

Union County Supervisor's Office
210 West Main Street
Union, SC 29379



To: UC Detention Center Applicants

RE: Application Process

In order to expedite your application process, only submit after you have obtained all of the following information. (If the application deadline does not allow you ample time to gather all requested documents, please apply for the documentation from the correct agency and make a note on your application that said documentation has been requested/applied for.)

1. Complete the entire application enclosed in this packet.
2. Make a copy of and enclose the following when you return this packet:
 - a. Your Birth Certificate
 - b. Your Driver's License
 - c. Your High School Diploma or highest Degree earned.
 - d. Your Social Security card, which must bear your correct legal name.
 - e. If you are already a Certified Jail Officer please enclose your SCCJA Certificate.
 - f. If you were in the US Armed Forces, provide a copy of your DD214 form.
 - g. Please be sure that the Authorization to Release is signed, Notarized and enclosed with your completed application.

Resumes are only accepted as an addition to the complete application packet. Submission of an application packet does not guarantee an interview or offer of employment from Union County.

Packets may be mailed or presented in person to: Kindra Horne at the Union County Supervisor's Office, 210 West Main Street Union, SC 29379. If you wish you may scan and email this packet to khorne@countyofunion.com; however, you will need to deliver the originals to us, as we need the original signed release and documents requested for our records.

On behalf of Union County, I thank you for your interest in employment with us and wish you the best in the hiring process.

Kindra W. Horne
Personnel Director for Union County

Union County, South Carolina
Job Description

Detention Officer
Corrections Department

General Statement of Job

Under direct supervision, performs protective service work involving the Detention Center and Work Camp that houses incarcerated adults serving limited sentences in Union County; and some State Inmates that are Trustees. Must maintain accurate records and perform related work as required.

Specific Duties and Responsibilities

Maintain the security and safety of the Detention Center facility, inmates and staff through implementation of established policy and procedures.

Process and book inmates, secure inmates' property, and issues supplies.

Patrols facility to ensure security, inspects locking and security devices and doors for proper working condition.

Supervises inmate activities and visitation, prepares inmate work schedule.

Searches inmates and cells for contraband and other safety and security hazards.

Observes and maintains orderly conduct among inmate population, subdues unruly or violent individuals; responds to emergency situations on property as required.

Completes and maintains required paperwork.

Transports inmates to court or other facilities as required.

Maintains required certifications and training as mandated by the Department.

Receives and reviews booking forms, schedules, commitments and medical records, etc...

Prepares and or processes inmate medical forms, booking forms, kitchen reports, incident reports, and various other forms, records and reports.

Refers to policy and procedures manuals, codes, statutes, laws, directories and log books.

Operates a vehicle, telephone, two-way radio and hand gun.
Uses clerical supplies, cleaning supplies, restraining devices, and first aid kit when necessary.

Interacts and communicates with the Detention Center Director, Assistant Director, Co-workers, Sheriff's Deputies, and all other county employees, visitors, inmates, attorneys, other law enforcement and the general public.

Must complete any other duties as assigned by Director and Assistant Director.

Qualifications

Requires a High School Diploma or GED, valid SC Driver's License, must be 21 years of age or older, have no criminal background, pass a physical and pre-employment drug screen, and must attend and pass the SC Criminal Justice Academy Jail Operations School.



Authorization for Release of Information

To whom it may concern:

Re: Application for Employment with Union County Detention Center:

Name: _____
DOB: _____
SS#: _____

I hereby authorize a representative of Union County, bearing this release, to obtain any information in your files pertaining to my reputation, police records, medical records, credit/financial records, school records, past and present employment records and military records including all information of a confidential or privileged nature, and Photostats of the same if requested. In applying for employment with Union County Detention Center, I hereby waive my rights of access to the letters relating to police records, medical, credit, school, military or employment history and letters of recommendation.

Applicant's Signature

Street Address

City

State

Zip Code

Subscribed and sworn to before me
This _____ day of _____, _____

Notary Public for the State of SC

My Commission expires: _____

Union County Detention Center/Prison Camp
1657 Jonesville Hwy
Union, SC 29379
864-429-1677
Director: Niel McKeown

Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, nationality, age, marital status, veteran status, disability, or any other legally protected status.

