HOLLY HILL POLICE DEPARTMENT 8423 OLD STATE RD, SUITE # 1 HOLLY HILL, S.C. 29059-8100 (803) 496-3811

APPLICATION FOR EMPLOYMENT

The Town of Holly Hill is an Equal Opportunity Employer which prohibits discrimination because of age, sex, race, color, marital status, condition or handicap, religious creed, sexual orientation, national origin, or, any other non-merit factor. Reasonable accommodations will be made for handicapped persons upon request.

GENERAL INSTRUCTIONS:

- 1. PRINT IN INK OR TYPE INFORMATION REQUIRED.
- 2. Failure of the applicant to furnish all information and records requested below may result in rejection of the application. ALL INFORMATION IS SUBJECT TO VERIFICATION.
- 3. Should additional space be needed to fully complete any part of this application, continue on plain white (8 ½ x 11) paper identifying the question being continued. Place your name on the paper along with the position you are applying for.

The minimum qualifications that all participants for the position of Police Officer must meet include:

- 1. Minimum age of 21 years.
- 2. Uncorrected vision of 20/40 or better in each eye, or, correctable to 20/20.
- 3. Passing a medical exam conducted by a physician.
- 4. High School graduate or equivalent.
- 5. Passing a background investigation, which includes a check of school records, credit history, inquiry as to character and reputation, health history, and, a fingerprint based records check.
- 6. Passing an interview.
- 7. Meeting any other standards set by the Holly Hill Police Department or the South Carolina Criminal Justice Academy, such as psychological testing, polygraph exam, physical agility testing, etc.
- 8. Successfully completing any other tests or examinations as may be required by the Chief of Police.

The applicant must perform the following:

- 1. Complete a written application and submit it to the Chief of Police.
- 2. Arrange with the Chief of Police to take any required tests and appear for an interview.
- 3. Schedule a physical examination with a physician.

Essential Job Functions of a Police Officer

Basic Purpose

To enforce motor vehicle and criminal law in order to protect the lives and property of the public, maintain law and order, detect and prevent crime, apprehend suspects and prosecute violators.

Characteristic Duties and Responsibilities

- Arrests suspects, forcibly if necessary, using handcuffs and other restraints, subdues resisting suspects using maneuvers, approved weapons, and, hands and feet in self-defense.
- Writes investigative reports, including sketches, using appropriate grammar, symbols, and mathematical computations.
- Assesses situations to determine when there is reasonable suspicion to detain, when probable cause exists to search and arrest, and, when and to what degree force may be used.
- Operates a law enforcement vehicle during both day and night, in emergency situations involving speeds in excess of posted limits, in congested traffic and in unsafe road conditions caused by fog, smoke, rain, ice or sleet.
- Conducts visual and audio surveillance for extended periods of time and communicates effectively and coherently over law enforcement radio channels while initiating and responding to radio communications.
- Gathers information in criminal investigations by interviewing and obtaining the statements of victims, witnesses, suspects and confidential informants.
- Pursues fleeing suspects which may involve quickly entering and exiting patrol vehicles, lifting, carrying, and dragging heavy objects, climbing over obstacles, jumping from elevated surfaces, climbing through openings, jumping over obstacles, ditches and streams, crawling in confined areas, balancing on uneven or narrow surfaces and using body force to gain entrance through barriers.
- Unloads, loads, aims and fires handguns and other firearms from a variety of body positions under stressful conditions that justify the use of deadly force and at levels of proficiency prescribed in certification standards.
- Performs traffic enforcement and law enforcement patrol functions within assigned area and according to established laws and procedures in order to reduce loss of property and life and ensure safe and orderly flow of traffic.
- Intervenes in disputes to restore peace and ensure safety of the public and parties involved, including confronting hostile persons, mediating disputes, and advising of rights and processes.
- Reads and comprehends legal and non-legal documents and demonstrates communication skills to prosecute cases in court and other formal settings.
- Searches people, vehicles, buildings and outdoor areas to detect and collect evidence and substances that provide the basis of criminal offenses and infractions, detains suspicious persons and vehicles.
- Performs rescue functions at accidents, emergencies and disasters to include directing traffic, administering emergency medical aid, and evacuating people away from dangerous situations.
- Processes and transports prisoners and committed mental patients using handcuffs and other appropriate restraints.
- Successfully completes formal training such as the SC Criminal Justice Academy to develop skill and proficiency in law enforcement techniques.

Recommended Work Traits

Ability to perform physically demanding tasks, operate a motor vehicle, learn the use of firearms and other law enforcement equipment. Be able to exercise tact, diplomacy, and impartiality in relation to others. Able to make decisions based on common sense and good judgment. Ability to resolve stressful situations, comprehend and comply with complex oral instructions in the English language. Ability to write reports, comply with and enforce federal, state, and local laws. Increase competency through training and instruction. Be able to communicate orally, in writing and to take orders and accept supervision. Must be willing to maintain appearance appropriate to assigned duties and responsibilities and determined by the agency.

