



MARION COUNTY SHERIFF'S OFFICE APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

THE MARION COUNTY SHERIFF'S OFFICE DOES NOT DISCRIMINATE IN EMPLOYMENT ON THE BASIS OF RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, POLITICAL AFFILIATION, SEXUAL ORIENTATION, MARITAL STATUS, DISABILITY, GENETIC INFORMATION, AGE, MEMBERSHIP IN AN EMPLOYEE ORGANIZATION, RETALIATION, PARENTAL STATUS, MILITARY SERVICE, OR OTHER NON-MERIT FACTOR.

PERSONAL INFORMATION

| | | | | |
|--|------------|---------------|------------------------|----------------------------|
| (LEGAL NAME) LAST NAME | | FIRST NAME | MIDDLE NAME | TODAY'S DATE |
| LIST ANY OTHER NAMES USED IF DIFFERENT FROM NAME ABOVE (FOR BACKGROUND VERIFICATION PURPOSES ONLY. THIS INFORMATION WILL NOT AUTOMATICALLY DISQUALIFY YOU FROM BEING CONSIDERED FOR EMPLOYMENT.) | | | | |
| PRESENT ADDRESS | | CITY, STATE | ZIP CODE | YEARS AT CURRENT RESIDENCE |
| HOME PHONE | CELL PHONE | DATE OF BIRTH | SOCIAL SECURITY NUMBER | |

GENERAL INFORMATION

| | |
|-----------------------------|--|
| (CIRCLE ONE) YES NO | ARE YOU SUBJECT TO A NON-COMPETE AGREEMENT OR OTHER AGREEMENT WHICH WOULD PRECLUDE OR RESTRICT YOUR EMPLOYMENT WITH US? IF SO, PLEASE DESCRIBE. |
|-----------------------------|--|

REFERENCES

PLEASE LIST AT LEAST 3 INDIVIDUALS WHO ARE QUALIFIED TO EVALUATE YOUR CAPABILITIES, PREFERABLY MANAGERS, PEERS, OR SUBORDINATES. DO NOT INCLUDE RELATIVES.

| NAME | RELATIONSHIP | TITLE | COMPANY | HOME PHONE/WORK PHONE |
|------|--------------|-------|---------|-----------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

HIRING POLICIES AND PROCEDURES

WE DO NOT DISCRIMINATE ON THE BASIS OF RACE, SEX (INCLUDING PREGNANCY), COLOR, AGE, NATIONAL ORIGIN, DISABILITY OR ANY OTHER PROTECTED STATUS. WE BASE OUR HIRING DECISIONS ON A VARIETY OF FACTORS, INCLUDING SKILLS AND ABILITY TO PERFORM THE JOB, PRIOR EMPLOYMENT EXPERIENCE, EMPLOYMENT REFERENCES AS TO CHARACTER AND WILLINGNESS TO WORK, WILLINGNESS TO ACCEPT THE OFFERED SALARY, AND PERSONAL INTERVIEWS.

EMPLOYMENT INFORMATION – STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYMENT, LIST ALL PREVIOUS EMPLOYERS INCLUDING SELF-EMPLOYMENT, MILITARY SERVICE, SUMMER AND PART-TIME JOBS FOR AT LEAST THE LAST 10 YEARS. MUST BE COMPLETED IN FULL FOR EACH EMPLOYER. WRITING “SEE RESUME” IS NOT ACCEPTABLE. USE ADDITIONAL SHEET IF NECESSARY, TO COVER YEARS OF EMPLOYMENT. **ADDITIONALLY, ATTACH PROFESSIONAL RESUME.**

| | | | | |
|-------------------------------|---------------------|-----------------|---------------------------|-----------|
| 1.) ORGANIZATION NAME: | | TITLE: | START DATE: | END DATE: |
| ADDRESS: | | | PHONE: | |
| NAME AND TITLE OF SUPERVISOR: | | MAY WE CONTACT? | NOW | |
| | | | AFTER ACCEPTANCE OF OFFER | |
| SALARY: | REASON FOR LEAVING: | | | |
| 2.) ORGANIZATION NAME: | | TITLE: | START DATE: | END DATE: |
| ADDRESS: | | | PHONE: | |
| NAME AND TITLE OF SUPERVISOR: | | MAY WE CONTACT? | NOW | |
| | | | AFTER ACCEPTANCE OF OFFER | |
| SALARY: | REASON FOR LEAVING: | | | |
| 3.) ORGANIZATION NAME: | | TITLE: | START DATE: | END DATE: |
| ADDRESS: | | | PHONE: | |
| NAME AND TITLE OF SUPERVISOR: | | MAY WE CONTACT? | NOW | |
| | | | AFTER ACCEPTANCE OF OFFER | |
| SALARY: | REASON FOR LEAVING: | | | |
| 4.) ORGANIZATION NAME: | | TITLE: | START DATE: | END DATE: |
| ADDRESS: | | | PHONE: | |
| NAME AND TITLE OF SUPERVISOR: | | MAY WE CONTACT? | NOW | |
| | | | AFTER ACCEPTANCE OF OFFER | |
| SALARY: | REASON FOR LEAVING: | | | |

