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 St. Anthony, Idaho 83445
 FAX: 208-624-7335
 www.co.fremont.id.us

FREMONT COUNTY FIVE COUNTY DETENTION & YOUTH REHABILITATION CENTER



Application for Employment An Equal Opportunity Employer

To be considered an applicant, you must complete this form. A résumé may also be attached. Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for your signature. This application is to fill the current open position only.

Personal Information:				
Name:				
	Last	First	Middle	Other Names Used
Address:				
	Street	City	State	Zip
Telephone:	()	()	()	
	Home	Cell	Message	
Email Address:				
Webpage Address(s):				
Position Applying For:				
Job Title:				
Are you applying for:	What shifts will you work?	May We Contact Present Employer?		
<input type="checkbox"/> F/T <input type="checkbox"/> P/T <input type="checkbox"/> Temp/Seasonal	<input type="checkbox"/> Days <input type="checkbox"/> Nights	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Available Start Date:				

Are you a U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are you legally eligible to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If naturalized, please provide: _____	
Place	
_____	Naturalization No.
Court	
Do you have or have ever applied for a passport? Yes <input type="checkbox"/> No <input type="checkbox"/> Passport# _____	
(Federal Law requires proof of identity and employment authorization for all new employees.)	
Can you travel if the job requires it? Yes <input type="checkbox"/> No <input type="checkbox"/> Do you have a valid driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/> State: _____	

Education/Training					
<u>School</u>	<u>Name</u>	<u>Location</u>	<u>Dates Attended From / To:</u>	<u>Diploma, Degree & Major</u>	<u>Graduated?</u>
High School					
College					
Other (Business, Vocational, Military)					

1. Describe any awards, honors, citations, positions held in school organizations, and any other special recognition you received while attending school that you would like us to know about: _____

2. Have you ever been suspended or expelled from school? Yes No
If yes, please explain.

3. List any foreign languages you speak: _____
List any foreign languages you read: _____
List any foreign languages you can write: _____

4. Indicate any law enforcement education/training (attach additional paper if necessary):

Name/Topic of Training	Certificate?	Date	Location of Training

5. Has your law enforcement certification ever been suspended, revoked, relinquished or subject to discipline or investigation by POST or any other state's law enforcement certification agency?
Yes No
If yes, explain.

6. Describe any special abilities, interests, and hobbies including the degree of proficiency:

7. Indicate any special skills you possess and equipment you can use which may be related to law enforcement work. (For example: two way radio communications, breathalyzer, speed detection equipment, firearms):

Employment History (Please Start With the Most Recent, Ending With Age 18, Excluding Part-Time Positions Held While Obtaining Higher Education—Use Additional Paper as Necessary.):

Employer:

Address:

Street

City

State

Zip

Telephone: ()

Supervisor Name:

Dates From:

To:

Final Rate of Pay:

Position Held:

Primary Duties:

Reason for Leaving:

Next Employer:

Employer:

Address:

Street

City

State

Zip

Telephone: ()

Supervisor Name:

Dates From:

To:

Final Rate of Pay:

Position Held:

Primary Duties:

Reason for Leaving:

1. Have you ever been dismissed or asked to resign or had any disciplinary action taken against you from **ANY** Employment or volunteer position you have held? Yes No
 If YES, please give details, including dates, employer's name, and specifics:

2. Have you resigned or left a job by mutual agreement following allegations of misconduct or unsatisfactory job performance? Yes No
 If YES, please give details, including dates, employer's name, and specifics:

3. Have you ever applied to or performed paid or unpaid services for a law enforcement agency not listed as an employer? Yes No
 If YES, please provide name of agency and date of application or service.

4. Do you or have you owned a business, or are you or were you a partner or corporate officer in any business or organization not listed previously as a current or former employer? Yes No
 If YES, please provide name and address of business, corporation or organization and describe your relationship or position, and nature of business.

Applicants With Current Or Prior Law Enforcement Experience

1. Identify **ALL** complaints (however characterized) made against you by any member of the public.

Agency	Name of Complainant	Approximate Date	Disposition

2. Identify **All** complaints (however characterized) made against you by any law enforcement personnel (including supervisors or administrators)

Agency	Name of Complainant	Approximate Date	Disposition

3. Identify **All** claims or lawsuits (however characterized) filed against you or your employing agency based on allegations of negligent or wrongful acts or omissions by you.

