



LANCASTER COUNTY SHERIFF'S OFFICE

Barry S. Faile, Sheriff

Application for Employment

Attention Applicant: Completing this packet is your first step toward joining the Lancaster County Sheriff's Office, a dynamic law enforcement agency dedicated to excellence in public service. In order to present the strongest, most accurate record of your qualifications and skills, please read this packet thoroughly and prepare it carefully. Neither this application, the attendant forms, or any of the language used herein implies or creates any type of employment contract between LCSO and the applicant/employee, nor do they create any contractual rights or entitlements. **No promises or assurances (whether written or oral) which are contrary to or inconsistent with this paragraph create any contract of employment.** All LCSO employees have at least occasional access to law enforcement sensitive information. As such they are subject to a thorough pre-employment background investigation, and must complete the entire application and sign where required.

Position for Which You Are Applying:

- Deputy Sheriff Detention Officer Administrative
- Other (specify) _____

Personal/Contact Information

NAME _____
Last First Middle Suffix?

ADDRESS _____
Number & Street City State Zip Code

HOME/DAY TELEPHONE _____ EVENING/ALTERNATE TELEPHONE _____

SOCIAL SECURITY # _____ DRIVERS LICENSE # _____ STATE _____

EMAIL _____ DATE OF BIRTH _____

DATE AVAILABLE TO START _____ CERTIFIED LAW ENFORCEMENT OFFICER? _____

ANY RELATIVES EMPLOYED BY LCSO? (Please list names) _____

MILITARY SERVICE: BRANCH _____ DATES _____ TO _____ DD214 AVAIL? _____

Education (High School/College)

School Name and Location	Dates Attended	Certificate or Degree
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Family Information

Father

Full Name (No Initials): _____ Nickname(s) or Alias: _____

Living or Deceased: _____

Address: _____ City: _____ State: _____

Occupation: _____

Employer's Name and Address: _____

Military Service: _____

Branch

Rank

Dates

Mother

Full Name (No Initials): _____ Nickname(s) or Alias: _____

Living or Deceased: _____

Address: _____ City: _____ State: _____

Occupation: _____

Employer's Name and Address: _____

Military Service: _____

Branch

Rank

Dates

Spouse (If applicable)

Full Name (No Initials): _____ Nickname(s) or Alias: _____

Living or Deceased: _____

Address: _____ City: _____ State: _____

Occupation: _____

Employer's Name and Address: _____

Military Service: _____

Branch

Rank

Dates

Brothers/Sisters

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Work Experience & History

Describe your work experience in detail beginning with your most recent job (attach additional sheets if required). Include military service (indicate rank) and job related volunteer work, if applicable. Provide an explanation for any gaps in employment. **All information in this section must be complete. A resume may be attached, but not substituted for completing this section.**

Present or last employer _____ Title _____
Address _____ Phone _____
Supervisor _____ Hours per week _____ Annual Salary _____
Months/Years of Employment: From _____ to _____ Total time employed _____
Reason for leaving _____ May we contact? _____
Job duties (provide details) _____

Next most recent employer _____ Title _____
Address _____ Phone _____
Supervisor _____ Hours per week _____ Annual Salary _____
Months/Years of Employment: From _____ to _____ Total time employed _____
Reason for leaving _____ May we contact? _____
Job duties (provide details) _____

Next most recent employer _____ Title _____
Address _____ Phone _____
Supervisor _____ Hours per week _____ Annual Salary _____
Months/Years of Employment: From _____ to _____ Total time employed _____
Reason for leaving _____ May we contact? _____
Job duties (provide details) _____

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Next most recent employer _____ Title _____
Address _____ Phone _____
Supervisor _____ Hours per week _____ Annual Salary _____
Months/Years of Employment: From _____ to _____ Total time employed _____
Reason for leaving _____ May we contact? _____
Job duties (provide details) _____

Additional Skills, Qualifications, and Experiences

Please list any other job-related skills, qualifications, or licenses which would benefit LCSO in the job for which you have applied (i.e, foreign language fluency, instructor certifications, specific computer skills, etc.)

Background Information

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

HAVE YOU EVER BEEN TERMINATED OR FORCED TO RESIGN FROM ANY JOB? YES NO

IF YES, EXPLAIN _____

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? YES NO

IF YES, LIST ALL CHARGES AND LOCATIONS (OMIT MINOR TRAFFIC VIOLATIONS) _____

Provide the names and contact information of three persons (EXCLUDE relatives and coworkers) who are familiar with your work and personal history:

Name _____ Occupation _____

Address _____ Phone _____

Name _____ Occupation _____

Address _____ Phone _____

Name _____ Occupation _____

Address _____ Phone _____

If you will require any accommodation or assistance during pre-employment background investigation or interview process because of a disability, please describe:



LANCASTER COUNTY SHERIFF'S OFFICE

Barry S. Faile, Sheriff

Applicant Waiver, Consent, and Certifications

Applicant Name: _____

Social Security Number: _____

Telephone: _____

Date: _____

This County is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, national origin, age or disability. Your opportunity for employment with this County depends solely on your qualifications.

TO WHOM IT MAY CONCERN: I am applying for employment with the Lancaster County Sheriff's Office. LCSO must thoroughly investigate my academic, employment, and personal histories to evaluate suitability for employment.

I hereby authorize any LCSO representative bearing this release (or a facsimile thereof) to obtain any information regarding me in your files, and hereby direct you to release such information as soon as practicable upon the request of the bearer. I hereby authorize a review of, and full disclosure of, all records or any part thereof whether said records are public, private, or confidential. This information may include (but is not limited to) military service records, educational records, financial records, credit reporting information, criminal history records, driving records, employment files (to include investigatory files), complaints, efficiency/personnel evaluations, and/or complaints/grievances filed by or against me).

