



This application must be completed in full and signed.

Please be aware that certain information contained in this application may be subject to public inspection by a **Freedom of Information Act** request.

Name
Position(s) applied for:
1.
2.
3.

Address	City	State	Zip Code
Telephone Number (Home)	Telephone Number (Cell)		
Police Officer Applicants only: Are you age 21 or older? Yes No	Are you legally eligible for employment in the United States? Yes No		
Have you ever filed an application here before? Yes No	Have you ever been employed by this agency? Yes No If yes, dates:		
Type of employment you would accept: Part-time Full-time Temporary Shift Work Working hours preferred:	Would you work overtime if asked? Yes No		
Have you ever plead guilty, no contest or been convicted of a crime in the last 10 years? Yes No			
If yes, please explain:			
Do you have any relatives that work for the Town? If so, what are their names and relationship? Yes No			
Desired Salary:	Available Start Date:		

AN EQUAL OPPORTUNITY EMPLOYER

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or disability status.

EDUCATION

School	Name and Location of School	Course of Study	Last Grade Completed	Did You Graduate?	Degree Received
High School			9 10 11 12	Yes No	
Business, Technical or Trade School			1 2 3 4	Yes No	
College			1 2 3 4	Yes No	
Graduate School			1 2 3 4	Yes No	
Other Studies					

MILITARY SERVICE

Branch of Service	Start Date	End Date	Rank on Discharge	Current Status	Required to attend any active training? Yes No

PROFESSIONAL CERTIFICATES OR LICENSES

Current Professional License or Registration	Issuing State	Initial Registration Date

SPECIAL SKILLS

List any special skills or qualifications that will be of benefit in the job(s) for which you are applying:

Office Machines and Computer Applications: CHECK all that apply

Standard PC, Macintosh, Laptop	MS Word or WordPerfect
Data or Standard Printer	MS Excel
All-in-One Copiers	MS Outlook
Types of Operating Systems:	MS Access
Networking Hardware	Other Software:
AutoCAD	Multi-Line Switchboard
Transcription Machine	Calculator

Office Skills:

Computer Programming _____ Typing Speed _____ WPM

Transcription _____ Shorthand Speed _____ WPM

Foreign Language _____

EMPLOYMENT EXPERIENCE

START WITH YOUR PRESENT OR LAST JOB.

DOCUMENT ALL JOBS IN THE PAST 10 YEARS.

Start Date	Employer Name	Job Title and Description of Duties	Starting Pay	Reason for Leaving	May we contact them? Yes No
End Date	City/State		Ending Pay	Name of Supervisor	
	() - Phone				
Start Date	Employer Name	Job Title and Description of Duties	Starting Pay	Reason for Leaving	May we contact them? Yes No
End Date	City/State		Ending Pay	Name of Supervisor	
	() - Phone				
Start Date	Employer Name	Job Title and Description of Duties	Starting Pay	Reason for Leaving	May we contact them? Yes No
End Date	City/State		Ending Pay	Name of Supervisor	
	() - Phone				

**JOB HISTORY MUST BE FOR THE LAST 10 YEARS.
ATTACH ADDITIONAL PAPER IF NEEDED.
*ATTACHED RESUME IS ENCOURAGED***

REFERENCES

Name:	Relationship:	Phone:

AGREEMENT

YOU MUST SIGN THIS APPLICATION. READ THE FOLLOWING CAREFULLY BEFORE YOU SIGN.

I certify that the answers given herein are true and complete, without misrepresentation, to the best of my knowledge. Any misrepresentation, falsification, or material omission of information or data on this application or attachments hereto, may result in exclusion from further consideration or, if hired, termination of employment. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I further agree to a physical examination, background investigation, and/or a drug test, if such is required, as a condition of employment. I authorize the release of information concerning my qualifications, character, credit history, prior education, and employment records to the Town of Sullivan’s Island through inquiries to appropriate sources. I release any individual or institution, including its officers, employees or related personnel, both individually and collectively, from all liability for damages of whatever kind including actions brought under SC statutes. I understand that pleading guilty, no contest, or being convicted of a crime, and/or having a poor credit score will not necessarily disqualify me from employment. Each instance will be considered in relation to the position for which I am applying.

I understand that this application does not constitute a written contract of employment, and the Town of Sullivan’s Island is an at-will employer. I further understand that, if offered, employment is for no definite period of time and may be terminated at any time at the will of employer or employee, without any previous notice.

Signature

Date

FOR POLICE OR FIRE DEPARTMENT APPLICANTS

In applying for a sworn position with the Fire Department or any position in the Police Department, I understand that if I am hired for the position, I will be bound to participate in any investigation involving my pre-employment process or my department, to whatever degree the Chief deems necessary. This may include the taking of a polygraph test, drug test, or other testing as required. I further understand that my refusal to do so will result in termination from the pre-employment process or employment with the Town of Sullivan’s Island.

Signature

Date

APPLICATION PROCESS:

Your application will be sent to the recruiting department.

They will contact you directly if you are selected for an interview.

If you are not contacted, your application will remain on file in Human Resources for one year.

Return Application to:

Lisa Darrow, HR Director

Human Resources Division

The Town of Sullivan’s Island • PO Box 427 • Sullivan’s Island, SC 29482

www.sullivansisland-sc.com

