

LEXINGTON COUNTY SHERIFF'S OFFICE
SHERIFF Bryan "Jay" Koon



Internship Application



Lexington County Sheriff's Office

SHERIFF Bryan "Jay" Koon

The purpose of the program is to give students insight into the opportunities of a law enforcement career. The college intern program at the Lexington County Sheriff's Office is for current college students seeking academic credit; however exemptions to this can be made by the Sheriff or his designee. The Sheriff's Office does not offer a paid internship and spaces are limited. It is strongly recommended that you submit an application for an internship the semester prior to the requested intern semester.

Protocol for Internship Program

1. All accepted students in the internship program are under the direction of the Sheriff or his designee. All "assignments" will be accepted. You do not have the right to decline an "assignment" except with the expressed permission of your intern coordinator or immediate staff member.
2. The student must submit to the Sheriff's Office a written application with a letter of introduction and recommendation from the intern coordinator at their college or university.
3. The student will be interviewed to determine acceptance in the program.
4. The student will sign a release of liability form. Information that may become available to you through your internship can not be abused. Criminal records, driving records, etc., regarding family or relatives will not be researched under any circumstances.
5. The student will authorize the Sheriff's Office to conduct a background check. Upon the result of that report, the student will be informed of acceptance or denial into the Sheriff's Office internship program.
6. If a student submits an application and does not meet our agency requirements, the student will not be accepted into our internship program.
7. The student will participate in an orientation about the Sheriff's Office expectations and the responsibilities of the student while participating in the program.
8. The intern will rotate through the major divisions of the Sheriff's Office. Upon completion of the rotation, the intern will spend the majority of time in a division of their choice.
9. The intern will be required to work a minimum of 10 hours per week depending on the starting date and the required number of hours for their college or university.
10. The intern will dress according to the policy and procedures of the Sheriff's Office. Proper attire is business attire. Men should also have neatly trimmed hair and facial hair. Women are to have conservatively styled hair. No excessive jewelry and no visible tattoos. Polo shirts, T-shirts, and jeans are not acceptable.
11. The intern will not be authorized to carry a weapon or have access to weapons issued by the Sheriff's Office.
12. When in a patrol vehicle with an officer, an intern will remain inside the unit and observe. The intern will not be permitted to use any portable or police communication equipment, unless if an extreme emergency exists. The intern will not question an officer's authority or decision.
13. Department heads or their designee will complete an intern's field worksheet. No section of the report is to be completed by an intern.
14. An intern is not allowed to interview a prisoner while both are being transported in the same vehicle.
15. The intern will keep a daily or weekly journal of their experience. The minimum entry being two paragraphs weekly. The journal and the intern's attendance will be evaluated jointly to determine completion of the program.
16. At the conclusion of the internship, the intern will be given a written evaluation of the program.
17. Failure to report as scheduled, unless excused by your coordinator or supervising officer, may result in immediate removal from the internship program.



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Intern Orientation

The following topics and policies will be covered with each intern:

- ✓ The Sexual Harassment Policy – County of Lexington
- ✓ Safety Policy – County of Lexington
- ✓ Violence in the Work Place
- ✓ Sheriff's Office Chain of Command
- ✓ The use of the chain of command/Training
- ✓ Professional dress and confidentiality of sensitive issues/information
- ✓ Customer Service/presentation
- ✓ Telephone Etiquette
- ✓ Introduction of staff/divisions and locations of Sheriff's Office buildings
- ✓ Waiver of confidentiality

To be completed after acceptance into intern program.

Office of Training Signature

Date

Intern's Signature

Date

I understand that being an Intern does NOT give me authority to enforce the law.

Intern's Signature

Date



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Internship Application

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT IN BLUE OR BLACK INK ONLY)

Name (Last, First Middle): _____

Street Address: _____

City: _____, State: _____, Zip Code: _____

South Carolina Driver's License Number: _____ Expiration Date: _____

Social Security Number: _____ Date of Birth: _____

Phone Number: _____ Alternate Phone Number: _____

Email Address: _____

Sex: Male _____; Female _____

Race: White _____; Black _____; Hispanic _____; Asian _____; Other _____, Please list _____

Date of Application: _____

Requested Semester for Internship: Spring _____; Fall _____

Name of College/University: _____

Declared Major(s): _____

Declared Minor(s): _____

Days and Times Available to Report

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
HOURS					



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PERSONAL AND PROFESSIONAL REFERENCES

Name	Occupation	Phone Number	Best Time to Call

EDUCATION

School	Name of School	Address (City, State)	Course of Study	Diplomas/Degree
High School				
Undergraduate College				
Graduate/Professional College				
Other (Please specify)				

Have you ever maintained an online social networking site, such as Facebook, YouTube, Instagram, TikTok, etc.?

