



## Colleton County Sheriff's Office Employment Application

On behalf of the Colleton County Sheriff's Office we would like to thank you for your interest in employment with our agency. The following is a brief outline of the application process.

- 1. Application for Employment-** Complete the Colleton County Sheriff's Office Application for Employment and return it to our office located at 112 S. Miller Street, Walterboro S.C. 29488
- 2. Review of Application-** Each application will be reviewed by the Colleton County Sheriff's Office Command Staff.
- 3. Written Test-** After each application is reviewed, depending upon job openings, the applicant will be contacted about the written test in the application process.
- 4. Physical Agility Test-** For all individuals who are applying to be a Class I Officer or Jailer and will be attending the South Carolina Criminal Justice Academy a one(1) mile run must be completed in 10:30 minutes.
- 5. Oral Interview Board-** Applicants who successfully complete the physical agility test will have an oral interview with members from the Colleton County Sheriff's Office Command Staff.
- 6. Background Process-** Applicants who advance from the oral board interview will then begin the background process.
- 7. Final Interview-** Applicants who complete all of the above steps will have a final interview with the Sheriff of Colleton County.

**\*\*Please note that each step must be completed before continuing on in the application process. Applicants will be notified by the Colleton County Sheriff's Office upon completion.\*\***

**Please indicate which position(s) you are currently applying for:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Deputy- Class I Officer | <input type="checkbox"/> Correction Officer     | <input type="checkbox"/> Dispatcher     |
| <input type="checkbox"/> Clerical Staff          | <input type="checkbox"/> Court Security Officer | <input type="checkbox"/> Reserve Deputy |



# Application for Employment

Colleton County Sheriff's Office  
Sheriff R.A. Strickland

INSTRUCTIONS: Please fill out the form completely and accurately, using legible writing. If you need extra space, add additional pages and identify the information by item number. If any items do not apply to you, indicate by putting N/A in the blank.

NOTE: All statements are subject to verification and any omissions, incorrect, false, or misleading statements may remove you from possible employment.

## Equal Employment Opportunity Statement

It is the practice of this agency to recruit, hire, train, and promote employees without discrimination because of race, color, religion, sex, national origin, age, marital status, medical condition, or disability.

### Personal Information

1. Name: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (MAIDEN NAME/ SUFFIX)
2. Social Security Number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
3. Permanent Address: \_\_\_\_\_  
(NUMBER & STREET) (CITY) (STATE) (ZIP)
4. Home Phone #: \_\_\_\_\_ Cell Phone#: \_\_\_\_\_
5. Date of Birth: \_\_\_\_\_
6. Place of Birth: \_\_\_\_\_
7. Citizenship:  U.S. Born  U.S. Naturalized  Other
8. Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

**Education**

9. List all high schools attended. Please attach transcript from last high school attended.

Name & Location of High Schools	Dates Attended	Years Completed	Graduated Yes or No

10. List all colleges or universities attended. Attach a transcript or copy of degree certificate.

Name & Location of College/ University	Dates Attended	Years Completed	Degree/ Major

11. Please list any additional schools or training (trade, vocational, business, military, etc). Please give the name and location of the school, date attended, subjects studied, certifications, and any additional information.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Qualification & Skills**

12. Please list any special licenses (pilot, radio operator, etc.). List the name of license, license #, and expiration date.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Please list any skills you possess (machine/ equipment operator, typing, computer, forensic, devices, etc.).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. Please list any memberships for any organizations/ professional associations that you belong to.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. Please list any foreign languages that you speak, write, or read fluently. Indicate if you can use American sign language.

Language	Speak	Read	Write

***Family History***

16. Are you related by blood or marriage to any person(s) who are currently employed by the Colleton County Sheriff's Office? If yes please give the person(s) name and your relationship.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

17. Is any member(s) of your immediate family currently in prison or on probation or parole? If yes please give the person(s) name and details.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Residences***

18. Please list all of your addresses beginning with your current address.

From Date	To Date	Address of Residence	City/ State	Landlord

If you live outside of Colleton County are you willing to relocate? \_\_\_\_\_

19. Have you ever been sued with a civil judgment being rendered against you? If yes, please give details.

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20. Have you ever been employed by another law enforcement agency? If yes please fill out chart.

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Agency Name	Position Held	Dates of Employment

21. Have you ever been denied employment by a law enforcement agency? If yes please list agency and reason given.

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22. Are you willing and able to work nights and holidays?  Yes  No

23. Are you willing and able to work rotating shifts? Yes  No

24. Are you willing and able to attend training classes, meetings, transports, etc that may require overnight stays?  Yes  No

## **Previous Employment**

25. Please list below your previous employment history. Please include part-time or temporary employment. Start with your present or most recent job. Account for any gaps in your employment history. List any self-employment. Under specific duties, describe the type of work you did.

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**Last or Current Job:**

Company Name: \_\_\_\_\_ Date Worked: \_\_\_\_\_

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

Your Title: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_

Supervisor's Name & Phone Number: \_\_\_\_\_

Specific Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we contact this employer? If no please explain.

