbox"/> ARSON | <input type="checkbox"/> FISH AND GAME VIOLATION | <input type="checkbox"/> CRIMINAL DAMAGE TO PROPERTY |
| <input type="checkbox"/> BURGLARY | <input type="checkbox"/> SHOPLIFTING | <input type="checkbox"/> ILLEGAL USE OF CREDIT CARDS |
| <input type="checkbox"/> ILLEGAL DRUGS | <input type="checkbox"/> CHILD MOLESTATION | <input type="checkbox"/> INCEST |
| <input type="checkbox"/> ARMED ROBBERY | <input type="checkbox"/> THEFT | <input type="checkbox"/> RECEIVING STOLEN PROPERTY |
| <input type="checkbox"/> ASSAULT | <input type="checkbox"/> VANDALISM | <input type="checkbox"/> PUBLIC DRUNKENESS |
| <input type="checkbox"/> GAMBLING | <input type="checkbox"/> ILLEGAL WIRETAP | <input type="checkbox"/> COMPUTER "HACKING" |
| <input type="checkbox"/> MURDER | <input type="checkbox"/> KIDNAPPING | <input type="checkbox"/> RAPE |
| <input type="checkbox"/> DOMESTIC VIOLENCE | <input type="checkbox"/> TRESPASSING | <input type="checkbox"/> FORGERY |
| <input type="checkbox"/> PERJURY | <input type="checkbox"/> BRIBERY | <input type="checkbox"/> CONCEALED WEAPON |
| <input type="checkbox"/> ILLEGAL POSSESSION OF FIREARMS | | |
- _____
- _____
- _____

o) If none of the above, list the most serious **undetected** crime you were ever involved in and explain: _____

19. DRIVING HISTORY

- a) Do you possess a current valid driver's license? Yes No
 Driver's License Number: _____ State: _____
- b) Have you ever possessed a driver's license issued by any other state? Yes No
 If yes, give state and number: _____
- c) Has your license ever been suspended or revoked? Yes No
 If yes, give details to include reason, state, and date:
- | Reason | State | Date | Restored (yes/no) | Date |
|--|-------|------|--|------|
| d) Are your driving privileges restricted? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| List restrictions: _____ | | | | |
| e) List all States you have ever resided in: _____ | | | | |
| _____ | | | | |

- f) Have you ever had any traffic violations? Yes No
 If yes, please list:

*Traffic Violation	Police Agency	Date	Disposition and Sentence

*If a charge was reduced, the original charge should be listed and the reduced charge listed under "disposition"

- g) List the current liability insurance that you have on your motor vehicles.

Company	Agent	Phone Number	Policy Number	Expiration Date

- h) Have you ever had a lapse in automobile liability insurance? Yes No

20. EMPLOYMENT HISTORY

- a) Have you ever been or are you now engaged in a private business? Yes No
 If yes, list your capacity, name of business and dates: _____

- b) Have you ever been discharged or asked to resign from a job? Yes No
 If yes, give business name(s), date(s) and circumstances: _____

- c) Have you ever applied for employment at any other law enforcement agency in South Carolina? Yes No
 If yes, please list agencies, dates, and how far in their process you went:

Agency	Date(s)	Length in Process

d) Please list all jobs (including part-time, temporary, and volunteer) for the previous ten (10) years beginning with the current or most recent. All time should be accounted for chronologically. If you were a student or unemployed, the dates should be filled in and so noted beside "company name".

Company Name:	Supervisor:
Employment Dates: From / / To / /	Telephone #: () -
Address:	
Job Title:	Ending Salary: \$
Job Duties:	
Reason for Leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If "no", explain:	

Company Name:	Supervisor:
Employment Dates: From / / To / /	Telephone #: () -
Address:	
Job Title:	Ending Salary: \$
Job Duties:	
Reason for Leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If "no", explain:	

Company Name:	Supervisor:
Employment Dates: From / / To / /	Telephone #: () -
Address:	
Job Title:	Ending Salary: \$
Job Duties:	
Reason for Leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If "no", explain:	

Company Name:	Supervisor:
Employment Dates: From / / To / /	Telephone #: () -
Address:	
Job Title:	Ending Salary: \$
Job Duties:	
Reason for Leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If "no", explain:	

Company Name:	Supervisor:
Employment Dates: From / / To / /	Telephone #: () -
Address:	
Job Title:	Ending Salary: \$
Job Duties:	
Reason for Leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If "no", explain:	

