**VACANCY CHECKLIST AND INTERVIEW PACKET**

**Please review this Vacancy Checklist before you start the interviewing process to ensure the following items are completed before returning hiring packets to the office of Human Resources. Incomplete information can result in a delay in the process.**

|  |  |  |
| --- | --- | --- |
|  |  | Status |
|  | Hiring managers must complete a minimum of three (3) interviews for all posted vacancies with a pool of eligible candidates. |[ ]
|  | **Veterans Preference:** As a part of a state initiative, if a candidate pool contains eligible veterans, hiring managers must interview at least one. Please indicate on the Applicant Roster which veteran candidate(s) you interviewed, or check the “No Veterans Referred” box. |[ ]
|  | You must send an interview invitation from your division to each interviewee confirming the interview time and date. Invitations may be sent via U.S. mail or e-mail attachment. Submit all copies with this packet.  |[ ]
|  | Applicant Evaluation Form must be completed by each panel member for all applicants interviewed. Print names of all applicants interviewed, indicating the top 3 candidates based on overall rating on the Applicant Roster. Print names of selected candidate(s) along with the proposed salary and effective date on the Applicant Roster. |[ ]
|  | Three (3) professional reference checks and one (1) employment reference check must be completed on selected candidate. *(This is not required for current DPS employees).* |[ ]
|  | If the selected candidate indicates that he or she has a college degree on the State application, you must submit a copy of the transcript. |[ ]
|  | Background Check Request Form must be completed on selected candidate. *(This is not required for current DPS employees).* |[ ]
|  | When the selected candidate is a former employee/rehire with the agency, the Disciplinary Review Committee must approve the rehiring. *(This is not required for current DPS employees).* |[ ]
|  | All elements of the selection process must be administered, scored, evaluated and interpreted in a uniform manner. All applicants must be asked the same questions during the interview. Interview questions and written responses to questions of all applicants interviewed must be submitted. An Interview Questionnaire is included with this packet as a resource. |[ ]
|  | If this position is a Band 6 or above, you **MUST** have a panel of at least 2 people for the interview process. |[ ]

*For any questions, please contact Alicia Osborne, Employment Manager, at (803) 896-0846.*

**GUIDELINES FOR AVOIDING LEGAL PITFALLS WHEN INTERVIEWING JOB CANDIDATES**

|  |  |
| --- | --- |
| **What You CAN Ask:** | **What You CANNOT Ask:** |
| ***Gender*** |
|  | * What are your plans for raising a family?
 |
| * How many children do you have?
 |
| * What are the ages of your children?
 |
| * What are your child care arrangements?
 |
| * What does your husband do for a living?
 |
| * Are you married?
 |
| * What are your marriage plans?
 |
| ***Race*** |
|  | * What is your race?
 |
| ***Age*** |
|  | * What is your birth date?
 |
| * How old were you when you graduated?
 |
| * How do you feel about working with someone younger than you?
 |
| * How well do you get along with younger people?
 |
| ***National Origin*** |
| * What languages do you speak, read, or write fluently?
* Does your visa permit work in the United States?
 | * How did you learn to read, write, or speak (another language)?
 |
| * Where were you born?
 |
| * What is your spouse/parents’ nationality?
 |
| * What organizations do you belong to/are active in?
 |
| ***Religion*** |
|  | * What is your religion?
 |
| * What are your religious/spiritual beliefs?
 |
| * Do you attend church/synagogue regularly?
 |
| * What church/synagogue do you attend?
 |
| ***Disability*** |
| *Questions about specific job-related functions, e.g.,** Can you [do a specific task]?
* Are you able to perform [specific task] with or without an accommodation?
 | *Any general questions about a candidate’s physical or mental condition, such as:* |
| * Have you ever been hospitalized?
 |
| * Have you ever been treated for a mental disorder/drug addiction/alcoholism?
 |
| * Have you ever filed for worker’s compensation benefits?
 |
| ***General Topics to Avoid with All Candidates*** |
|  | * Arrest record
 |
| * Hobbies and activities outside of work
 |
| * Opinions regarding unions
 |
| * Information about military discharge
 |



June 11, 2025

Click here and type the recipient’s name and address

RE: Click here and type title of position

Dear Sir or Madam:

Thank you for submitting an application for the above vacancy. We have scheduled an interview with you on Click or tap to enter a date. at Click or tap here to enter text. Choose an item..

The major elements of the selection process for candidates include the following:

* An evaluation and assessment of credentials
* A fair and thorough interview
* An evaluation of critical job requirements
* A criminal history record check

Please note: the selection process may take up to three (3) months. There is no time limit on reapplication for all vacancies within the Department.

Please click the following link for directions if necessary <https://scdps.sc.gov/ohr/directions>. Once you have arrived, please contact. Someone will come down to escort you to your interview.

We look forward to a pleasant and informative discussion with you.