\_\_\_\_\_

\_\_\_\_\_

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**Next Most Recent Job:**

Company Name: \_\_\_\_\_ Date Worked: \_\_\_\_\_

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

Your Title: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_

Supervisor's Name & Phone Number: \_\_\_\_\_

Specific Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we contact this employer? If no please explain.

\_\_\_\_\_

\_\_\_\_\_

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**Next Most Recent Job:**

Company Name: \_\_\_\_\_ Date Worked: \_\_\_\_\_

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

Your Title: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_

Supervisor's Name & Phone Number : \_\_\_\_\_

Specific Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we contact this employer? If no please explain.

\_\_\_\_\_

\_\_\_\_\_

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**Next Most Recent Job:**

Company Name: \_\_\_\_\_ Date Worked: \_\_\_\_\_

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

Your Title: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_

Supervisor's Name & Phone Number: \_\_\_\_\_

Specific Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we contact this employer? If no please explain.

\_\_\_\_\_

\_\_\_\_\_

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**Next Most Recent Job:**

Company Name: \_\_\_\_\_ Date Worked: \_\_\_\_\_

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

Your Title: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_

Supervisor's Name & Phone Number: \_\_\_\_\_

Specific Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
May we contact this employer? If no please explain.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

26. Were you ever in the U.S. Military Service or any other military organization?  
 Yes       No

**Questions 27 through 35 Apply ONLY to Veterans:**

27. What is your service number? \_\_\_\_\_

28. What was the highest rank you held? \_\_\_\_\_

29. What was the date and location of you first entrance into active duty? \_\_\_\_\_  
\_\_\_\_\_

30. What were your unit assignments in the service?

Branch	Unit	Location	From:	To:

31. What was the date and location of your last discharge from active duty?  
\_\_\_\_\_

32. Was your discharge:  
 Honorable       General       Dishonorable       Bad Conduct

33. Were you ever court-martialed, tried on charges, etc while you were in the armed forces? If yes please explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

34. List any medals or decorations awarded to you during your military service.  
\_\_\_\_\_  
\_\_\_\_\_

35. Attach DD-Form 214 (for ex-military personnel)



***Criminal Offense Record and Disciplinary Actions***

36. Have you ever been arrested by a law enforcement officer or otherwise charged with a criminal offense? If yes please give details of charge, date, law enforcement agency, and disposition of case.

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37. Have you ever been subject to a restraining order or an order of protection? If yes please explain.

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38. Have you ever been on probation or parole? If yes please explain.

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39. In the past ten years have you ever stolen from a person or business? If yes please explain.

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40. Have you ever paid or received anything that could have the appearance of a bribe or inappropriate gratuity? (A bribe may be defined as accepting anything; money, drugs, merchandise, sex in return for overlooking an actual or anticipated illegal act. If yes please explain.

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41. Has your license ever been suspended or revoked? If yes please explain.

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42. How many traffic violations have you received in the last ten (10) years?

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## **References**

43. Please give three names of responsible persons other than relatives or past employers who will be willing to provide information about your character, personality, and other qualities.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
How Known: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
How Known: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
How Known: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_

## **Emergency Contact**

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

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

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





## Colleton County Sheriff's Office

Sheriff R.A. Strickland  
112 S. Miller Street  
Walterboro, S.C. 29488

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### Credit History Authorization

I authorize the Colleton County Sheriff's Office to obtain a report on my credit history in order to determine my suitability for employment.

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

Print Name: \_\_\_\_\_

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

Print Name: \_\_\_\_\_

For the purpose of obtaining the credit report, I provide the following information:

Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

**To facilitate the background investigation of your application, please attach a copy of the following documents with your application:**

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- Birth Certificate
- High School Diploma
- College Diploma
- College Transcripts
- Drivers License
- Certified 10 year drivers history from each state where you have held a drivers license (Can be obtained from DMV)
- Military Discharge Papers (DD-214)
- Social Security Card
- Any certificates received from any Criminal Justice Academy or Law Enforcement Agency.
- Any training certificates relevant to the position applied for.



## Colleton County Sheriff's Office

Sheriff R.A. Strickland  
112 S. Miller Street  
Walterboro, S.C. 29488

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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 immediate terminate from the Colleton County Sheriff's Office.

I hereby release former employers and reference sources from all liability for divulging such information.

I agree to submit a pre-employment drug testing and understand that testing positive for use of an illegal drug, abuse or a legal drug, use of unprescribed legal drug, refusal to take the test, or failure to keep scheduled appointment for the test will result in denial of employment or if employed will result in termination.

I understand that pursuant to the Code of Laws of South Carolina Titles 23-13-10 and 04-09-30(7) all appointments to the positions with the Colleton County Sheriff's Office are made at the will of the Sheriff of Colleton County and according to South Carolina Supreme Court decisions I may be discharged at any time without cause. I further understand that any appointment tendered to me will be contingent upon my obtaining and/or maintaining state certification for the position which I may be transferred to. I am aware that willfully withholding information or making false statements on this application, any supplement there to or during any oral interview will be basis for dismissal by the Colleton County Sheriff's Office.

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Signature of Applicant

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Date