Sumter County Sheriff's Office

Application for Employment



Sheriff Anthony Dennis

1281 NORTH MAIN STREET SUMTER, SC 29153

P.O. Box 430 Sumter, SC 29151-0430

The following items **MUST** be turned in with the application:

- 1. Photo copy of current driver's license.
- 2. Photo copy of Social Security card.
- 3. Photo copy of birth certificate.
- 4. Photo copy of high school diploma, GED and/or any other degrees/certificates/diplomas.
- 5. Photo copy of DD Form 214 (if prior military).
- 6. Certified 10-year driving record of **ALL** licenses possessed.
- 7. Copy of T.A.B.E. test administered by Central Carolina Technical College. (It is your responsibility to schedule a test date.)
- 8. Copy of a **DETAILED** credit report.
- 9. Username and password to ALL social media you may have (Facebook, Instagram, Snapchat, etc.).
- 10. Three (3) **SIGNED** letters of recommendation.

Sumter County Sheriff's Office Pre-employment Requirements

<u>DEPUTY SHERIFF – PATROLMAN</u>

REQUIREMENTS:

- 1. Graduate from an accredited college or university, preferred;
- 2. High school diploma or GED; or
- 3. Certified law enforcement officer.
- 4. a) Must be a minimum of twenty-one (21) years of age;
 - b) Must have no criminal history;
 - c) Must possess a valid South Carolina Driver's License limited violations (**NO DUI**);
 - d) Must satisfactorily pass a credit check no bankruptcy;
 - e) Must satisfactorily complete a polygraph test;
 - f) Must satisfactorily complete a psychological test. (Does not apply to detention officer applicants.);
 - g) Must pass a drug test; and
 - h) Must meet physical fitness standards as outlined in the job description. (Does not apply to detention officer applicants.)
- 5. Must be willing and able to work weekends, holidays, possibly days off, and be available during times of natural disasters.

6. The following items MUST be turned in with the application:

- a) Photo copy of current driver's license;
- b) Photo copy of Social Security Card;
- c) Photo copy of birth certificate;
- d) Photo copy of high school diploma, GED and/or any other degrees, certificates and diplomas;
- e) Photo copy of DD form 214 (if prior military);
- f) Certified 10-year driving record of ALL licenses possessed within the last 10 year;
- g) Copy of T.A.B.E. test, administered by Central Carolina Technical College (It is your responsibility to schedule a test date.);
- h) Copy of a DETAILED credit report;
- i) Username and password to ALL social media accounts you have (Facebook, Instagram, Snapchat, etc.); and
- j) Three (3) signed letters of recommendation.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL LT. JAMES DUKES AT (803) 436-2048
PLEASE SUBMIT YOUR COMPLETE PACKET TO OUR OFFICE
IF YOU ELECT TO MAIL YOUR PACKET VIA U.S. MAIL
SEND TO: P.O. BOX 430 SUMTER, S.C. 29151-0430

Sumter County Sheriff's Office Sumter, South Carolina

Application for emp	loyment (check	cone)		Date:	
ob title: De	eputy Sheriff	Ci	ivilian		
Re	eserve Deputy	In	ternship		
De	etention Center				
_					
Personal Data					
. Name:					
	(Last)		(Middle)	(Maiden)	
. Address:					
		reet	City	State	Zip
3. Telephone:		Mobile:		Other:	
Date of Birth:		Age:	Place of B	irth:	
		_			
. Height:	_ Weight:	Ey	/es:	Hair:	
5. Social Security N	0.:				
7. Marital Status:	Single	Eng	gaged	Divorced	
Г	Married	Ser	parated	Widowed	
L	Widified			Widowed	
3. Name of Spouse:	Last	First	Mido	lle Maiden	
	Last	FIISt	WHUC	ne waten	
9. Spouse's occupat	ion:	V	Where Employ	ed:	
	ADN	MINISTRATI	VE USE ONI	L Y	
D - 1					
Kepiacement	t for:				

10. List all your children, including any adopted children or stepchildren:

	N	ame	DOB	Add	ress
11.	Parents Name:	Father:			
		Last	First	Middle	
		Mother:			
		Last	First		
12.	Can you operate a	motor vehicle?	Yes	No	
12	Do you possess a	valid South Carolina	driver's licens	o? Vos	_ No
13.	Do you possess a	vanu Soum Caronna (unver sincens	e! 1es	_ NO
	Driver's License N	lumber:		Date Issued	1:
14.	Do you now or have	ve you ever possessed	l a driver's lice	ense issued by anot	her state?
	_	Number:		_	
	105 110 DE	rumoer.		Date Issue	····
	State(s):				
15.	Was your license e	ever suspended or rev	oked?	Yes No	
16.	Have you ever use	d a surname other tha	n the name list	ted on this applicati	ion?
	Yes No I	f so, list them:			
17	II	d a different data of b	:		
1/.		d a different date of b			
	documents other th	nan what is listed abo	ve?	Yes No _	
If s	so, list them:				
<u>IVI</u>	<u>ilitary History</u>				
18.	Have you ever bee	en in the Military?		Yes No _	
	·	,			
19.	Which branch?				