U.S. MILITARY SERVICE

| BRANCH OF SERVICE | TECHNICAL SPECIALIZATION | RANK ATTAINED |
|-------------------|--------------------------|---------------|
| | | |

MISSOURI POST CERTIFICATION

| TRAINING ACADEMY ATTENDED | LICENSING STATE | POST NUMBER |
|---------------------------|-----------------|-------------|
| | | |

EDUCATION HISTORY

| TYPE OF SCHOOL | NAME AND LOCATION OF SCHOOL | DEGREE/AREA OF STUDY | NUMBER OF YEARS ATTENDED | GRADUATED (CIRCLE ONE) |
|--------------------|-----------------------------|----------------------|--------------------------|------------------------|
| HIGH SCHOOL | NAME ADDRESS | | | YES NO |
| | CITY STATE ZIP | | | |
| COLLEGE | NAME ADDRESS | | | YES NO |
| | CITY STATE ZIP | | | |
| GRADUATE SCHOOL | NAME ADDRESS | | | YES NO |
| | CITY STATE ZIP | | | |
| OTHER/TRADE SCHOOL | NAME ADDRESS | | | YES NO |
| | CITY STATE ZIP | | | |

CERTIFICATION

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION.

I AFFIRM THAT I AM MAKING THIS APPLICATION BECAUSE I AM SINCERELY INTERESTED IN BEING HIRED BY **THE MARION COUNTY SHERIFF'S OFFICE** AND NOT FOR ANY OTHER PURPOSE.

I CERTIFY THAT ALL STATEMENTS I HAVE MADE ON THIS APPLICATION, ON MY RESUME, OR OTHER SUPPLEMENTARY MATERIALS ARE TRUE AND CORRECT. I HEREBY AUTHORIZE THE MARION COUNTY SHERIFF'S OFFICE TO INVESTIGATE THE ACCURACY OF THIS INFORMATION FROM ANY PERSON OR ORGANIZATION AND I RELEASE THE MARION COUNTY SHERIFF'S OFFICE AND ALL PERSONS AND ORGANIZATIONS FROM ALL CLAIMS OR LIABILITIES OF ANY NATURE ARISING FROM SUCH INVESTIGATIONS OR THE SUPPLYING OF INFORMATION FOR SUCH INVESTIGATIONS. I UNDERSTAND THAT IF I AM BEING CONSIDERED FOR A POSITION WHICH REQUIRES DRIVING A MARION COUNTY SHERIFF'S OFFICE VEHICLE, A REPORT EXAMINING MY DRIVING RECORD MAY ALSO BE REQUESTED, AND I SIMILARLY RELEASE ALL PERSONS AND ORGANIZATIONS FROM ALL CLAIMS OR LIABILITIES OF ANY NATURE ARISING FROM SUCH EXAMINATION OR THE SUPPLYING OF INFORMATION FOR SUCH EXAMINATION. I ACKNOWLEDGE THAT ANY FALSE STATEMENT, SIGNIFICANT OMISSION, OR MISREPRESENTATION ON THIS APPLICATION OR SUPPLEMENTARY MATERIALS WILL BE CAUSE FOR REFUSAL TO HIRE OR, IF EMPLOYMENT HAS ALREADY BEGUN, FOR IMMEDIATE DISMISSAL AT ANY TIME DURING THE PERIOD OF MY EMPLOYMENT.

ALL EMPLOYEES OF THE MARION COUNTY SHERIFF'S OFFICE SERVE A SIX-MONTH PROBATIONARY PERIOD FROM THE DATE OF ORIGINAL EMPLOYMENT. DURING THIS TIME, THEY CAN DEMONSTRATE THEY CAN PERFORM EFFECTIVELY THEIR OUTLINED DUTIES. AT THE END OF THIS PROBATIONARY PERIOD IF THEIR SERVICE REFLECTS SATISFACTORY PERFORMANCE, THEIR STATUS BECOMES PERMANENT; IF UNSATISFACTORY, THEIR EMPLOYMENT IS TERMINATED. EMPLOYMENT IS SECURED ONLY BASED ON QUALIFICATIONS FOR A GIVEN POSITION. EMPLOYEES ARE RETAINED ONLY BASED ON SATISFACTORY PERFORMANCE OF DUTIES; AND ADVANCEMENT WITHIN THE OFFICE IS BASED ON DEMONSTRATED ABILITY AND MERIT.

| | |
|------------------------|------|
| SIGNATURE OF APPLICANT | DATE |
| | |

FOR OFFICE USE ONLY

DATE: _____

PRELIMINARY INTERVIEW CONDUCTED BY: _____

INTERVIEW COMMENTS: _____