Company Name:	Supervisor:
Employment Dates: From / / To / /	Telephone #: () -
Address:	
Job Title:	Ending Salary: \$
Job Duties:	
Reason for Leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If "no", explain:	

**SOUTH CONGAREE POLICE
DEPARTMENT**
Sworn Officer Employment Application Affidavit



*STATE OF SOUTH CAROLINA
COUNTY OF LEXINGTON, TOWN OF SOUTH CONGAREE*

I hereby certify that I, _____ am not attempting to hide or conceal any information concerning my background and that the information provided is correct and complete to the best of my knowledge and understand that any omissions, incomplete or false statements and/or information furnished by me may subject me to disqualification or termination at any time after employment.

I have read the above and understand that applications not completed in their entirety shall not be considered.

I also understand and agree that if I am hired, I will be employed "at will" which means that I may terminate my employment at any time, with or without cause, and that the Town of South Congaree will have the same right.

This the _____ day of _____, 20 _____

Full Signature of Applicant

Subscribed and Sworn to before me this _____ day of _____, A.D. 20_____.

My Commission Expires: _____

Notary Public: _____

**SOUTH CONGAREE POLICE DEPARTMENT
SUPPLEMENT TO EMPLOYMENT
APPLICATION APPLICANT ELIGIBILITY
ATTESTATION**

I understand that the US Government requires the company to verify my eligibility for US employment and my identity. I understand that the company must decline to hire me if I fail to present adequate proof of my eligibility and identity.

As evidence of eligibility and identity, the government requires applicants to submit originals of one document from Group "A" OR one document for both Group "B" and Group "C".

Please check the evidence you will submit:

Group A	Group B	Group C.
<input type="checkbox"/> US Passport	<input type="checkbox"/> Social Security Card (absent no work endorsement)	<input type="checkbox"/> State Drivers License (with photograph)
<input type="checkbox"/> Certificate of US Citizenship	<input type="checkbox"/> US Birth Certificate (establishing US Nationality at birth)	<input type="checkbox"/> Other form of State ID (with photograph)
<input type="checkbox"/> Certificate of Naturalization	<input type="checkbox"/> Other Document (approved by Attorney General authorizing employment by the applicant in the US)	<input type="checkbox"/> Other Photo ID (approved by the Attorney General)
<input type="checkbox"/> Unexpired foreign passport (with un-expired work authorization endorsement of Attorney General)		
<input type="checkbox"/> I-551 Alien Registration Receipt Card (with photograph)		

I declare and affirm under penalty of perjury that I am (check the appropriate box):

- A Citizen or National of the United States.
- An alien lawfully admitted for U.S. permanent residence.
- An alien authorized under the US Immigration and Nationality Act to be hired in the position for which I have applied.

Printed Name

Date

Signature



Police Department

Chris Garner, Interim Chief of Police
1119 West Berry Road,
West Columbia SC 29172
803-3755-2760 (Phone)

Community Oriented Policing

South Congaree Police Department Employment Application Authorization for Release of Information

To Any:

Doctor, Hospital, Medical Association, U.S. Armed Forces,
U.S. Selective Service System, Maritime Service, Veterans Administration, or

Academic Dean, Registrar, Principal, Guidance Counselor, other authorized person at a school (college, business,
trade or high school), or

Past or present Employer, or

Credit Bureau or Retail Merchants Association, Bank, Financial Institution or any other Credit Extending
Organization, or

Municipal, County, State, or Federal Governmental Agency.

I, _____, have applied for employment with the South
Congaree Police Department. I am aware that my entire background is to be investigated and hereby authorize and
request the release of any and all information you have concerning me, excluding bank or savings and loan
association balances, to the South Congaree Police Department or its agents. I hereby designate the South
Congaree Police Department as my authorized representative for the purpose of obtaining such information.

I hereby release anyone addressed above, who gives information about me in the course of an investigation covered
by this authorization, from any and all liability for damages of whatever kind to me, my family, heirs or associates as
a result of giving such information, except that I do not release anyone who gives information that he knows is
false, deliberately intending to harm me or one of my family, heirs or associates.

Printed Name: _____

Signature: _____ Date _____

Subscribed and Sworn to before me this _____ day of _____, A.D. 20____.

My Commission Expires _____.

Notary Public: _____