Sincerely,

Click here and type name, and title

South Carolina Department of Public Safety

**INTERVIEW QUESTIONNAIRE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Name:** | Click or tap here to enter text. | **Position Title:** | Click or tap here to enter text. |
| **Panel Member:** | Click or tap here to enter text. | **Date:** | Click or tap here to enter text. |

|  |
| --- |
| 1. **Click or tap here to enter interview question**
 |
| Click or tap here to enter text. |

|  |
| --- |
| 1. **Click or tap here to enter interview question**
 |
| Click or tap here to enter text. |

|  |
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| 1. **Click or tap here to enter interview question**
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| Click or tap here to enter text. |

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| 1. **Click or tap here to enter interview question**
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| Click or tap here to enter text. |

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| 1. **Click or tap here to enter interview question**
 |
| Click or tap here to enter text. |

|  |
| --- |
| 1. **Click or tap here to enter interview question**
 |
| Click or tap here to enter text. |

**APPLICANT EVALUATION FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Name:** | Click or tap here to enter text. | **Position Title:** | Click or tap here to enter text. |
| **Panel Member:** | Click or tap here to enter text. | **Date:** | Click or tap here to enter text. |

1. List critical job requirements for the job prior to the interview.
2. Indicate by circling the appropriate number the degree to which the applicant meets each critical job requirement.

|  |  |  |  |
| --- | --- | --- | --- |
| **Critical Job Requirement** | **Below Average***Not as strong as needed* | **Good***Meets job needs or minimum requirements* | **Very Good***Exceed Requirements* |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| Click or tap here to enter text. | 0 | 1 | 2 | 3 | 4 | 5 |
| **Total** | **/40** |

|  |
| --- |
| **Additional comments** |
| Click or tap here to enter text. |

**PROFESSIONAL REFERENCE CHECK #1**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Name:** | Click or tap here to enter text. | **Position Title:** | Click or tap here to enter text. |
| **Reference Name:**  | Click or tap here to enter text. | **Date:** | Click or tap to enter a date. |

**Please rate the applicant on the following characteristics:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Characteristics** | **Excellent** | **Good** | **Poor** | **No Rating** |
| 1. **Dependable**
 |[ ] [ ] [ ] [ ]
| 1. **Trustworthy**
 |[ ] [ ] [ ] [ ]
| 1. **Responsible**
 |[ ] [ ] [ ] [ ]
| 1. **Work Ethic**
 |[ ] [ ] [ ] [ ]

|  |
| --- |
| **How long have you known the candidate? Please describe your relationship to the candidate.** |
| Click or tap here to enter text. |
| **How does the candidate handle challenging or stressful situations?** |
| Click or tap here to enter text. |
| **Describe the candidate’s professional relationship with coworkers, customers and supervisors.** |
| Click or tap here to enter text. |
| **Please describe the candidate’s communication and listening skills.** |
| Click or tap here to enter text. |
| **What skills does the candidate have that you believe make them stand out as a quality candidate?** |
| Click or tap here to enter text. |
| **Any additional comments that you feel may help us in making our selection.** |
| Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Selecting Official** |  | **Date:** |  |

**PROFESSIONAL REFERENCE CHECK #2**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Name:** | Click or tap here to enter text. | **Position Title:** | Click or tap here to enter text. |
| **Reference Name:**  | Click or tap here to enter text. | **Date:** | Click or tap to enter a date. |

**Please rate the applicant on the following characteristics:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Characteristics** | **Excellent** | **Good** | **Poor** | **No Rating** |
| 1. **Dependable**
 |[ ] [ ] [ ] [ ]
| 1. **Trustworthy**
 |[ ] [ ] [ ] [ ]
| 1. **Responsible**
 |[ ] [ ] [ ] [ ]
| 1. **Work Ethic**
 |[ ] [ ] [ ] [ ]

|  |
| --- |
| **How long have you known the candidate? Please describe your relationship to the candidate.** |
| Click or tap here to enter text. |
| **How does the candidate handle challenging or stressful situations?** |
| Click or tap here to enter text. |
| **Describe the candidate’s professional relationship with coworkers, customers and supervisors.** |
| Click or tap here to enter text. |
| **Please describe the candidate’s communication and listening skills.** |
| Click or tap here to enter text. |
| **What skills does the candidate have that you believe make them stand out as a quality candidate?** |
| Click or tap here to enter text. |
| **Any additional comments that you feel may help us in making our selection.** |
| Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Selecting Official** |  | **Date:** |  |

**PROFESSIONAL REFERENCE CHECK #3**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Name:** | Click or tap here to enter text. | **Position Title:** | Click or tap here to enter text. |
| **Reference Name:**  | Click or tap here to enter text. | **Date:** | Click or tap to enter a date. |

