



ANDERSON COUNTY SHERIFF'S OFFICE

SHERIFF — CHAD MCBRIDE

305 Camson Rd. Anderson, SC 29625 Phone: (864) 260-4400

www.andersonsheriff.com

Application for Employment – Long Form



General instructions: Type or print information. If a question is not applicable to you, print N/A in that area. Complete the application accurately and completely, including full contact information for past employers and personal references.

NOTE: Intentionally misleading or deceptive answers may justify not hiring you or may result in punitive action or dismissal if the inaccuracies are discovered after you are hired.

Minimum Requirements

1. You must be a United States Citizens and reside in South Carolina or be willing to relocate
2. You must be at least 21 years of age to become a Deputy.
3. You must be in good physical condition. After an offer of employment, and periodically thereafter, Deputies must be able to perform satisfactorily in a job-duty related physical performance test. Job descriptions are available and should be obtained.
4. Weight must be proportionate to height.
5. Candidates for Deputy must possess a valid SC driver's license. There shall be no suspensions in the prior five years due to a DUI or leaving the scene of an accident.
6. You must have a State High School Diploma or State GED certificate.
7. You must have a satisfactory criminal history check.
8. The following items must be turned in with application:

A copy of your driver's license

A copy of your social security card

A copy of your high school diploma or GED

A copy of DD214 forms (for military personnel) showing character of service

A copy of your birth certificate

A copy of your marriage and/or divorce decree(s)

A certified copy of your driver history for all out-of-state driver's licenses

Position Applying For:

Deputy

Detention Officer

Telecommunications Operator

Clerical

Other: _____

If you are applying for more than one position, you must turn in an application for each position for which you are applying.

I have read and understand all of the above.

Signature

Date



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Applications will be kept on file for one year. Only candidates that have correctly filled out application and included required documentation will receive further contact from this office. If you have questions or concerns about your application please contact the Office of Professional Standards- Hiring and Recruiting by emailing Recruiting@andersonsheriff.com. The Anderson County Sheriff's Office is an Equal Opportunity Employer (EOE).

Return the completed application to the Director of Personnel, Anderson County Sheriff's Office.

*****All Blanks Must Be Filled-In with Appropriate Answer or N/A for "Non-Applicable"*****

Have you applied here before? Yes No If Yes, When? _____

Last Name		First Name		Middle Name	Race	Gender
Telephone Number	Social Security Number		Date of Birth	Email Address		
Aliases, Nicknames, Maiden Name, or Other Changes in Your Name				City or Town & State of Your Birth		
Present Address: Number & Street			City or Town		State & Zip	
Height	Weight	Color of Eyes	Color of Hair	Scars, Tattoos, or Distinguishing Marks		

Information Concerning Spouse and/or Former Spouses

Spouse Name/Maiden Name	City Where Married	When

Children & Dependents

Name	Date of Birth	Address



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Have you ever served in the armed forces? Yes No

If Yes, please attach a copy of discharge or separation papers.

If You Are Currently a Member of a U.S. Reserve, National, or State Guard Organization, Please Complete the Following:

Grade and Service Number	Branch of Service	Active, Inactive, Standby?	Unit Location

List All of Your Social Media

Name of Service (Facebook, Twitter, Instagram, etc.)	List Your "Handle" or "User Name"

Starting with Elementary School Through High School, List the Following:

School	Location	Dates Attended

List Colleges and Universities Attended

School	Location	Dates Attended

Have You Graduated? Yes No

Have You Defaulted on Any Student Loans? Yes No

List Degrees Earned, Major & Minor Subjects, or Other Important Information

Please Give Information Concerning Other Schools, Training, or Special Qualifications and Skills



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List All Arrests or Convictions Regardless of Disposition. Include Juvenile Offenses and/or Any Disciplinary Action in the Military.

Charge	Date	Agency	Disposition

Can You Type?	Yes	No	Number of Words per Minute?	
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If You Have Ever Filed for Bankruptcy, Give Details, Including Date and Court in Which it Was Filed.

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Are you now, or have you ever been, a member of any foreign or domestic organization or group of people which shows a policy of advocating the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of the Government of the United States by unconstitutional means? Yes No

If Yes, Explain

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Family & References

Please List Family Information. Name of Mother, Father, Any Sisters or Brothers, Foster Parents, Step-Parents, Guardian, Parents-in-Law, and Any Other Person with Whom You Have Lived.

Relationship	Name	Present Address if Living

**Provide All Contact Information for at Least Two References in Each Category.
Exclude Family & Employers**

Personal:

Name	Address	Phone	Years Known

Co-Workers:

Name	Address	Phone	Years Known



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Have You Ever Been Terminated From a Job? Yes No

Have you ever been the subject of a criminal or internal investigation? If yes, list employer and date:

Yes No

Please List All Jobs You Have Held in the Last Ten Years, Starting with the Most Recent.

