



## **Harleyville Police Department Employment Application**

Please print out this application, fill it out, and submit along with the required documents using one of the following:

**Drop off or mail to:**

Harleyville Police Department  
122 West Main Street  
Harleyville, SC 29448

**Email to:** [policechief@homesc.com](mailto:policechief@homesc.com)

**Fax to:** (843) 462-2485

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO  Are you 18 Years or Older? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Special Training or Skills: \_\_\_\_\_

### References

Please list three professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Police Department Applicants must include the following documentation.

Incomplete Applications will not be considered.

1. Copy of Driver's License
2. Certified 10 Year Driver's History (Available from DMV)
3. Copy of Social Security Card
4. Copy of Birth Certificate
5. Copy of Credit Report
6. Copy of High School Diploma or GED
7. Copy of any advance training/education/certification (College Diploma, Job Certifications, etc)
8. Copy of DD-214 (If prior service military)
9. Consent to background check

***\*\*\*If Applicant has been previously certified as a Law Enforcement Officer, a Law Enforcement Employment History MUST be completed, and you must list EVERY Law Enforcement Agency at which you have been employed. Print as many copies as necessary or use a blank sheet of paper utilizing the same format. \*\*\****



Harleyville Police Department



Authorization for Background Check

To Whom It May Concern:

I, \_\_\_\_\_, hereby authorize the RELEASE of any/all information about myself from any source deemed necessary, to a representative of the Harleyville Police Department, prior to my being considered for employment. This RELEASE may include, but is not limited to: Criminal History, Employment History, Disciplinary Records, Training Records, etc.

Only relevant information obtained through this investigation shall be considered for employment purposes.

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY?

YES \_\_\_ NO \_\_\_

Explain if yes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
ALIASES

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
SOCIAL SECURITY NUMBER (LAST 4)

\_\_\_\_\_  
DRIVER'S LICENSE NUMBER/ STATE ISSUED

\_\_\_\_\_  
DATE SIGNED

**Law Enforcement Employment History**

**Employee Name:** \_\_\_\_\_

**Academy ID Number:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Hire Date:** \_\_\_\_\_

**Separation Date:** \_\_\_\_\_

**Reason For Separation:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Hire Date:** \_\_\_\_\_

**Separation Date:** \_\_\_\_\_

**Reason For Separation:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Hire Date:** \_\_\_\_\_

**Separation Date:** \_\_\_\_\_

**Reason For Separation:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Hire Date:** \_\_\_\_\_

**Separation Date:** \_\_\_\_\_

**Reason For Separation:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Hire Date:** \_\_\_\_\_

**Separation Date:** \_\_\_\_\_

**Reason For Separation:** \_\_\_\_\_