



All-America City

HARTSVILLE

South Carolina

Hartsville Police Department



Dear Prospective Police Applicant:

Thank you for your interest in a career with the City of Hartsville Police Department. To begin the application process, all applicants are required to submit a complete application packet. Incomplete application packets will not be considered.

Requirement of applicant:

- * 21 years of age
- * High School Diploma or equivalent
- * Ability to complete the South Carolina Criminal Justice Academy (9 weeks)
- * Possess valid South Carolina driver's license
- * Vision correctable to 20/20

Application packet must include:

- * Signed application (Available @ City Human Resources office or may be downloaded @ www.hartsvillesc.com)
- * Signed waivers and notarized where applicable
- * Ten-year driving record (Driving records must cover all states where a license was held over the past 10 years)
- * Copy of SC Law Enforcement Certification
- * Copy of social security card and driver's license
- * Copy of High School Diploma or State GED certificate
- * Copy of birth certificate or Certificate of Naturalization (if US citizen through Naturalization process)
- * A certified copy of college transcript(s), if you have attended or graduated from college
- * A copy of DD214 (former military service members must furnish their final DD214)

Candidates for employment are prohibited from having visible tattoos while in uniform. Males will not wear earrings while on duty except in undercover situations and with prior approval.

As an equal opportunity employer, it is the policy of the City of Hartsville Police Department to only hire qualified applicants who are best suited for employment with our agency without regard to race, religion, color, national origin, age, sex, marital status, sexual orientation, or affiliation or any other unlawful discriminator(s). The following steps may occur in the employment process:

- * Preliminary review of application packet (HR to determine minimum qualifications and then by the hiring Department)
- * Preliminary background investigation to include at a minimum:
 - o Driver's license, criminal history (NCIC), and credit check
 - o Verification of prior employment, education and experience
- * Interview with background investigator (may occur more than once)
- * Contact references (in person where practical)
- * Thorough investigation of any adverse disclosures or discoveries
- * Physical agility testing - A detailed task orientation will be given on the day of the test.
- * Written Testing
- * Oral Interviews
- * Interview with Command staff and/or Professional Board
- * Interview with Chief of Police, HR Director, City Manager
- * Conditional offer of employment
- * Psychological Testing
- * Polygraph Exam
- * Drug testing and physical examination
- * Orientation for employment

You will be contacted if you are considered beyond the preliminary review of your application. Our process could take from one to three months depending on the department's status of hiring, the scheduling of testing and the applicant's particular background. Should you not be selected at this time, you may reapply and repeat the process. Please feel free to call with any questions.

Best Wishes,

Jerry Thompson
Chief of Police (Interim)



APPLICATION FOR AT-WILL EMPLOYMENT



HARTSVILLE

South Carolina

Police Department

This application must be completed in full and signed in blue ink. Incomplete or unsigned applications will not be considered. Mark all areas that do not apply with "N/A" so as not to leave it to our interpretation as to why it was left blank. If you are selected for an interview, the appropriate department will notify you. Be aware that certain information contained in this completed application may be subject to the **Freedom of Information Act. Thank you for your interest in employment with the City of Hartsville.**

PLEASE PRINT. (This application is not, and is not intended to be, a contract of employment.)

Date _____

Name _____ Driver's License # _____ State & Exp Date _____

Address _____ City _____ State _____ ZIP _____

Home Phone _____ Work Phone _____ Cell Phone _____

List ALL other names you have used. Include circumstances and dates when used. _____

Have you ever been denied a license, permit or privilege to operate a motor vehicle or had your license, permit or privilege suspended or revoked? Yes No
 If yes, provide details: _____

Have you been convicted, pled no contest, or pled not guilty of a crime other than a minor traffic violation? Yes No
 NOTE: Conviction is not necessarily a bar to employment. Circumstances surrounding the conviction and job applied for are considered.
 If yes, please explain. _____

Are there any charges or indictments now pending against you? Yes No
 If yes, please explain: _____