Date of Application: _____

Position applied for: _____

Name: _____
(First) (Middle) (Last)

Social Security Number: _____

Present Address: _____
(Must provide physical address as well as PO Box/Apt # if applicable)

(City) (State) (Zip Code)

Phone Number: (home) _____ (cell) _____ (business) _____
(Please indicate which number you would prefer to be contacted on)

Are you eligible to work in the United States? Yes____, No____

Are you 21 years of age or older? Yes____, No____

Do you have relatives employed by the County? Yes____, No____

If yes please list name, department and degree of relation:

Have you ever been employed by Union County? Yes____, No____ if yes list dates:

What date are you available to begin work? _____

Have you ever been convicted, pled guilty or pled no contest to a crime other than a traffic violation? Yes____, No____

If yes, list charge(s), where convicted, date and disposition or current status:

Were you in the US Armed Forces? Yes____, No____

If yes list Branch, and Rank at discharge: _____

Dates of Duty: From: _____ to _____
(Month, day, year) (Month, day, year)

Education

Name of High School-Location	Highest Grade Completed	Did you graduate?	Diploma	Dates Attended
			Yes/No	From: To:
GED	Date:			
Name of College-Location	Number of years attended	Did you graduate?	Degree/certificate or diploma:	Dates Attended
				From: To:
Other-Location	Number of years attended	Did you graduate?	Degree/Certificate or diploma:	Dates Attended
				From: To:
Trade or vocational school-location	Number of years completed	Did you graduate?	Degree/Diploma or certificate	Dates Attended
				From: To:

Work History

Begin with your most recent employer, you may copy and attach additional pages if necessary. List all positions held and military service if any. Please answer all questions in complete detail. We may contact any employer listed and by signing and returning the Release attached to the front of this packet you have given us complete access to previous employment records.

1. Name of Company _____, Type of Business _____

Address _____

Starting Date _____ Job Title _____ Salary \$ _____, per _____

Ending Date _____ Job Title _____ Salary \$ _____, per _____

Reason for Leaving: _____

Immediate Supervisor _____

May we contact this employer? _____ phone# _____

Description of duties _____

2. Name of Company _____, Type of Business _____

Address _____

Starting Date _____ Job Title _____ Salary \$ _____, per _____

Ending Date _____ Job Title _____ Salary \$ _____, per _____

Reason for Leaving: _____

Immediate Supervisor _____

May we contact this employer? _____ phone# _____

Description of duties _____

Work history cont'd.....

3. Name of Company _____, Type of Business _____

Address _____

Starting Date _____ Job Title _____ Salary \$ _____, per _____

Ending Date _____ Job Title _____ Salary \$ _____, per _____

Reason for Leaving: _____

Immediate Supervisor _____

May we contact this employer? _____ phone# _____

Description of duties _____

4. Name of Company _____, Type of Business _____

Address _____

Starting Date _____ Job Title _____ Salary \$ _____, per _____

Ending Date _____ Job Title _____ Salary \$ _____, per _____

Reason for Leaving: _____

Immediate Supervisor _____

May we contact this employer? _____ phone# _____

Description of duties _____

Please list the law enforcement jurisdictions in which you have lived for the past ten years: _____

Please list three references who are not relatives or previous supervisors that have known you for a minimum of three (3) years.

Name	Address	phone #
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Name	Address	phone#
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Name	Address	phone#
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Please make any additional comments you feel may aid in the evaluation of this application:

Certification of applicant

I affirm, agree, and/or understand that all statements on this form are true and accurate; any misrepresentation or omission of facts may result in my being disqualified or my being discharged should I already be employed by any Union County Department. My background may be investigated, including a fingerprint check. I may be required to successfully complete a medical exam as a condition of employment. If I have requested herein that my present employer not be contacted, an offer of employment may be conditional upon acceptable information and verification from such employer prior to beginning work. Copies of this form may be furnished to other Union County Department Heads. I understand that if I am hired I am employed at-will and may be discharged at any time, without notice.

Applicant's Signature

Dated: _____