



SHERIDAN COUNTY SHERIFF'S OFFICE

APPLICATION FOR EMPLOYMENT SHERIDAN COUNTY SHERIFF'S OFFICE

NOTICE: Application must be typed or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable). Applications which are incomplete or illegible will not be considered. If space provided is insufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions.

1. F	PERSO	NAL INFOR	RMATION	
Name in Full (Last, First, Middle)				Social Security Number
Address (Apartment, Street, P.O. Box)				Home Telephone Number
Autress (Apartment, Street, 1.0. Dox)				
				()
City	State		Zip Code	Work Telephone Number
				()
Date of Birth:		Are you	a United States citize	en? 🗆 Yes 🗆 No
Do you have a valid Wyoming driver's license? $\$ D Ye No	s □	Do you ł No	nave a valid driver's	license from another state? Ves
Have you ever been convicted of a felony?		Have you	a completed High Sc	hool or GED equivalent? 🗌 Yes 🛛 No

What position are you applying for?

2. EDUCATION					
		Dates			
Name of School Loca	ation Fro	m To	Course Pursued	Degree, Diploma, or Credits Earned	
High Schools-					
College-					
Graduate School-					

List any scholarships, apprenticeships, licenses, certifications, membership in professional organizations or other information you believe should be considered in evaluating your qualifications.

3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, provide dates. To furnish additional employment information, attach sheets of the same size and format as this application.

Name and Address of Employer	Dates	Position and Kind of Work
Name	From To	
Street		
City, State	Full-Time	
Supervisor's Name/Telephone:	Part-Time	
May we contact the employer/supervisor?	Annual Salary/Wages:	Reason for Leaving
Name	From To	
Street		
City, State	Full-Time	
Supervisor's Name/Telephone:	Part-Time	
May we contact the employer/supervisor?	Annual Salary/Wages:	Reason for Leaving
Name	From To	
Street		
City, State	Full-Time	
Supervisor's Name/Telephone:	Part-Time	
May we contact the employer/supervisor? Yes No	Annual Salary/Wages:	Reason for Leaving
Name	From To	
Street		
City, State	Full-Time	
Supervisor's Name/Telephone:	Part-Time	
		Reason for Leaving
May we contact the employer/supervisor?	Annual Salary/Wages:	Reason for Leaving

4. MILITARY SERVICE					
Branch of Service	Month/Ye From	ar Served To	Active Duty or Reserve	Highest Grade	Skill Specialty or Primary Duty

List special schools attended/skills acquired during military service.

5. REFERENCES

Give five references (not relatives, or present employer; avoid listing members of the clergy).

Name	Number of Years Acquainted
Address City/State/Zip Telephone Number()	Position/Title/Profession
Name	Number of Years Acquainted
Address City/State/Zip Telephone Number ()	Position/Title/Profession
Name	Number of Years Acquainted
Address City/State/Zip Telephone Number()	Position/Title/Profession
Name	Number of Years Acquainted
Address City/State/Zip Telephone Number()	Position/Title/Profession
Name	Number Of Years Acquainted
Address City/State/Zip Telephone Number (Position/Title/Profession

6. Residencies					
	Date				
Address (Street, City State Zip code)	From	То	Neighbors Name	Contact Information	

7. PRE-INVESTIGATIVE QUESTIONNAIRE

As an Applicant for the position with the Sheridan County Sheriff's Office you are required to complete the following Pre-Investigative Questionnaire. As part of the questionnaire, you are admonished with the following "I hereby certify that all statements and answers made on this questionnaire are true and complete. I understand that any misstatements of material facts will subject me to disqualification or dismissal".

Do you understand this admonishment?	Yes 🗌	No 🗌
Do you have any questions about this admonishment?	Yes 🗌	No 🗌

Read and answer the following questions carefully and honestly. Answers are subject to verification by a polygraph examination.

CRIMINAL AND ARREST INFORMATION

1. Have you ever committed any of the following acts:

A.	Arson (intentionally set fire)	Yes 🗌	No 🗌
В.	Burglary (entry of a structure or vehicle to commit a theft or other crime)	Yes 🗌	No 🗌
C.	Robbery(Theft of another person utilizing Force or a weapon)	Yes 🗌	No 🗌
D.	Homicide	Yes 🗌	No 🗌
E.	Theft	Yes 🗌	No 🗌
F.	Forgery	Yes 🗌	No 🗌
G.	Kidnapping	Yes 🗌	No 🗌
H.	Extortion (Blackmail)	Yes 🗌	No 🗌
	nbezzlement (Theft of money or valuables ntrusted to you)	Yes 🗌	No 🗌
J.	Rape (sexual intercourse by force)	Yes 🗌	No 🗌
K.	Any other forcible sexual act (oral, copulation, sodomy, ect.)	Yes	No 🗌
L.	Any Violent assault upon another	Yes 🗌	No 🗌
M.	Domestic Battery (violent physical act against house hold member)	Yes 🗌	No 🗌

If you answered "Yes" to any of the preceding questions please explain:

2. Have you ever stolen from an employer? Yes

No

Yes	s 🗌 No 🗌	
Explain:	n:	
4.	Have you ever committed a crime not previously mentioned? Yes No	
Explain:		
5.	If you have ever been arrested or convicted for any crime, as an adult (excluding traffic citations), please give the following information	1:
Date(s):	Agency Circumstance(s)	
6.	Have you ever carried a personal weapon for the purpose of protection? Yes No	
Explain:		
7.	Have you intentional omitted any fact or facts from any applications or withheld any information from personnel investigators?	
	Yes 🗌 No 🗌	
Explain:		
8.	Have you ever been required to register as a sex offender? Yes No	
	Dlain:6	

Did you ever fail to register for the military draft or Selective Service when required to do so by law? 3.

9. Have you ever used any of the following substances, drugs or Narcotics? If you have never used the substances, write NO on the Line.

If you have used the substance, even ONE TIME, indicate the dates and the amount of times used.

Marijuana: _ Hashish: _____ Hash Oil: — Cocaine: ____ Barbiturates: Amphetamines: ____ Heroin: Hallucinogenic: _____ Other (list by name):_____ 10. Have you ever remained in a place where any illegal substance, narcotics or drugs where being used or sold?

Explain:	Yes 🗌 No 🗌			
	Have you ever purchased narcotics or drugs without a doctor's prescription?	Yes 🗌	No 🗌	
If yes and	Have you ever sold narcotics or drugs including marijuana? s include substance sold, number of times sold, last time sold profit gained from sales.	Yes 🗌	No 🗌	
Expla	ain:			
13. or th	Have you ever been absent from work due to drinking e recreational use of drugs?	Yes 🗌	No 🗌	
Expla	ain:			
14. or dr	Have you ever been treated for a drinking problems ug problems?	Yes 🗌	No 🗌	
Expla	ain:			
15. or th	Have you ever had any family problems caused by drinking e recreational use of drugs?	Yes 🗌	No 🗌	
Expla	ain:			

16. Are you or have you ever been an excessive drinker? Explain:	Yes 🗌	No 🗌	
17. Do you now or have you ever belonged to A.A. or any similar organization?	Yes 🗌	No	
Explain:			
18. Do you consider yourself an alcoholic?	Yes 🗌	No 🗌	
Explain:			
19. Have you ever driven a vehicle while under the influence of drugs or alcohol?	Yes 🗌	No 🗌	
Explain:			
20. Are you now or have you ever been treated for any type of psychological problem(s)?	Yes 🗌	No 🗌	
Explain:			
24 House you over contempleted oviside?	V []		
21. Have you ever contemplated suicide? Explain:	Yes 🗌	No 🗌	

22. Have you ever been fired from employment?	Yes 🗌	No 🗌	
Explain:			
23. Have you ever been asked to resign from employment?	Yes 🗖	No 🗌	
Explain:			
 Have you deliberately taken anything from your employer 	Yes 🗌	No 🗌	
without authorization?			
25. Have you ever received any disciplinary action while employed On any job (Written, Oral reprimand or suspension)?	Yes 🗌	No 🗌	
Explain:			
26. Have you ever had any problems with and of your supervisors on any job that you have held?	Yes 🗌	No 🗌	
Explain:			
27. Have you had any problems with co-workers on any job?	Yes 🗌	No 🗌	
Explain:			

28. Have you had any problems dealing with the public on any jobs?	Yes 🗌	No 🗌	
Explain:			
29. Have you ever been a member of a street gang? Explain:	Yes 🗌	No 🗌	
30. Have you ever attended a gathering of any street gang?	Yes 🗌	No 🗌	
Explain:			
31. Has any member of your family knowingly associated with a member of any street gang?	Yes 🗌	No 🗌	
Explain:			
32. Have you ever participated in any gang activities?	Yes 🗌	No 🗌	
Explain:			
33. Have you ever violated any laws while associated with a gang member?	Yes 🗌	No 🗌	
Explain:11			

Yes 🗌	No 🗌	
Yes 🗌	No 🗌	
Yes 🗖		
Yes 🗌	No 🗌	
Yes 🗌	No 🗌	
—		
	Yes Yes	Yes No Yes No Yes No

	39. ever	To your knowledge, have any of the persons listed as your references been arrested or involved in any illegal activity?	Yes 🗌	No 🗌
	Expl	lain:		
	40.	List all law enforcement agencies that you have ever applied with and you	r current status with their agenc	sy:
		8. GENERAL		
A.	Why	y have you chosen to apply for this position?		

B. Discuss things you have done which have contributed to your life experience. Remember to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.

C. Why do you believe you could relate to and/or work with people of different races, sexes, cultures, ages, social-economic groups, and educational levels?

APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW

Information provided and statements made as part of this application may be grounds for not employing you or for dismissing you after you begin work. All information provided and statements made are subject to verification.

CERTIFICATION

ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

Applicant's signature:

Date signed: _____





SHERIDAN COUNTY SHERIFF'S OFFICE

REQUEST FOR RELEASE OF INFORMATION

I,	, hereby authorize the r	elease of confidential information regarding myself, as
indicated in t	he checkboxes below	
Type of Info	rmation to Release	
V	Work History	
\checkmark	Start and End Dates	
	Evaluations	
	Disciplinary Records	
	Pre-Employment / Hiring Process Documentation	
V	Other:Any Law Enforcement Agency	As an applicant for a position with the Sheridan County

Sheriff's Office, I am required to furnish information for use in determining my qualifications. In the connection, I do hereby authorize the release and full disclosure of any or all information that you may have concerning me. This includes information of a confidential or privileged nature to include all social media I have participated in, to any duly authorized agent of the Sheridan County Sheriff's Office, to include but not limited to all internal/administrative investigations, background investigations, and psychological evaluations.

This release will expire one (1) year after the date signed.

Applicant Signature

Date Signed