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

Have you ever worked for the City of Hartsville? Yes No I am currently a City employee
 If yes, what department, position and when? _____

Have you ever been terminated or forced to resign from any job? Yes No
 If yes, please explain: _____

AVAILABILITY

<input type="checkbox"/> Immediately	Are you willing to work (check all that apply):	<input type="checkbox"/> Inclement Weather	<input type="checkbox"/> Outdoors
<input type="checkbox"/> After two week notice		<input type="checkbox"/> Full time (40 hr per week)	<input type="checkbox"/> Nights/Weekends
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Part time (Less than 30 hr per week)	<input type="checkbox"/> Rotating Shifts
			<input type="checkbox"/> Overtime
			<input type="checkbox"/> Holidays

EDUCATION

What specific academic, vocational, technical or professional education(s) have you had that relates to this job?

 Circle last grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 / GED / College 13 14 15 16 / Graduate School 17 18 19

NAME & LOCATION OF SCHOOL	DATES ATTENDED	GRADUATE		DEGREE	MAJOR
		Yes _____	No _____		
		Yes _____	No _____		
		Yes _____	No _____		
		Yes _____	No _____		

SKILLS

Computer Software	Indicate the types of software you are skilled in using: <input type="checkbox"/> Windows <input type="checkbox"/> Word <input type="checkbox"/> Excel <input type="checkbox"/> PowerPoint <input type="checkbox"/> Access <input type="checkbox"/> Outlook <input type="checkbox"/> WordPerfect <input type="checkbox"/> Lotus 1-2-3 <input type="checkbox"/> AutoCAD <input type="checkbox"/> Other: _____
Equipment	Indicate the types of equipment you are skilled in operating: <input type="checkbox"/> Trucks/Dump trucks <input type="checkbox"/> Backhoes <input type="checkbox"/> Motor Graders <input type="checkbox"/> Other _____
Professional Registrations/Licenses/Certifications	Please list (Examples: CPA, EMT, CPR, Water and Wastewater certifications):
Other Training (Include Military)	

MILITARY SERVICE

Branch _____ Rank _____ Date Entered _____ Date Discharged _____

Have you ever been the subject of a judicial or non-judicial disciplinary action while in the military? Yes No

If yes, please explain. _____

Were you ever court martialled, tried on charges or subject of a summary court, desk court, Captain's Mast, company punishment or any other type of disciplinary action while in the armed forces? Yes No

If yes, please explain. _____

List all medals and decorations awarded you during your military service. _____

Are you a member of the Reserve or National Guard? Yes No

Ready Standby Unit and location: _____

List any disciplinary action taken while in the National Guard or other reserve unit. _____

How long have you lived at your present address? _____

List ALL previous places, states and dates of residence since age 18. (Attach a separate page, if necessary) _____

List complete name of person that you are currently residing with: _____

List those individuals whom you have resided with during the last five (5) years. Exclude family members.

FULL NAME PRESENT ADDRESS PHONE NUMBER

Have you ever been dismissed from school or been subject to any disciplinary action, such as scholastic probation during your academic career? Yes No

If yes, please indicate circumstances of rules infraction and action taken by school or university. _____

Are you currently a certified law enforcement officer? Yes No

If yes, please list state(s) of certification. _____

Have you ever applied to any law enforcement agency in South Carolina or any other state? Yes No

If yes, give name of the agency(s) and date(s) of application. _____

Have you ever worked for any law enforcement agency in South Carolina or any other state? Yes No

If yes, give the name of the agency(s) and dates of employment. _____

CREDIT RECORD

Has your credit record ever been considered unsatisfactory due to collections, charge-offs with a balance, liens, involuntary repossession, failure to pay just debts, judgments or foreclosures? Yes No

If yes, please explain. _____

DRIVER'S LICENSE RECORD

Have you ever possessed a driver's license issued by another state? Yes No

If yes, please give the state, number and expiration date. _____

If you answered yes, was your license ever suspended or revoked? Yes No

If yes, please give reason, state, date and reinstatement date. _____

Are your driving privileges restricted? Yes No

If yes, please list restrictions. _____

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

List the current liability insurance you have on your motor vehicles. _____

REFERENCES

List three (3) persons (not former employers or relatives) whom you have known for at least three (3) years.

Name	Address	Phone	Occupation

List any relative(s) employed by the City of Hartsville (give name, department, and relationship to you). _____

EMPLOYMENT HISTORY

Please include part-time and temporary employment, as well as job-related military service. List any self-employment. **Attach additional sheets if necessary.**

May we contact your current employer? Yes No

Current Employer:
Name of Company _____ Address _____
Telephone Number () _____
Starting Date _____ Entry Job Title _____ Entry Salary \$ _____ per _____
Ending Date _____ Ending Job Title _____ Ending Salary \$ _____ per _____
Detailed Description of Duties _____
Name and Title of Supervisor _____
Reason for Leaving _____

Previous Employer:
Name of Company _____ Address _____
Telephone Number () _____
Starting Date _____ Entry Job Title _____ Entry Salary \$ _____ per _____
Ending Date _____ Ending Job Title _____ Ending Salary \$ _____ per _____
Detailed Description of Duties _____
Name and Title of Supervisor _____
Reason for Leaving _____

Next Most Recent Employer:
Name of Company _____ Address _____
Telephone Number () _____
Starting Date _____ Entry Job Title _____ Entry Salary \$ _____ per _____
Ending Date _____ Ending Job Title _____ Ending Salary \$ _____ per _____
Detailed Description of Duties _____
Name and Title of Supervisor _____
Reason for Leaving _____

Next Most Recent Employer:
Name of Company _____ Address _____
Telephone Number () _____
Starting Date _____ Entry Job Title _____ Entry Salary \$ _____ per _____
Ending Date _____ Ending Job Title _____ Ending Salary \$ _____ per _____
Detailed Description of Duties _____
Name and Title of Supervisor _____
Reason for Leaving _____

Next Most Recent Employer:
Name of Company _____ Address _____
Telephone Number () _____
Starting Date _____ Entry Job Title _____ Entry Salary \$ _____ per _____
Ending Date _____ Ending Job Title _____ Ending Salary \$ _____ per _____
Detailed Description of Duties _____
Name and Title of Supervisor _____
Reason for Leaving _____

COURT/CRIMINAL RECORD

Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group or combination of persons which is totalitarian, fascist, communist or subversive, or shows a policy of advocating the commission of acts of force or violence to deny other people their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means? Yes No

If yes, please explain. _____

List all traffic citations except parking tickets. _____

Were you ever arrested or charged with any violation? List below even if there were no formal charges, no court appearance, found not guilty or other disposition. _____

List any court action where you have ever been a plaintiff or defendant, including divorce. _____

Has any court:

- 1) Placed you on probation? Yes No
- 2) Prohibited you from possessing a firearm? Yes No

If yes to either, please give details including dates, when, where and why. _____

Have you ever been:

- 1) Required to appear before a juvenile court for an act which would have been a crime if committed by an adult? Yes No
- 2) Reported to law enforcement as a missing person or runaway? Yes No
- 3) Questioned by law enforcement authorities? Yes No
- 4) Been contacted by the police as a possible suspect for any type of criminal investigation? Yes No
- 5) Charged with a crime? Yes No
- 6) Convicted of a felony? Yes No

If you answered yes to any of the above please explain. If more room is required, please attach additional sheets. _____

Have you ever:

- 1) Lied about anything really important? Yes No
- 2) Told a lie to stay out of trouble? Yes No
- 3) Had a warrant taken out on you? Yes No
- 4) Participated in an *undetected* crime? Yes No
- 5) Altered price tags in a store? Yes No
- 6) Lied under oath in court? Yes No
- 7) Lied on an official document? Yes No
- 8) Stolen anything? Yes No
- 9) Had any traffic violation? Yes No
- 10) Habitually use(d) alcoholic beverages to excess? Yes No