1.Month/Year to Month/Year	Name of Employer	Name of Supervisor	Phone
Position Held	Address	Salary	Full/Part-Time
2.Month/Year to Month/Year	Name of Employer	Name of Supervisor	Phone
Position Held	Address	Salary	Full/Part-Time
3.Month/Year to Month/Year	Name of Employer	Name of Supervisor	Phone
Position Held	Address	Salary	Full/Part-Time
4.Month/Year to Month/Year	Name of Employer	Name of Supervisor	Phone
Position Held	Address	Salary	Full/Part-Time
5.Month/Year to Month/Year	Name of Employer	Name of Supervisor	Phone
Position Held	Address	Salary	Full/Part-Time

May We Contact You Current Employer? Yes No If No, Please Explain Why Not:



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Driver's License Number:			
List All Previous Driver's Licenses. (Provide a Certified Driver History for Each Out-of-State License)			
State	D.L.Number	Month/Year to Month/Year	
Are You Currently Taking Any Over-the-Counter Medication or Prescription Medication Which Can Affect Hand-Eye Coordination, Driving Skills, Judgment, Physical or Psychological Actions or Reactions?			
Yes	No	If Yes, Explain Below:	
A History of Illicit Drug Use Does Not Necessarily Preclude You from Employment with This Agency. List All Illegal Substances Used, and/or Any Prescription Medications Obtained Illegally.			
Drug	Date First Used	Date Last Used	Times Used

Are You a U.S. Citizen? Yes No By Birth or by Naturalization

The following items must be returned with this application. **Only applications with complete documentation will be considered.** NOTE: *It is the applicant's responsibility to make copies prior to submission.*

- A copy of your driver's license
- A copy of your social security card
- A copy of your high school diploma or GED
- A copy of DD214 forms (for military personnel) showing character of service
- A copy of your birth certificate
- A copy of your marriage and/or divorce decree(s)
- A certified copy of your driver history for all out-of-state driver's licenses.

I hereby swear or affirm that there are no willful misrepresentations, falsifications, or omissions on this document. I am aware that should an investigation disclose such willful misrepresentations, falsifications, or omissions, my application will be rejected and I will be disqualified from applying for a fixed period of time for any position in the Anderson County Sheriff's Office. If, after my acceptance for employment, subsequent investigation should disclose omissions, falsifications, or misrepresentations, it will be just cause for dismissal.

_____ Signature	_____ Date
Sworn to and Subscribed Before Me This _____ Day of _____, 20 _____	
_____ Notary Public Signature	_____ Date



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Law Enforcement Brady/Giglio Interview Questions

Check the appropriate box:

Are you aware of any pending complaints, investigations, or disciplinary actions against you relating to the performance of your official duties or to any off duty conduct? YES NO

Are you aware of any allegations or findings by a court or prosecutor that reflect upon your truthfulness or bias, including a finding of lack of candor? YES NO

Are you aware of any past complaints, investigations, or disciplinary actions against you relating to the performance of your official duties? YES NO

Have you ever been terminated from a law enforcement job or resigned while an investigation of you was pending? YES NO

Are you aware of any media reports or other publicity where your name was mentioned in connection with alleged misconduct that occurred while you were on duty or off duty. YES NO

To your knowledge, have you ever been a party to any civil lawsuit (including divorce) or Bankruptcy action in which your honesty, integrity, credibility, or bias were the subject of a public filing or court order? YES NO

Do you now have, or have you ever had, a close personal relationship with any of the following persons or associated to a degree of affection or loyalty that could be viewed as undermining your objectivity or improperly influencing your testimony in court: the magistrate or district court judge; defense lawyer or prosecutor; potential victim; witness; defendant; or person closely associated with a defendant in a criminal case? YES NO

Many people regularly interact on social media such as Facebook, Twitter, Tumblr, Snapchat, and Instagram; blog; or post comments on public internet sites. If you engage in such activity, could any of your posts, blogs, or comments be used to question your credibility, bias, judgment, or competence, or be used in any way to undermine your work? YES NO



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I, _____ permit my present and prior employers to divulge to this organization relevant personal information from the personnel file(s) they possess. I also authorize this organization to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of its choice. I authorize it to make an investigative report whereby information is obtained through personal interviews with neighbors, friends, and others with whom I am acquainted as well as from investigation of information available on social networking sites and the Internet.

I understand and acknowledge that information contained herein may be subject to disclosure under the South Carolina Freedom of Information Act.

I understand and agree that if I should admit to or divulge my involvement in any criminal offenses during the application process such may be reported to the proper jurisdictional authority for investigation and/or prosecution.

I release from liability, agree not to sue, and hold harmless, the Anderson County Sheriff's Office, Sheriff Chad McBride, his deputies, agents, assigns, and others similarly situated from any and all liability in any way with the processing of my application even if they should be negligent.

I understand and acknowledge that nothing contained herein creates a contract of employment, express or implied. If I am offered employment with the ACSO and accept same, I further understand and agree all employment with the ACSO is on an at-will basis; either the employee or the ACSO may terminate the employment relationship at any time for any reason. No statement, whether written or verbal, can alter the at-will nature of employment with the ACSO.

Signature of Applicant

Date

Sworn/Affirmed to and subscribed before me on this _____ day of _____, 20 _____

Personally known [☐] Or Produced Identification [☐] Type of ID: _____

Notary Name

Commission Expiration Date

Notary Signature