I hereby release you, your organization, and all others from liability or damages which may result from providing the information requested, to include damages or remedies provided for by State or Federal law. Regardless of any agreement I may have made earlier, I hereby release your organization (including its officers, employees, and related personnel) from all liability for damages of whatever kind which may result in regard to me or my heirs, family, and/or assigns.

For and in consideration of the LCSO acceptance, review, and processing of my application materials, I agree to hold LCSO and all of its employees or agents harmless from any claims liability associated with my application for employment or in any way connected with a decision not to employ me. I understand that if LCSO's pre-employment background investigation reveals criminal activity, that information will be forwarded to the appropriate law enforcement authority.

I understand my rights pursuant to §5 USC 552A (Privacy Act of 1974) with regard to access and disclosure of records, and I waive those rights with the understanding that information furnished will be used by LCSO in conjunction with pre-employment screening procedures. A photocopy or facsimile of this release shall be valid as an original thereof, even though the copy may not contain an original writing of my signature. This release and waiver shall remain valid and in force for a period of 60 days from the date upon which I signed it.

Should any questions arise as to the validity of this release, you may contact me at the telephone number listed at the top of this form.

Applicant Signature

LCSO Representative

PLEASE READ THE FOLLOWING STATEMENTS AND SIGN BELOW

Student Loans: SC State law (§59-111-50) prohibits employment with the State or its political subdivisions to persons who have defaulted on certain student loans, unless they can prove that satisfactory arrangements have been made for repayment. I certify by my signature below that I am not currently in default on a student loan.

Physical Examination: The LCSO hiring process may include a physical examination. If required, a physician provided by Lancaster County will provide the examination to me at no expense. The examination will include a test for drug dependency or use, and by my signature below, I consent to such an examination and test.

Terms of Employment: Neither this application, and attendant forms, or any of the language used herein implies or creates any type of employment contract between LCSO and the applicant/employee, nor do they create any contractual rights or entitlements. *No promises or assurances (whether written or oral) which are contrary to or inconsistent with this paragraph create any contract of employment.* If I am eventually employed, I understand that such employment is at-will and may be terminated by either party with or without notice at any time, for any reason or no reason. No one other than the Sheriff possesses any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing.

Veracity: I understand that LCSO may verify the information I have provided within this application and/or in personal interviews. By my signature below, I affirm, agree, and understand all statements made within this application to be true and accurate. I further understand that any misrepresentation, falsification, or material omission of information or data may result in exclusion from further consideration, or (if hired) termination of employment. My signature also certifies that I understand any offer of employment to be conditional upon successful completion of the LCSO pre-employment background investigation.

Applicant Signature

LCSO Representative Signature



LANCASTER COUNTY SHERIFF'S OFFICE

Barry S. Faile, Sheriff

Rejection Criteria for Applicants

AUTOMATIC DISQUALIFIERS FOR DEPUTY SHERIFF OR DETENTION CENTER OFFICER

The Lancaster County Sheriff's Office organizational values include Honor, Excellence, Accountability, Respect and Teamwork. In keeping with the spirit of our values, we try to maintain open communications with our applicants regarding our expectations and to facilitate their success in the selection process. If you are selected to be a Lancaster County Sheriff's Office Deputy or Lancaster County Detention Center Correctional Officer, this organization and the general public will be entrusting you with a very high level of authority. For this reason, we have given considerable thought to each step of our selection process and take great care to determine that we are hiring individuals who will be guardians of the trust granted to them. An applicant whose background includes any of the following listing of concerns would not be permitted to continue in the selection process. If you have concerns about your background and how we would evaluate those concerns, please speak to the Professional Standards Unit by calling 803-283-3388.

- Conviction of any felony or any crime involving moral turpitude (crimes contrary to justice, honesty, or good morals).
- Conviction of any crime which carries a six months jail sentence or more, excluding traffic violations which are discussed separately, or the South Carolina State Law equivalent within the last 5 years.
- Any conviction of domestic violence, including simple assault against a domestic partner, spouse, child or parent.
- Conviction of any offense involving the unlawful use, sale, manufacture, production, or possession of a controlled substance. Has a criminal proceeding pending or is under investigation for a crime.
- Conviction of one D.U.I. within the previous 10 years or two D.U.I. convictions in a lifetime.
- Demonstrated history of financial irresponsibility. (Examples of areas of concern 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. Student loans that are delinquent or in default are automatic disqualifiers. Please call the Personnel Staff to discuss your specific credit issues and concerns.
- Any involvement in the sale of illegal drugs.
- Prior drug usage is evaluated for the extent of the use and how recent the use has been.
- Dishonorable discharge from any 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.
- Cheating on any examination or testing associated with the position.

Body Art Policy:

- All employees are prohibited from displaying any intentional scarring (branding), mutilation, or dental ornamentation while on duty or representing the Sheriff's Office in any official capacity. This includes, but is not limited to, objects inserted under skin, pierced, split or forked tongue, and/or stretched out holes in ears. In order to be eligible for employment under our policy, a candidate's body art must not be taken by a reasonable person as obscene, violent, sexual, racial, violent, offensive or religiously discriminatory. Body art must also not be visible on the candidate's hand below the wrist, above the collarbone, on the neck, face, or head and be visible in uniform or civilian attire required by policy. If the candidate's body art covers more than 30% of an exposed arm, leg, or foot, the candidate will be required to wear an approved uniform covering the body part, if they are selected for employment.

Note:

This is not intended to be an exhaustive listing of background disqualifiers. Applicants who are successful in the initial testing will undergo a background investigation. 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.

Less than honorable military discharge, erratic work record, or unfavorable employment references.

- **I have read the above criteria and certify by my signature that I meet the above requirements as listed.**

Applicant Signature