If you answered yes to any of the above please explain. If more room is required please attached additional sheets. _____

Have you ever used illegal drugs? Yes No

If yes, please list the type of drug, dates first and last used. _____

Have you ever been treated for illegal drug addiction? Yes No

If yes, please explain. _____

Have you ever sold illegal drugs? Yes No

If yes, were you convicted? Yes No

If convicted, was the conviction a felony or a misdemeanor? _____

PERSONAL INFORMATION

Have you ever or are you now engaged in a private business? Yes No

If yes, list your capacity, name of business and dates. _____

Do you:

- 1) Object to wearing a uniform? Yes No
- 2) Object to being away from home for long period of time due to official duties? Yes No
- 3) Object to working a regular shift (8am to 5pm)? Yes No

Have you ever been bonded? Yes No If yes, on what job(s)? _____

Do you have any physical limitations that preclude you from performing the following job duties?

- Stand for long periods of time, climb, balance, stoop, kneel, crawl, crouch Yes No
- Frequently lift or move objects up to 50 pounds and occasionally lift or move objects up to 165 pounds Yes No
- Adjust vision/focus in the use of firearms and operation of motor vehicles Yes No

If yes, describe such restrictions and specific work limitations. _____

Do you have any physical limitations that preclude you from working in the following work environments?

- All weather conditions including temperature extremes and wet, humid environments Yes No
- During day and night Yes No
- Under emergency and stressful situations Yes No
- Exposure to hearing alarms and gunfire Yes No
- Exposure to smoke, noxious odors, fumes, chemicals, liquid chemicals, radioactive materials, solvents and oils Yes No
- Near moving mechanical parts, vibrations and in areas with risk of electrical shock Yes No
- In high, precarious places Yes No

If yes, please describe such restrictions and specific work limitations. _____

RELATIVES/FRIENDS EMPLOYED BY GOVERNMENT

List complete names, location and place of employment of any close relatives or friends (including in-laws) who are employed in law enforcement. _____

List the following information concerning relatives. If you have been married more than once, list information concerning each former spouse. If you or your spouse has stepparents, legal guardians or other with whom you lived other than your parents please include them. If you are engaged to be married in the near future, complete information should be included about your future spouse and future in-laws as well.

FULL NAME	PRESENT ADDRESS	PHONE NUMBER
-----------	-----------------	--------------

Father: _____

Mother: _____

Spouse: _____

Father-in-law: _____

Mother-in-law: _____

Children: _____

Other: _____

PLEASE CAREFULLY READ THE FOLLOWING STATEMENTS AND SIGN

Student Loan: State Law (59-111-50) prohibits employment with any subdivision of the State to people who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. By my signature, I certify that I am not currently in default on a student loan.

Signature _____ **Date** _____
Required in blue ink

Selective Service: All males between the ages of 18 and 25 are required to be registered with Selective Service. By my signature, I certify that I have registered with Selective Service.

Signature _____ **Date** _____
Required in blue ink

SECTION A:

It is the policy of the City of Hartsville to select an applicant deemed most suitable to fill each position based on educational background, related work experience, and other work related factors. The City of Hartsville is an Equal Opportunity Employer.

It is further the policy of the City of Hartsville to recruit, hire, train and promote employees and applicants without regard to race, religion, color, national origin, age, sex, marital status, sexual orientation, or affiliation of any other unlawful discriminator(s).

The City of Hartsville has designated the following (person or office) as the contact to coordinate efforts to comply with this requirement. Inquiries should be directed to: Sherron L. Skipper, Administrative Services Director
Post Office Drawer 2497
Hartsville, South Carolina 29551
(843) 383-3018

SECTION B:

- I hereby affirm that all statements made herein or attached hereto are true and correct. I understand that all statements are subject to verification and any omission, false, misleading or incomplete statements are grounds to bar me from employment or for dismissal.
- I agree to submit to a urine drug screen, physical or other medical tests, if required for this position. The results of such may be grounds for disqualifying me or terminating my employment.
- I understand and agree that if employed, I will be an employee "at-will" and will have the right to terminate my employment at any time, with or without notice and with or without cause, and that the city has the same right.
- I understand that if hired, I must meet the eligibility verification requirements of the Federal Immigration and Naturalization Service and submit appropriate documentation to satisfy the requirements of completing INS Form I-9. This documentation will be provided to the Department of Homeland Security to confirm work authorization through E-Verify.
- I authorize and request each former employer and person, firm or corporation, given as a reference, to answer any and all questions that may be asked, and to give any and all information that may be sought in connection with this application concerning my work habit, character and/or skill.
- The use of this application form in no way obligates the City of Hartsville.
- I certify that I have read, understand and agree to all the statements listed above.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

APPLICANT'S SIGNATURE _____ **DATE** _____
Required in blue ink



All-America City

HARTSVILLE

South Carolina

RELEASE OF INFORMATION

I hereby request and authorize my former employers or other agencies to provide any information requested by the City of Hartsville concerning my employment, including but not limited to, information or opinions as to my character, habit, ability, work record, and reasons for leaving employ; and to investigate and ascertain any and all information concerning my background and my character which may pertain to my qualifications to be considered for employment with said agency. I understand that such information may be obtained from any person, document, or other source, and I hereby expressly authorize the release of any such information and/or document.

I understand that if I am applying for employment with certain departments within the City of Hartsville that my credit rating will also be checked. I further understand that if the City of Hartsville is unable, through the exercise of reasonably diligent investigative methods, to obtain information concerning my background, credit rating, and character necessary to evaluate my qualifications to be accepted for employment by the City of Hartsville, I may be rejected for such employment.

I hereby release the City of Hartsville, any person or entity acting on their behalf, and any and all of my former employers, their officers, agents, and employees, from any and all claims, liability, or damage of any kind, whether due to negligence, error or any other cause, as a result of releasing said information to any member of the City of Hartsville, or any person or entity acting on their behalf. I further understand that in consideration for said release, the City of Hartsville will regard all information so obtained as confidential and shall not release the same to any person without my express consent.

A copy or fax of this authorization shall be as effective and valid as the original.

Print your name

XXX-XX-_____
Social Security Number
Last 4 Digits

Signature (Required in Blue Ink)

Date





IMPORTANCE OF HONESTY STATEMENT

It is extremely important that you are completely honest in all of your answers. Honesty is the most important characteristic that you must demonstrate.

The importance of honesty from the time of completion of all application documents, questionnaires and during all interviews cannot be overemphasized. Failure to respond to any questions accurately and completely, whether orally or in writing will result in disqualification. Applicants have been disqualified for dishonesty.

While filling out all documents, you are cautioned to take your time and to be thorough and specific in all answers. If you have any doubt in your mind concerning a particular question, or if you are unsure whether to include certain information, the answer is "Yes, include it."

You may think that something you have done will disqualify you from further consideration. That may or may not be the case. What will certainly disqualify you is lying or distorting the truth. For example, an arrest, being fired from a job, use of drugs, etc. may or may not disqualify you; however, lying about it will disqualify you from further consideration.

By signing below, I acknowledge I have read and understand the contents of the Importance of Honesty Statement.

Name of Applicant

Applicant Signature (Sign in blue ink)

Date





CITY OF HARTSVILLE
NOTICE OF OBTAINING CONSUMER REPORT
(Consumer Report & Investigative Consumer Report)

To: _____
(Name of Applicant)

In connection with your application for employment, The City of Hartsville may obtain a Consumer report as defined by the fair Credit Reporting Act concerning you from a consumer reporting agency. This report will be used for employment purposes.

_____/_____/_____
Date

Signature of Employer

I have read and understand the above disclosure and hereby authorize The City of Hartsville to obtain a consumer report.

_____/_____/_____
Date

Signature of Applicant



All-America City

HARTSVILLE

South Carolina

CITY OF HARTSVILLE

CERTIFICATION

(Consumer Report & Investigative Consumer Report)

I certify that The City of Hartsville has complied with 15 U.S.C. Section 1681b(4)(b)(2) and will comply with 15 U. S. C. Section 1681b(4)(b)(3) by providing _____ with a copy of the report and a description of his or her rights under the Fair Credit Reporting Act prior to taking adverse action based in whole or in part on the report received. I further certify that information from the consumer report will not be used in violation of any applicable Federal or State equal employment opportunity law or regulation.

_____/_____/_____
Date

Signature of Applicant

SS# _____ - _____ - _____

Phone: 1-800-345-2746
Fax: 1-888-571-7222
Email: ics11@bellsouth.net



INNOVATIVE CREDIT SOLUTIONS, INC.

PO Box 1386
Columbia, SC 29202
www.icscredit.com
www.creditcommander.com/icscredit

AUTHORIZATION FOR RELEASE OF PERSONAL BACKGROUND INFORMATION

I, the undersigned, authorize Innovative Credit Solutions (ICS), and/or any and all financial institutions, credit bureaus, credit processing companies or other credit assembling entities to provide documentation of my current credit status & criminal records (including felony and misdemeanor records) to:

City of Hartsville, South Carolina
(NAME OF COMPANY REQUESTING REPORT)

Person reports are requested on:

Print Name: _____ Date: _____

Signature: _____

Social Security: _____ DOB: _____

Present Address: _____

City _____ State: _____ ZIP (required): _____

*A copy of the prospective employee's application may be needed for processing some of the pre-employment reports.

PHONE 1-800-345-2746 FAX 1-888-571-7222

INNOVATIVE CREDIT SOLUTIONS, INC.
1011 HEYWARD STREET
P.O. BOX 1386
COLUMBIA, SC 29202
www.icscredit.com email: ics11@bellsouth.net

MEMORANDUM

TO: All Sworn Personnel
FROM: Personnel Director
RE: Change in Law Pertaining to Possession of Firearms/Ammunition
DATE: September 10, 1997

Two recent amendments to the Gun Control Act of 1968 have significant impact on Law Enforcement Officers by restricting an officer's ability to possess a firearm. The 1996 amendment adds sections that make it illegal to provide a firearm or possess a firearm if the person:

has been convicted in any court of a misdemeanor crime of domestic violence.
18 USC 922(d)(9); also see 18 USC 922(g)(9).

As defined in the new law, a "misdemeanor crime of domestic violence" means any offense, whether or not explicitly described in a statute as a crime of domestic violence, which has, as its factual basis, the use or attempted use of physical force (i.e., simple assault, assault and battery), or the threatened use of a deadly weapon, committed by the victim's current or former domestic partner, parent or guardian.

There is no time limit on the conviction. Thus any law enforcement officer with such a disability would be in violation of Federal Law if he currently possessed a firearm even if the criminal domestic violence conviction occurred prior to the passage of the law.

The 1994 amendment added sections which make it illegal to provide a firearm to any person or for that person to possess a firearm if the person:

is subject to a court order that restrains such person from harassing, stalking, or threatening an intimate partner of such person or child of such intimate partner or person, or engaging in other conduct that would place an intimate partner in reasonable fear of bodily injury to the partner or child... 18 USC 922(d)(8); also see 18 USC 922(g)(8).

The restraining order has to meet three conditions:

- A. issued after a hearing of which the person had actual notice and an opportunity to participate;
- B. restrains the person from harassing, stalking, or threatening an intimate partner, or engaging in other conduct that would place an intimate partner in reasonable fear of bodily injury;
- C. includes a finding that the person represents a credible threat to the physical safety of the partner or by its terms explicitly prohibits the use, attempted use, or threatened use of physical force against the intimate partner that would reasonably be expected to cause bodily harm.