☐ Yes

☐ No

If **yes**, please list the service, web address, and user ID for each site below:

Service and User ID: _____

Service and User ID: _____

Service and User ID: _____

Service and User ID: _____



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WORK HISTORY

Start with present or last job. Include any job-related, military service assignments, and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer: _____ Dates Employed: _____

Employer's Address: _____

Supervisor's Name: _____ Employer's Phone Number: _____

Reason for Leaving: _____

Pay Rate / Salary: Starting _____ Final _____

Work Performed _____

Employer: _____ Dates Employed: _____

Employer's Address: _____

Supervisor's Name: _____ Employer's Phone Number: _____

Reason for Leaving: _____

Pay Rate / Salary: Starting _____ Final _____

Work Performed _____

Employer: _____ Dates Employed: _____

Employer's Address: _____

Supervisor's Name: _____ Employer's Phone Number: _____

Reason for Leaving: _____

Pay Rate / Salary: Starting _____ Final _____

Work Performed _____



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Authorization for Release of Records

In order to determine my suitability for an internship, the *Lexington County Sheriff's Office* is conducting a personal background investigation.

I, _____, do hereby authorize any law
enforcement agency, military organization, doctors, insurance companies, educational
institutions, governmental agencies, banks and credit agencies, former and present employers,
and individuals to furnish the Lexington County Sheriff's Office any or all available information
regarding me, whether or not it is on their records. I hereby release them from any civil or
criminal liability whatsoever for issuing it.

Signature

Date: _____

Sworn and Subscribed before me, this

_____ Day of _____.

Notary Public of South Carolina

My Commission Expires: _____



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RELEASE OF LIABILITY

Statement of Responsibility

If accepted as an intern at the Lexington County Sheriff's Office, I will hold in strict confidence, all personal, departmental, and Sheriff's Office matters, which come to my attention. It is my responsibility to respect and preserve the privacy of those mentioned above as well as any detail involved.

Intern's Signature: _____ Date: _____

Intern Confidentiality Statement

As an intern of the Lexington County Sheriff's Office, I am aware of my responsibility to adhere to the policies relating to confidentiality regarding citizen's incident reports, records, and information.

I understand that citizen's records are property of the Sheriff's Office and are maintained for the benefit of the citizen, the Sheriff's Office staff, and the Sheriff's Office.

Information deemed as confidential includes: incident reports, supplemental reports, victim statements, witness statements, criminal histories, and records maintained by the Sheriff's Office in all departments including interoffice memos.

Intern's Signature: _____ Date: _____

I hereby release from liability any representative of the Sheriff's Office for any acts performed in good faith and without malice in connection with evaluating my request to serve as an intern of the Lexington County Sheriff's Office. I hereby consent to the release of such information pertaining to physical, emotional health and criminal history.

Intern's Signature: _____ Date: _____

Witness's Signature: _____ Date: _____

Printed Name of Witness: _____



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A U T H O R I Z A T I O N

To ride in Sheriff's Office Vehicle with Officer

In consideration of receiving permission from the Lexington County Sheriff's Office to ride with an Officer on active patrol, I _____, being
Print Name
Currently enrolled in an approved college course at _____
do acknowledge receipt of such permission with the understanding that I will remain in the vehicle at all times while the officer is handling a call.

In further consideration of receiving permission to participate, I, on behalf of myself and my heirs, hereby release the Lexington County Sheriff's Office, and all individual members from any and all liability, claim, demand, action and causes of action whatsoever arising out of or related to any personal or property loss, damage or injury, including death, that may be sustained during the hours assigned while riding patrol with an officer of the Sheriff's Office. This release shall survive my death and be binding on my heirs.

Intern's Signature: _____ Date: _____
Witness's Signature: _____ Date: _____
Witness's Printed Name: _____



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Record of Hours

Intern's Name: _____

Date	Time In	Time Out	Hours	Department	Department Signature



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Intern Journal Entry

Week #: _____ Intern's Name: _____

Rotation Department Completed _____

Description of Experience: