



TOWN OF

Mount Pleasant SC

EMPLOYMENT APPLICATION

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: (First)	(Middle)	(Last)
Position(s) applied for:		
1.)		
2.)		
3.)		

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

EDUCATION

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

MILITARY SERVICE

Branch of Service	Start Date	End Date	Rank on Discharge	Current Status	Required to attend any active training? <input type="checkbox"/> Yes <input type="checkbox"/> 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:

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? <input type="checkbox"/> Yes <input type="checkbox"/> No
End Date	City/State () _____ - _____ Phone		Ending Pay	Name of Supervisor () _____ - _____ 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 Mount Pleasant 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 Mount Pleasant 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 Mount Pleasant.

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:

Human Resources Division

The Town of Mount Pleasant • 100 Ann Edwards Lane • Mount Pleasant, SC 29464

www.tompsc.com

AN EQUAL OPPORTUNITY EMPLOYER

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