PERSONAL INFORMATION

FULL NAME OF CANDIDATE:

NAME YOU WANT LISTED IN ALL PUBLICATIONS:

NAME(S) THAT YOU ARE KNOWN BY IF DIFFERENT FROM ABOVE:
(PLEASE INCLUDE MAIDEN NAME)

COURT, POSITION, AND SEAT # FOR WHICH YOU ARE APPLYING:

HAVE YOU BEEN SCREENED BY JMSC IN THE PAST?
IF SO, SPECIFY YEAR OF LAST SCREENING.

FULL NAME OF CURRENT SPOUSE AND DATE OF MARRIAGE:

LIST ALL FULL NAMES OF PAST SPOUSES AND DATES OF MARRIAGE/DIVORCE:

FULL NAME OF MOTHER:

FULL NAME OF FATHER:

HOME ADDRESS (CURRENT & PHYSICAL):

HOME ADDRESSES WITHIN THE PAST 10 YEARS:

HOME TELEPHONE:

BUSINESS ADDRESS (CURRENT):

BUSINESS ADDRESSES WITHIN THE PAST 10 YEARS:

BUSINESS TELEPHONE:

CELL # **(FOR STAFF PURPOSES ONLY)**:

E-MAIL ADDRESS **(FOR STAFF PURPOSES ONLY)**:

DATE OF BIRTH:

PLACE OF BIRTH:

RACE:

SOCIAL SECURITY NUMBER:

VOTER REGISTRATION NUMBER:

SC DRIVERS LICENSE NUMBER:

LIST ALL SOUTH CAROLINA COUNTIES WHERE YOU HAVE RESIDED AND THE DATES OF YOUR RESIDENCE:

LIST ALL SOUTH CAROLINA COUNTIES IN WHICH YOU OWN PROPERTY: (NOT NECESSARILY WHERE YOU RESIDE):

LIST ALL SOUTH CAROLINA COUNTIES AND CITIES WHERE YOU CURRENTLY SERVE, OR PREVIOUSLY SERVED, AS A PUBLIC OFFICIAL OR PUBLIC MEMBER AND THE DATES OF YOUR SERVICE.

DO YOU HAVE A SECURITY FREEZE ON YOUR CREDIT REPORT INFORMATION?
Applicants with a security freeze will be contacted by telephone and asked that the freeze be lifted on a designated date for the sole purpose of accessing the credit report. Your report will be accessed on that date and you can reinstate your freeze. This applies only to the Equifax reporting service.

PLEASE ATTACH A RECENT PHOTO/HEADSHOT (w/i the last 5 years) TO THIS FORM.

Your signature will be held to constitute a waiver of the confidentiality of any proceedings before a grievance committee, any information concerning your credit or any information reported by SLED. Further, you agree to do whatever necessary to help obtain such information.

I HEREBY CERTIFY THAT THE ANSWERS TO THE ABOVE QUESTIONS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Date: _____   Signature: _____