



**APPLICATION INSTRUCTIONS
FOR
CANDIDATES FOR DETENTION OFFICER I**

Your completed application must be accompanied by the following documents in order to be considered.

- 1. Copy of Birth Certificate.**
- 2. Copy of High School Diploma/GED.**
- 3. Copy of S.C. Driver's License.**
- 4. Copy of DD214 Military Discharge Form, (if applicable).**
- 5. Listing of previous addresses for the past 4 years.**
- 6. Copy of Motor Vehicle Record.**

If any one of the documents listed is incomplete or is not included with the application for Employment, the application will not be considered.



Department of Public Safety
R. Israel Hollister
Assistant County Administrator
rhollister@greenvillecounty.org
(864) 467-2326
(864) 467-2399 Fax
www.greenvillecounty.org

WAIVER AND AUTHORITY TO RELEASE INFORMATION

To Whom It May Concern:

I HEREBY authorize any officer or other authorized representative of the Department of Public Safety bearing this release, or a copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military service, educational history (including, but not limited to, academic, achievement, attendance, athletic, personal history, and disciplinary records), credit, (including credit card and payment records), law enforcement records (including, but not limited to, medical/psychological testing or examination results).

I HEREBY authorize you to release such information upon request to the bearer. This release is executed with full knowledge and understanding that the information is for official use of the Department of Public Safety. Consent is granted for the Department of Public Safety to furnish such information as is described above to third parties in the course of fulfilling its official responsibilities.

I HEREBY release you as the custodian of such records, and any federal, state, county, or municipal government, school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, retail business establishment, law enforcement agency, or other criminal justice agency, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I am furnishing my social security account number on a voluntary basis with the understanding such is not required by any statute or regulation. I have been advised that the Department of Public Safety will utilize this number only to facilitate the location of employment, military, credit, and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below.

Applicant's Full Name (Typed/Printed): _____
(Include maiden and any other previously used names)

Applicant's Full Name (Signature): _____
(Include maiden and any other previously used names)

Social Security Number: _____ Date: _____

State of South Carolina, County of Greenville

SWORN TO AND SUBSCRIBED before me this _____ day of _____ 20____

_____ NOTARY PUBLIC in and for the State of

South Carolina. My commission expires: _____



PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURES

Revised 09/2018

County of Greenville At-Will Employment Application

An Equal Employment Opportunity / Affirmative Action Employer

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT but merely is intended to evaluate suitability for employment. It is the policy of Greenville County to provide equal employment opportunities to all qualified persons without discrimination on the basis of sex, including pregnancy, childbirth, and related medical conditions, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under state and federal law. It is also the policy of the County to have the option of conducting pre-employment alcohol and drug screening before a job offer is made. If a job offer is made, employment may be contingent upon the successful completion of a medical examination. This application will remain active for 180 days.

PERSONAL INFORMATION

Name Last	First	Middle	E-mail Address
Home Phone			Other Phone

Please list below your current address

Street	City	State	Zip Code
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POSITION TITLE AND VACANCY NUMBER**Please list the POSITION TITLE and VACANCY NUMBER for the position/positions you are applying for.**

Position Title:	Vacancy Number:
Position Title:	Vacancy Number:
Position Title:	Vacancy Number:

EDUCATION AND SPECIAL SKILLS

Have you earned a HS diploma or GED?	YES NO	Have you earned an Associate's Degree?	YES NO	Have you earned a Bachelor's Degree?	YES NO	Have you earned a Master's Degree?	YES NO
Have you earned a Law Degree?	YES NO	Have you earned a Specialist Degree?	YES NO	Have you earned a Doctorate Degree?	YES NO	Trade School Certification?	YES NO
Please circle highest educational year completed.				1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20+			
Area/Areas of Study							
Please list any professional licenses, designations, certifications, etc. that may relate to the position applied for:							
Please use this space to list any special skills you may have that relate to the position applied for:							

EMPLOYMENT INFORMATION**Please answer all of the following questions.**

Are you at least 18 years of age and legally eligible for work in the United States?	☐ YES ☐ NO
Have you ever been discharged or asked to resign from a job? (If yes, please explain)	☐ YES ☐ NO
Have you ever been convicted of or pled guilty to a felony or other crime other than a minor traffic accident?	
☐ YES ☐ NO If yes, please complete the following:	
Date	Where Convicted
Nature of Charge	Disposition

DRIVER LICENSE INFORMATION**Please answer the following questions if the position you are applying for requires driving a motor vehicle.**

Do you have a valid driver's license?	☐ YES ☐ NO
Do you have a valid CDL license?	☐ YES ☐ NO
Have you been convicted of or pled guilty to any traffic-related offense within the past five years?	☐ YES ☐ NO
Have you had your driver's license suspended or revoked or had your driving privileges modified by a court of law?	☐ YES ☐ NO
Please list all states from which you hold or have held a driver's license:	

EMPLOYMENT HISTORY

Please list below your last three employers beginning with the most recent:

Most Recent Employer	Street	City	State	Zip Code		
Job Title: Position Held: From: To: <table><tr><td></td><td></td></tr></table>			Job Duties:	Reason for Leaving:		
Supervisor's Name and Title:	Supervisor's Telephone:	May we contact? ☐ YES ☐ NO				

Next Most Recent Employer	Street	City	State	Zip Code		
Job Title: Position Held: From: To: <table><tr><td></td><td></td></tr></table>			Job Duties:	Reason for Leaving:		
Supervisor's Name and Title:	Supervisor's Telephone:	May we contact? ☐ YES ☐ NO				

Next Most Recent Employer	Street	City	State	Zip Code		
Job Title: Position Held: From: To: <table><tr><td></td><td></td></tr></table>			Job Duties:	Reason for Leaving:		
Supervisor's Name and Title:	Supervisor's Telephone:	May we contact? ☐ YES ☐ NO				

LIST (3) REFERENCES [NOT RELATIVES] YOU HAVE KNOWN FOR AT LEAST (2) YEARS.

Name:	Address:	Phone:
Name:	Address:	Phone:
Name:	Address:	Phone:

STUDENT LOAN

State law (59-111-50) prohibits employment with the County to people who have defaulted on certain student loans, unless they can prove 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: _____

APPLICANT'S CERTIFICATION AGREEMENT

1. I authorize the County to conduct an investigation of all statements contained in this application and release from all liability any persons or employers supplying such information, and I also release the County from all liability that might result from making its investigation. I authorize all former employers to answer any and all questions asked, and information sought, in connection with this application. If I have indicated that my present employer not be contacted, I understand that an offer of employment may be conditioned upon acceptable information and verification from that employer.
2. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts on this application (or on any required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.
3. I understand and agree that as part of the application process for employment an investigation of my criminal history will be conducted by the County of Greenville which may include local, state, and out-of-state history information, and may require fingerprinting.
4. I UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON.
5. I understand that any employment offer is contingent upon my providing, within three (3) working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986
6. I have read and reviewed the information provided in this application and the above statements in this Certification Agreement. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.

Signature

Date

In an attempt to ensure Greenville County's continued commitment to Equal Employment Opportunities, we would appreciate your taking a moment to complete the questionnaire below.

The Civil Rights Act of 1964 prohibits discrimination in employment practice because of race, color, religion, sex or national origin. P.L. 90-202 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age but less than 70.

Today's Date:

Position Applied For:

Sex:

☐ Male ☐ Female

Race (check one):

☐ Asian ☐ African-American ☐ Hispanic ☐ American Indian ☐ White ☐ Other

In Greenville County's effort to transition individuals from welfare to work, please answer the following question:

Are you currently receiving Food Stamps and/or a Family Independence stipend? ☐ YES ☐ NO

This information is requested for EEO and State Office of Human Resources reporting purposes only.

NOTE

1. Resumes are accepted, but an application must be completed before a final offer of employment.
2. Incomplete applications will not be processed.
3. Include all military service on the application if applicable.

**County of Greenville Human Resources Department
301 University Ridge, Suite 500
Greenville, South Carolina 29601-3660**

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