20. Total years:	Highest grade:	Type of disch	arge:
21. List all medals an	d awards you received in the	e military:	
• •	a member of the National C		
Credit History			
23. How many people	e do you support?		
24. Have you ever dec	clared, or are you about to, o	leclare bankruptcy?	
25. What is the total a	amount of your debts at pres	ent?	
26. Have you ever be	en, or are you currently, beh	ind on your bills?	Yes No
27. List credit referen	ces, including business, to v	vhich you make monthly	payments:
Name of Business	Amount	Type of Debt	Any Problems
		2000	TTOMETIM
28. Have you ever ha (Liens, judgemen	d any civil action(s) taken a ts, lawsuits, etc.)	gainst you for failure to p Yes No	•
Explain:			

	29. Have you ever had anything repossessed (voluntarily or involuntarily)?	Yes	No
	30. Are you now, or have you ever, had to make child support payments?	Yes	No
	31. Have you ever been late on making your child support payments?	Yes	_ No
	If yes, are you currently behind on your payments?		No
32.	Have you ever written a bad check and it resulted in a warrant issued for you warrant is you warrant	our arrest?	
	Work History		
	33. How many days have you missed from work in the last year due to sickn Explain:		
	34. Are you presently in a physical fitness program?		
	35. Date and Place of Last physical examination: A. Have you had any surgeries within the past year? If yes when:		
	36. Name of examining doctor:		
	37. Have you ever been fired, dismissed, or forced to resign from a job?		
	38. Have you ever walked-off the job because of an argument with a fellow employer? Yes No	employee or	
	39. Have you ever been involved in a physical confrontation with another en Yes No	mployee?	
	40. Have you ever been fired from a job? Yes No If yes, e	xplain:	
	41. Have you ever received any formal disciplinary action (suspension, writer of counseling, or written warning) from any job? Yes	-	and,
	Explain:		

42. Have you ever b	een turned	l down for a job ba	sed on the resu	alt of a: (check any)	
Crimi	nal History	y Backgroun	nd Investigation	nCredit Check	
Poly	voranh	Driving Rec	ord		
1 01,) 514P11		010		
43. Have you ever b	een named	l in a sexual harassı	ment complain	t? Yes No	
44. Please list presen	at and nast	employment hegir	ning with the r	nost recent:	
44. I lease list presen	it and past	employment, begin	ining with the i	nost recent.	
Company Nama			Dhona N	Number	
Address				vuilloei	
	Street	City	State	Zip	
Supervisor(s) name					_
Job Title		Reason for Lea	v1ng		_
Job Duties	from	to	Ending	g Salary	
Employment dates	110111	to	Ending	3 Salai y	
				Number	
Address	G	G:	C	7.	
Supervisor(s) name		City		Zip	
Job Title		Reason for Lea	ving		_
Job Duties					_
Employment dates i	from	to	Ending	g Salary	
Company Name			Phone N	Number	
Address					<u> </u>
		City	State	Zip	
Supervisor(s) name		Daggar for Lag	vin a		_
Job Duties					_
				g Salary	
1 0				•	
C N			DI N	т 1	
Company Name Address			Pnone N	Number	_
riddress	Street	City	State	Zip	_
Supervisor(s) name					
			ing		_
Job Duties			Endiaa	C -1	-
EmploymentDates fro	om	to	Ending	Salary	

Γ				
Company Name	_	Phone Nu	umber	
Address			_	
Street	City	State	Zip	
Supervisor(s) name				
Job Title	Reason for Lea	aving		
Job Duties				
Employment dates from	to	Ending S	Salary	
Company Name		Phone Nu	ımber	
Address				
Street	City	State	Zip	_
Supervisor(s) name				
Job Title	Reason for Lea	aving		
Job Duties				
Employment dates from	to	Ending S	Salary	
Company Name		Phone Nu	ımher	
Address		1 110110 1 10	<u></u>	
Street	City	State	Zip	
Supervisor(s) name		State	2 1P	
Job Title	Reason for Lea	aving		
Job Duties				
Employment dates from			Salary	
Company Name		Phone Nu	ımber	
Address		<u> </u>		
Street	City	State	Zip	
Supervisor(s) name	ъ ст	•		
Job Title		aving		
Job Duties				
Employment dates from	to	Ending S	Salary	
Company Name		Phone Nu	ımber	
Address	_	_	_	
Street	City	State	Zip	
Supervisor(s) name				
Job Title	Reason for Lea	ving		
Job Duties				
Employment dates from	to	Ending S	alary	

^{*}If you have had more jobs, list them on a separate sheet of paper and attach (mandatory).