Personal Characteristics

Since law enforcement officers are required to enforce the law, and they are exposed to certain temptations to show favoritism, corruption, or unlawful monetary gain, it is a *business necessity* that officers exhibit a history of honesty, reliability, the ability to manage personal finances, interpersonal skill, and, integrity.

HOLLY HILL POLICE DEPARTMENT

PERSONAL DATA QUESTIONNAIRE

IN	ICT	ГD	TI	CT	T	NS.

Indicate the position you are applying for:

Read the entire questionnaire thoroughly and answer **ALL** relevant questions fully. Type or print in black ink. If more space is required to answer any question, you may use additional paper.

It is important for you to remember that **ALL** statements will be investigated thoroughly by the Holly Hill Police Department and any misrepresentations on your part will be cause for your application to be rejected. Further, if you have attained employment as a Holly Hill Police Officer, and should an investigation disclose misrepresentations, your employment may be terminated.

Full Time Police Officer:	Reserve Police Officer:
Clerical Staff:	Dispatcher:

PERSONAL DATA QUESTIONNAIRE

Section I Identification Data

Section II Marital and Family Status

Section III Financial Status

Section IV Automobile and Drivers License

Section V Military Service

Section VI Education (All)

Section VII Employment History

Section VIII Arrest Data/Personal Practices

Section IX Volunteer Service

Section X Hobbies/Athletics

Section XI Special Skills

Section XII Personal References

SECTION I – IDENTIFICATION DATA

Name:		An	y Aliases:
Height:Weig	ght:Hair:	Eyes:	Social Security #:
Blood Type:	_ Birthmarks, Tattoo	os, Scars (Type	e & Location):
		D : D	hone:
RESIDENCE: Please list all of yo	ur residences during	g the last 10 ye	ears. Begin with your most current residence.
FROM MONTH/YEAR	TO MONTH/YEAR	ADDRESS	CITY/STATE

SECTION II – MARITAL & FAMILY STATUS

During the course of the background investigation, persons who know you will be asked to comment on your suitability for the position of Holly Hill Police Officer. Inquiries will be confined to job relevant matters.

Please supply the requested not applicable, write N/A.	appropriate information in the spaces	provided below. If a category is
Present status (Check one) S	ingle Married Separated Di	vorced
The follow	ing information must be completed wh	here applicable
Father's Name:	Address:	DOB:
Mother's Name:	Address:	DOB:
Brothers and/or Sisters:		
Name:	Age: Address:	
Spouse's Name:	DOB: Man	rriage Date:
Spouse's Maiden Name:	Address:	
Children:		
Name:	Age: Address:	

If divorced, complete the	following information:		
Former Spouse's Name: _		DOB:	
Former Spouse's Current	Name:		
Present Address:			
Date of Divorce:	Place:	Court:	_
		d to be delinquent in either sion of the divorce decree?	making court ordered YES NO
If yes, please provide deta	nils:		
Has any member of your offenses? YES NO		ted for any offense other tha	n minor motor vehicle
If the answer to the above charges, dates, jurisdiction		ly all pertinent information	regarding same – who,

SECTION III – FINANCIAL STATUS

Name of Creditor	Address, City, State, Zip	Total Owed	Payment Per Month	Type of Loan
Savings Account (s)	:			
Bank Name:		Balance	:	
Bank Name:		Balance	:	
Checking Account(s	·):			
Bank Name:		Balance	:	
Bank Name:		Balance	:	
Do you; own a home	e? Rent or Other Mon	thly Paymer	nt:	
Have you ever filed	for or declared bankruptcy? YES	NO 🗌		
If yes, please provid	e details (include when, where, why	·):		

Have any of your bills ever been turned over to a collection agency? YES \(\subseteq \text{NO} \subseteq \) If yes, please provide details:
Have you ever had purchased goods repossessed? YES NO
If yes, please provide details (include when, firms involved, & circumstances):
Have your wages ever been garnished? YES NO Service NO Service Management No Service No
Have you ever been delinquent on income or other tax payments? YES NO If yes, please provide details (include when, where, why):

SECTION IV – AUTOMOBILE & DRIVERS LICENSE

Operation of a motor vehicle is an integral part of the position of the Holly Hill Police Officer. An investigation of your driving history will be made through a records check. To expedite this procedure, please supply the following information:

Do you currently own a motor vehicle? YES \(\subseteq \text{NO} \subseteq \) If yes, please provide the following vehicle information:						
MAKE MODEL YEAR COLOR						
REGISTRATION TAG NUMBER STATE						
Do you possess a valid driver's license? YES NO TYPE STATE						
License Number: Expiration Date:						
Name under which license was granted:						
Please list other states where you were issued a drivers license: State: Name under which license was granted: State: Name under which license was granted:						
State: Name under which license was granted:						
Have you ever been refused a drivers license by any state? YES NO If yes, please explain (include when, where, why):						

Please	list a	ll traffic	citations	(except	parking	citations)	you	have	received	within	the	past to	en
(10) years	:												

	VIOLATION	LOCATIO	ON (CITY)	API	PROX DATE	FINDING/FINE
	been in a motor			ne past	ten (10) years?	YES NO i
DATE	LOCATION	(CITY)	INJURY NON INJU		INVESTIGA	ATING AGENCY
•	license ever bee ease provide det	-				
Have you	ever been refus	sed insurance	e for any reaso	on other	er than failure to	pay? YES \(\square\) NO \(\square\)
Have you If yes, plo	ever been refus ease provide de	sed insurance tails (include	e for any reaso company nai	on othe	er than failure to dress, date and r	p pay? YES NO ceason):
Have you If yes, plo	ever been refus ease provide de	sed insurance tails (include	e for any reaso e company nai	on othe	er than failure to dress, date and r	o pay? YES NO ceason):
Have you If yes, plo	ever been refus ease provide de	sed insurance tails (include	e for any reaso e company nai	on othe	er than failure to dress, date and r	pay? YES NO ceason):

SECTION V – MILITARY SERVICE

BRANCH OF SERVICE	SERVICE NUMBER	DATES OF SERVICE	TYPE OF DISCHARGE
		ТО	
	DI		
If discharged fr	om the military on more th	copy of your DD214 nan one occasion, attach all	copies of the DD214
Are you <i>currently</i> partic			Guard program?
YES NO If yes,	please provide the following	lowing information:	
BRANCH OF SERVICE	SERVICE NUMBER	ENLISTMENT DATE	LENGTH OF OBLIGATION
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OCATION OF SERVICE OF	RUGATION	COMMANDING OFF	EICER'S NAME
OCMITOR OF SERVICE OF	SEIGNITON	COMMINITATION OF T	TEEK STANIE
			iplinary action while in
	or military reserves? Y	ES NO	
intary, National Guard, o	etails (include branch	of service, when, when	re, circumstances):
If yes, please provide d	etans (merade branen		
·	etans (merade branen		

SECTION VI – EDUCATION

Please indicate below all the schools you have attended beginning with high school. During the background investigation, persons who have known you in a learning environment will be contacted. A review of your school records may be made in conjunction with those contacts. To expedite the review of those records, please attach a copy of any diplomas, GED certificates, etc.

HIGH SCHOOL					DATE COMPL	ETED
COLLEGE					DATE COMPL	ETEC
Degre	ee: Associates	Bachelors	Masters	College Major _		_
Degre	ee: Associates	Bachelors	Masters	College Major		_
Additional Trainin	g (List cours	ses, institu	ıtions, and	d dates of co	mpletion)	

SECTION VII - EMPLOYMENT

Beginning with your most current employment, please list all employment (including part time, temporary, and voluntary positions) you have held in the past ten (10) years. For identification and verification, please indicate the nature of the activity, i.e., full time, part time, voluntary, etc. If you have had intervening periods of military service or unemployment, please list those periods in sequence in the spaces provided.

Dates of Employment: From to
Full Time Part Time Voluntary Military Unemployed
Name, Address & Telephone Number of Employer
Name of Supervisor:
Your Title/Duties:
Last Salary Rate: Hourly Weekly Monthly Yearly
Reason for Leaving:
Dates of Employment: From to
Full Time Part Time Voluntary Military Unemployed
Name, Address & Telephone Number of Employer
Name of Supervisor:
Your Title/Duties:
Last Salary Rate: Hourly Weekly Monthly Yearly
Reason for Leaving

SECTION VII - EMPLOYMENT - cont.

Beginning with your most current employment, please list all employment (including part time, temporary, and voluntary positions) you have held in the past ten (10) years. For identification and verification, please indicate the nature of the activity, i.e., full time, part time, voluntary, etc. If you have had intervening periods of military service or unemployment, please list those periods in sequence in the spaces provided.