All employees who are in possession of an agency issued firearm and/or ammunition or who have received authority to carry a privately owned firearm/ammunition in the performance of his/her duties or while off duty under agency policy must complete the attached affidavit and return it to his/her supervisor by September 12, 1997. Failure to return the affidavit or to provide false information in the affidavit will subject you to agency disciplinary procedures and may be used in a prosecution for false swearing as provided by law. **YOUR ANSWERS OR INFORMATION GAINED BY REASON OF YOUR ANSWERS CANNOT BE USED AGAINST YOU IN ANY CRIMINAL PROSECUTION FOR A VIOLATION OF 18 USC SECTION 922 (g) 9, 922 (g) 8, 922 (d) 8, or 922 (d) 9.**

If you answer "yes" or "not certain" to either of the questions in the affidavit, you must immediately turn over any agency issued firearms/ammunition to your immediate supervisor.

This is a continuing obligation. Thus if you are the subject of a restraining order or convicted of Criminal Domestic Violence in the future, you must immediately notify your supervisor.

If you have any questions about this memorandum, please contact your agency attorney.

COUNTY OF DARLINGTON)
CITY OF HARTSVILLE)
STATE OF SOUTH CAROLINA)

AFFIDAVIT

Personally appeared before me, _____, who first being sworn, deposes and says that (s)he has read the attached memo which explains the provisions of the Gun Control Act of 1968 and (s)he answers the following questions to the best of his/her knowledge and belief and further understands that furnishing false information may be grounds for adverse personnel action as well as prosecution for false swearing.

Have you been convicted of a misdemeanor crime of domestic violence within the meaning of the statute as defined in the memo pertaining to possession of firearms/ammunition?

___ yes ___ no ___ not certain

(If uncertain, explain here or on attachment.)

Are you subject to a current restraining order issued by any court which restrains you from harassing, stalking, or threatening a past or present intimate partner or child of such intimate partner or person. or engaging in other conduct that would place an intimate partner in reasonable fear of bodily injury to the partner or child and which includes a finding that you represent a credible threat to the physical safety of the person or by its terms explicitly prohibits the use, attempted use, or threatened use of physical force against the person that would reasonably be expected to cause bodily harm, as defined in the memo pertaining to possession of firearms/ammunition?

___ yes ___ no ___ not certain

(If uncertain, explain here or on attachment.)

WITNESSED, this ____ day of _____, _____.

Applicant Signature (In Blue Ink)

Applicant Printed Name (In Blue Ink)

Sworn to before me this ____ day of _____, _____.

Notary Public for South Carolina
My commission expires on _____.

Applicant Data Record

Name _____ Position _____ Date _____

The information requested below is needed for state and federal reporting and internal personnel research. This information will be kept in a confidential file within the Human Resources Office.

Qualified applicants are considered for all positions and are treated without discrimination as to race, religion, color, national origin, age, sex, marital status, sexual orientation, or affiliation or any other unlawful discriminator(s).

DATE OF BIRTH _____ SEX Male Female

ETHNIC BACKGROUND (check one) White
 Black or African American
 Native Hawaiian or Other Pacific Islander
 Asian
 Hispanic or Latino
 American Indian or Alaska Native
 Two or more races

How were you referred to the City of Hartsville? Check which one(s) apply.

Walk-In Friend or Relative College Placement City Employee Newspaper Ad
 Internet Agency Other _____

In cooperation with the Family Independence Act of 1995, we are actively recruiting Family Independence, Welfare and food stamp recipients. If you are eligible, you may also qualify for special job training.

Are you currently receiving AFDC or food stamps? Yes No

To Vietnam Era Veterans, Disabled Veterans and Individuals with physical or mental disabilities:

You are invited to volunteer this information, if you qualify, to assist in proper placement and determining reasonable accommodation. This information will be considered confidential. Refusal to provide this information will not adversely affect your consideration for employment.

If you so wish to be identified, please check if any of the following are applicable:

Vietnam Era Veteran (served between 1964-1975) Disabled Veteran Individual with a disability



An Equal Opportunity Employer

Please contact Sherron Skipper at (843) 383-3018 to give advance notice if you need a reasonable accommodation.