45. Provide three letters of reference (no relatives or former employers)
Education History
46. Indicate any language(s) you speak, read or write fluently:
47. List any professional licenses you hold:
48. List academic honors, awards. etc.:
49. List any courses that would be useful to the position for which you are applying:
50. Typing speed (WPM) List equipment or office machines youcan operate (Including computer programs):

51. List all schools:

School	Name & Address	Start Date	End Date	Did you Graduate	List Degrees
High School					
Tech School					
College					
University					
Others					

Others						
			_			
(GED) Test?	?	e from high school, have YesNo you complete the GED?		d the Gene	eral Educati	onal Developm
Criminal Reco	ord_					
•		arged by law enforceme	ent (other th	nan a mino	r traffic offe	ense)?
If yes, explain: _						
Offense Cha	arged	Police Agency	State	Da	ite	Disposition
•		onvicted of a felony?	Yes	_ No		
55. Have you ever been bonded? If yes, list jobs:			Yes	_ No		
6. Have you ever been placed on probation? If yes, explain:			Yes	_ No		

If yes, expla	ver had any traffic vi			
8. Have you ev	ver stolen anything?	Yes N	o If y	yes, explain:
9. Have you ev If yes, expla	ver illegally used any in:	of the drugs listed	l below? Yes	
How many	times used?			
STP	Peyote	Psilocybin	Quaaludes	Opium
S11 Cocaine	Acid	Bath Salts	Quaarudes Mescaline	MDA
Speed	Barbituates	Heroin	Morphine	Marijuana
Demerol	Hashish	Steroids	Dilaudids	Sniffed Freon, gas, paint of other
Any other il	legal substance/narco	otic not listed:		
Have you ev	ver been court-martia o If yes, e		disciplinary act	ion?

61.	association, mov of our constitution or approving the under the Constitu	ement, group onal form of g commission tution of the U	or combinate government, of of acts of for Jnited States	tion of persons vor which has add the or violence to or which seeks t	ted with, any organization which advocates the over opted the policy of advocated deny other persons their organization alter the form of governes No	throw cating r rights
62.			-	•	er resources to any group No	(s)
<u>Pe</u>	rsonal Habits					
63.	. Have you ever g	one to work o	or school into	xicated, or misso	ed work or school due to	being
	intoxicated?	Yes	No	_		
64.	. Do you gamble (on-line, profe	essionally, or	otherwise wher	e real money or property	is
	involved)?	Yes	No	_		
	If yes, then what	t is the greate	st financial lo	oss you have eve	er incurred? \$	
65.	. Do you currently	y owe anyone	, individual o	r business, mon	ey or property due to a ga	ambling
	debt?	Yes	No	_		
66.	. Have you ever v	iewed or subs	scribed to any	periodical which	h contained or promoted	child
	pornography?	Yes	No	_		
<u>Pr</u>	ior Law Enforce	ment Only (i	if not prior la	w enforcement,	skip to the next section)	
67.	. Where have you	previously w	orked as a lav	w enforcement of	officer?	
68.	Were you ever the	ne subject of a	any sort of int	ernal investigat	on (formal or otherwise)	?
	Yes	No	Explain:			
	•	_		_	Yes No	
70.	Were you ever gi If yes, explain: _				Yes No	
71.	. Were you ever so	_	-	ted, or had salar	y reduced as part of a dis	ciplinary

72.	Have you ever had an excessive force complaint filed against you? Yes No
73.	Have you ever had any vehicle accidents while on duty? Yes No
	If yes, how many?
74.	Have you ever lied in a report/statement to implicate a suspect or cover for another officer
	or for yourself? Yes No



Sumter County Sheriff's Office 1281 North Main Street Sumter SC, 29153

organizations, insurance compother credit agencies, my preservecords or other information at Office all records and other into a physical examination by a heto meet the physical requiremes submit myself for drug testing	, hereby request a anies, educational institutions, gove ent and former employers, and any obout me to release and furnish to the formation concerning me. I agree to ealthcare provider selected by the Coents may disqualify me for employm prior to being employed by the Coupffered. A copy of this signed author	rnmental agencies, banks, and other individuals who may have a Sumter County Sheriff's submit myself upon request, for punty and understand that failure tent. I understand that I must anty. Failure of the test will
Printed Name of Applicant:		
Social Security Number:		_
Date of Birth: I	Race: Gende	er:
Signature of Applicant:		
Date:		
Please Forward Information To	o:	
Lt. James Dukes, Recruiter Sumter County Sheriff's Off 1281 North Main Street	ice	
Sumter, S.C. 29153		

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FAX: (803) 774-4075

EMAIL: jdukes@sumtercountysc.org

I hereby certify that there are no willful misrepresentations in or falsifications of the statements and answers to the above questions. I know that if the application is not complete it will be void. I am aware that should investigations disclose such misrepresentations and/or falsifications, my application for employment will be rejected and I will be disqualified from applying for any position of the Sumter County Sheriff's Office in the future. In completing this application for employment, I also understand that an investigation may be conducted whereby information is obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. Also, I understand that I will be required to take and pass a polygraph examination prior to being accepted for employment with the Sumter County Sheriff's Office.

Applicants Signature:	Doto	
Applicants Signature.	Date:	