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Dates of Employment: From to
Full Time Part Time Voluntary Military Unemployed
Name, Address & Telephone Number of Employer
Name of Supervisor:
Your Title/Duties:
Last Salary Rate: Hourly Weekly Monthly Yearly
Reason for Leaving:

Would any problem result if your present employer were contacted during the course of the background investigation? YES \sum NO \sum
If no, when should such contact be made?
If you have had no prior employment, please explain in the space below:
Have you ever been involuntarily terminated or asked to resign from any place of employment? YES NO Service NO Service Have you ever been involuntarily terminated or asked to resign from any place of employment? If yes, please provide details (include when, where, circumstances)
Have you ever been disciplined by your present employer or by any of your past employers? YES NO Service NO Service Have provide details:
Is there anything in your background that, if brought to the attention of the Holly Hill Police, would jeopardize your candidacy as a Holly Hill Police Officer? YES \(\subseteq \text{NO} \subseteq \) If yes, please provide all details (use additional paper if necessary):
To yes, pieuse provide un details (use udditional paper il necessary).
Have you ever applied for any other Law Enforcement position? YES _ NO _
If yes, list the names of all departments you have applied to, dates of application and whether hired or not.

SECTION VIII -PERSONAL PRACTICES & ARREST DATA

Do you use liquor or alcoholic beverages? YES NO
Has it ever been brought to your attention that your use of alcohol has caused problems with your job, your family or your associates? YES NO NO
Has your use of prescription drugs ever caused a problem with your job, your family or your associates? YES \(\subseteq \text{NO} \subseteq \)
Have you ever used any of the following drugs illegally? YES NO If yes, list them on the reverse side and the date of your last use.
Heroin – Cocaine – Percodan – Crank – LSD – Crack – Peyote – Opium - Demerol Methamphetamine – Hallucinogens - Rophynol/GHB – Ecstasy – Marijuana - Hashish Anabolic Steroids – Cannabis – Inhalants
List any other drugs you have used illegally within the last five years and explain on the reverse side your use of them.
Have you ever been involved, arrested or convicted of CDV? (Criminal Domestic Violence) YES \(\subseteq \text{NO} \subseteq \)
Have you ever been involved, arrested or convicted of a CSC? (Criminal Sexual Conduct) YES NO \[\]
Have you ever been involved, arrested or convicted for a crime of the use, sale or possession of a controlled substance? YES \sum NO \sum
Have you ever been involved, arrested or convicted in a crime of DUI? (Driving Under the Influence) YES \(\subseteq \text{NO} \subseteq \)
If you answered yes to any of the above 4 questions, please explain on the reverse.
Have you ever been convicted of a crime that has not been nolle prossed/prosequi, expunged, pardoned or annulled? YES \sum NO \sum If yes, please provide details on the reverse.

SECTION IX – VOLUNTEER SERVICE

(Examples: Scout Leader, 4-H Leader, Youth League Coach, etc.)
SECTION X – HOBBIES/ATHLETICS
List your past or present hobbies. List any athletics participated in individually or as a member of a team.
SECTION XI – SPECIAL SKILLS
(Examples: Aircraft pilot, mechanic, medical training, etc.)
SECTION XII – PERSONAL REFERENCES
List the name, address and phone number of at least three references (non-relatives):
1
2
3
4

ALL APPLICANTS MUST SIGN THE FOLLOWING CERTIFICATION

I certify that there are no misrepresentations in or falsifications of the above statements and answers to questions. I understand that should investigation disclose such misrepresentations or falsifications, my application will be rejected, and, should I be employed, my services will be terminated. You are hereby authorized to make any investigation of my personal and employment history and financial and credit record, including the services of any investigative or credit agencies or bureaus of your choice. I also certify that any addendums to this application are truthful.

I also understand that an investigative consumer report may be made whereby information is obtained

through personal interviews with my neighbors, friends or others	with whom I am acquainted. This
inquiry includes information as to my character, general reputation a	and personal characteristics.
Signature of Applicant	Date

Town of Holly Hill, South Carolina Holly Hill Police Department 8807 Old State Rd, Suite # 1 Holly Hill, SC 29059-8100 Phone – (803) 496-3811 FAX – (803) 496-5617

AUTHORITY FOR RELEASE OF INFORMATION

<i>DATE:</i>
I,, born in, On, having filed an application for employment with the Holly Hill Police
Department , consent to have an investigation made as to my moral character, reputation and fitness for the position to which I have applied. Furthermore, I agree to give any additional information as may be required during the conduct of that investigation.
I also authorize and request every person, firm, company, corporation, governmental agency, court, association, medical facility or institution having control of any documents, records or other written information pertaining to me, to cooperate and allow inspection or to provide copies of said documents, records or other written information to the Holly Hill Police Department or any of its agents or representatives.
I hereby release, discharge and exonerate the Holly Hill Police Department , its agents and representatives, and any person, or any entity so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such written documents, records or other written material to the said Holly Hill Police Department , or any of its agents or representatives.
I have had it explained to me, and I fully understand that refusal to grant this authorization will not, of itself, constitute a basis for rejection of my application.
This authority shall continue for one year from the above date, unless sooner revoked by me in writing.
Signed:
Witness:
Have Signatures Notarized:

Affix seal here