

FORT MILL POLICE DEPARTMENT



EMPLOYMENT APPLICATION

Application for Employment

Your interest in employment with the City of Fort Mill is appreciated,
and you will be contacted by phone or mail should an interview be appropriate.
This application will remain active for six (6) months.

Please type or complete in black ink only.

Today's Date _____

NAME _____
(Last) (First) (Middle)

NICKNAME/ OTHER NAMES USED _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____

E-MAIL ADDRESS _____

ADDRESS _____

LIST POSITION & SALARY DESIRED

CITY _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY # _____

DRIVER'S LICENSE # _____ STATE & EXPIRATION DATE _____

COMMERCIAL DRIVER'S LICENSE # _____ CLASS _____

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No

If yes, provide details: _____

B. Has your license, permit or privilege ever been suspended or revoked? Yes No

If yes, provide details: _____

PLACE OF BIRTH _____

LIST ANY OTHER LAW ENFORCEMENT AGENCIES YOU HAVE APPLIED WITH AND WHEN YOU APPLIED:

Have you ever been convicted of a crime (other than minor traffic violations)?* Yes No

If yes, provide: Charge: _____ Place: _____

Date: _____ Disposition: _____

Are there any charges/indictments now pending against you? * Yes No

If yes, explain: _____

*NOTE: A "YES" answer to the two questions above will not necessarily bar you from employment. The nature, severity and date of the offense in relation to the position for which you are applying are considered.

ARE YOU AT LEAST 21 YEARS OF AGE?* Yes No

*Age required by the State of South Carolina to attend the SC Criminal Justice Academy and possess a handgun

ARE YOU ELIGIBLE TO CARRY AND POSSESS A FIREARM? Yes No

AVAILABILITY

- Immediately
- After two week notice

- Are you willing to work (check all that apply):** Inclement Weather Outdoors
- Full-Time (37.5 or more hours per week) Temporary (no benefits) Weekends
- Part-Time (Less than 37.5 hours per week) Rotating Shifts Holidays

Are you a citizen of the United States? Yes No

Are you an alien lawfully authorized to work in the United States? Yes No

EDUCATION

NAME & LOCATION OF SCHOOLS	DATES ATTENDED	GRADUATE YES <input type="checkbox"/> NO <input type="checkbox"/>	DEGREE	MAJOR

OTHER EDUCATION

MILITARY

What branch of the armed forces did you serve? _____ Years: _____

What type of training or education did you receive in the military? _____

Have you worked for the Town of Fort Mill before?
 Yes No If yes, what department and when?
 Do you have any relatives working for the Town of Fort Mill?
 Yes No If Yes, who?

REFERENCES

Please list name, occupation, and phone number of three professional or personal references

1. _____
2. _____
3. _____

EMPLOYMENT HISTORY

List below your experience record. Please include part-time and temporary employment, as well as job-related military service. Start with your present or most recent job. Account for any gaps in your employment history. List any self-employment. Attach additional sheets if necessary. List your most recent job first.

Company Name: _____ Address: _____
Phone Number: _____ Dates Employed: _____
Title/Duties: _____
Salary: _____ Supervisor's Name/Number _____
May we contact? (If no, explain why not): _____

Company Name: _____ Address: _____
Phone Number: _____ Dates Employed: _____
Title/Duties: _____
Salary: _____ Supervisor's Name/Number _____
May we contact? (If no, explain why not): _____

Company Name: _____ Address: _____
Phone Number: _____ Dates Employed: _____
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Salary: _____ Supervisor's Name/Number _____
May we contact? (If no, explain why not): _____

Company Name: _____ Address: _____
Phone Number: _____ Dates Employed: _____
Title/Duties: _____
Salary: _____ Supervisor's Name/Number _____
May we contact? (If no, explain why not): _____

Check as applicable:

- I hereby certify that all statements made herein and/or attached hereto are true to the best of my knowledge, and I understand that, if employed, any falsehood or misrepresentation is cause for separation from service with the City of Fort Mill.
- I authorize the release of such information as my work, school, police, medical, credit, personal, and mental records, and other information as needed to determine my qualifications and fitness for the position I am seeking with the City of Fort Mill, or fitness for any position I may hold with the City of Fort Mill.
- I hereby release former employers and reference sources from all liability for divulging such information.
- I agree to submit to pre-employment drug testing. I understand that testing positive for use of an illegal drug, abuse of a legal drug, use of an unprescribed legal drug, refusal to take the test, or failure to keep the scheduled appointment for the test will generally result in denial of employment with the City of Fort Mill.

APPLICANT'S SIGNATURE _____ DATE _____

This application is not, and is not intended to be, a contract of employment.

Notice:

**This application will not be considered complete without copies
the following documents attached:**

- High school, GED, College diplomas and/or transcripts
- Driver's license
- DD214 (if applicable)

Please scan and email the completed form to greams@fortmillsc.gov or mail/drop off to:

**Fort Mill Police Department
112 Confederate Street
Fort Mill SC 29715**