**Please rate the applicant on the following characteristics:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Characteristics** | **Excellent** | **Good** | **Poor** | **No Rating** |
| 1. **Dependable**
 |[ ] [ ] [ ] [ ]
| 1. **Trustworthy**
 |[ ] [ ] [ ] [ ]
| 1. **Responsible**
 |[ ] [ ] [ ] [ ]
| 1. **Work Ethic**
 |[ ] [ ] [ ] [ ]

|  |
| --- |
| **How long have you known the candidate? Please describe your relationship to the candidate.** |
| Click or tap here to enter text. |
| **How does the candidate handle challenging or stressful situations?** |
| Click or tap here to enter text. |
| **Describe the candidate’s professional relationship with coworkers, customers and supervisors.** |
| Click or tap here to enter text. |
| **Please describe the candidate’s communication and listening skills.** |
| Click or tap here to enter text. |
| **What skills does the candidate have that you believe make them stand out as a quality candidate?** |
| Click or tap here to enter text. |
| **Any additional comments that you feel may help us in making our selection.** |
| Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Selecting Official** |  | **Date:** |  |

**EMPLOYMENT REFERENCE CHECK**

Talk to applicant’s manager, if possible. At a minimum, most companies will verify employment dates and job title. Always match this against the application. If no work history is listed on the application, personal references can be in place of employment references.

|  |  |
| --- | --- |
| **Applicant’s Name:**  | Click or tap here to enter text. |
| **Reference’s Name:** | Click or tap here to enter text. | **Title:** | Click or tap here to enter text. |
| **Company’s Name:**  | Click or tap here to enter text. | **Phone:** | Click or tap here to enter text. |
| **Applicant’s Last Position:** | Click or tap here to enter text. |
| **Employment Dates:** | Click or tap to enter a date. To Click or tap to enter a date. |
| **Any supervisory duties?** | Click or tap here to enter text. |
| **Job Duties/Type of work:** | Click or tap here to enter text. |

**Please rate the applicant on the following characteristics:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Characteristics** | **Excellent** | **Good** | **Poor** | **No Rating** |
| 1. **Dependable**
 |[ ] [ ] [ ] [ ]
| 1. **Trustworthy**
 |[ ] [ ] [ ] [ ]
| 1. **Responsible**
 |[ ] [ ] [ ] [ ]
| 1. **Work Ethic**
 |[ ] [ ] [ ] [ ]

|  |
| --- |
| **Describe your overall experience working with the candidate.** |
| Click or tap here to enter text. |
| **What are some of the candidate’s strengths?** |
| Click or tap here to enter text. |
| **In what areas does the candidate show the greatest need for improvement? Is there any area where he/she would need additional support in his/her first 90 days?** |
| Click or tap here to enter text. |
| **Please describe the candidate’s communication and listening skills.** |
| Click or tap here to enter text. |

|  |
| --- |
| **How does the candidate handle challenging or stressful situations?** |
| Click or tap here to enter text. |
| **What major accomplishments did the candidate have during his/her employment?** |
| Click or tap here to enter text. |
| **What was the candidate’s reason for leaving?**  |
| Click or tap here to enter text. |
| **Would you rehire the candidate? Why or Why not?** |
| Click or tap here to enter text. |
| **Any additional comments that you feel may help us in making our selection:** |
| Click or tap here to enter text. |

**For positions with supervisory responsibilities:**

|  |
| --- |
| **How would you characterize the candidate’s general management/leadership style?** |
| Click or tap here to enter text. |
| **How does the candidate go about making tough/complex decisions?** |
| Click or tap here to enter text. |
| **How does the candidate deal with conflict?** |
| Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Selecting Official** |  | **Date:** |  |

**APPLICANT ROSTER SHEET**

Please list **all** applicants interviewed, listing the top three applicants (*order of ranking not required*)

|  |
| --- |
| **APPLICANTS INTERVIEWED** |
| **FIRST NAME** | **LAST NAME** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **VETERAN CANDIDATES INTERVIEWED** |
| **FIRST NAME** | **LAST NAME** |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
|[ ]  **Check for no veterans referred** |

**\*\*\*If any veteran candidate were referred, you must interview at least one.**

**Please list name or check above if no veterans were referred for this position.**

|  |
| --- |
| **SELECTED CANDIDATE(S)** [ ]  ***Internal Candidate Selected*** |
| **FIRST NAME** | **LAST NAME** |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **PROPOSED SALARY / APPLICANT (*if multiple*)** | **EFFECTIVE DATE** |
|  |  |
|  |  |

**MEMORANDUM**

|  |  |
| --- | --- |
| **To:** | Human Resources Employment Unit |
| **From:** | Choose an item. |
| **Re:** | NCIC/SCIEx/DL Check |
| **Date:** | June 11, 2025 |

Please conduct a NCIC, SCIEx and SCDMV check on the following applicant for the purposes of SCDPS employment.

|  |  |
| --- | --- |
| **Full Name:** | Click or tap here to enter text. |
| **Date of Birth:** | Click or tap to enter a date. |
| **Social Security #:** | Click or tap here to enter text. |
| **Driver’s License State Issued:** | Click or tap here to enter text. | **Driver’s License Number** | Click or tap here to enter text. |
| **Race:** | Choose an item. | **Sex** | Choose an item. |