Agency	Name of Plaintiff (s)	Approximate Date	Court Where Filed

4. Identify **All** disciplinary action (however characterized) taken against you by a law enforcement employer.

Agency	Supervisor or Administrator Taking Action	Approximate Date	Basis and Form of Discipline

5. Identify **All** circumstances in which you have been requested or ordered to take a polygraph exam, CVSA or any other form of truth/deception technology.

Agency	Basis for Exam	Approximate Date	Outcome

Technology Skills (List All Skills & Software Applications You Have Experience Using):

Word Processing:

Spreadsheet:

Other Software:

Database:

Microsoft Office? Yes No PowerPoint? Yes No Outlook? Yes No

Scanner? Yes No Copier? Yes No

Digital Phone Systems? Yes No

Explain Internet Skills, Including Email Usage:

Professional Licenses or Certificates Held:

Specialized Training

Describe any specialized training, apprenticeship or skills:

Personal Reference (Please list the names of three (3) persons not related to you by blood or marriage.)

Name: _____
Last First Middle
Address: _____
Street City State Zip
Telephone: () ()
Home Other
Connection To You (i.e. friend, co-worker): Occupation:

Personal Reference

Name: _____
Last First Middle
Address: _____
Street City State Zip
Telephone: () ()
Home Other
Connection To You (i.e. friend, co-worker): Occupation:

Personal Reference

Name: _____
Last First Middle
Address: _____
Street City State Zip
Telephone: () ()
Home Other
Connection To You (i.e. friend, co-worker): Occupation:

Driving History

1. Are you a licensed Idaho automobile operator? Yes No License No.: _____
Date of expiration: _____ Restrictions: _____

2. Do you hold or have you ever held an operator license in another state? Yes No
If yes, please provide state(s), name used and approximate dates license(s) was/were held.

3. Have you ever been denied issuance of a license or have you ever had a license suspended or revoked?
Yes No
If yes, please provide complete details including why license was revoked.

4. Have you ever had automobile insurance refused, withdrawn, revoked, or required to obtain special risk insurance? Yes No
If yes, please provide details.

Business Interests & Licenses

- 1. Do you or have you ever owned stock or interest in any firm, partnership or corporation dealing wholly or partly in the sale or distribution of alcoholic beverages? Yes No
- 2. Are you now issued or have you ever been issued a license to engage in a business or profession? Yes No
- 3. Was any such license ever cancelled, relinquished, suspended or revoked? Yes No
If yes to questions #1, #2, or #3, please provide details including name and address of business, the type of license or certificate, the agency that issued the license, effective date of license and license number.

Organization Membership

- 1. Are you now, or have you ever been, a member of any foreign or domestic organization, association, movement, group or combination of persons which advocates or approves the commission of acts of force or violence to deny other persons their rights under the constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means?

Yes No

If Yes, include name of organization, dates of membership and location.

- 2. Have you ever made a financial or other material contribution to any organization of the type described in question #1 above? Yes No

If Yes, explain including name of organization, date(s) and location.

Applicant Name: _____

- 3. At the time of your membership, participation, or contribution, did you know of any unlawful aims of the organization? Yes No

If Yes, explain including name of organization, dates, and location.

Military

- 1. Have you ever served on active duty in the Armed Forces of the United States? Yes No

Branch of Service: _____

Highest Rank: _____

Serial#: _____

Duty Dates:

From _____ To _____ From _____ To _____

Date and type of discharge: _____

- 2. Are you now or have you ever been a member of a reserve unit or the National Guard? If Yes, stte the branch of service, name, and location of your unit: Yes No

- 3. Was any type of disciplinary action taken against you in the service? Yes No

4. If yes, please provide:
 Date: _____ Place: _____
 Applicant Name: _____
 Nature of Offense: _____
 Action taken: _____

5. Have you ever served in the Armed Forces of a foreign country?
 If yes, please specify countries and dates.

6. Are you a veteran or family member who qualifies for and are claiming preference pursuant to Idaho Code § 65-503 or its successor?

Yes No

Yes No
(If Yes, fill out Veterans page of Application & attach proper documentation)

Yes No

Have you previously claimed such preference?

Have you ever been charged with a crime, arrested or detained by police (other than a minor traffic infraction)?
 Yes No

If yes, when & where: _____ Please Explain Each Occurrence:

List any traffic violations in the last five years for which you received a judgment against you.

Are you related by blood or marriage to any person now employed by Fremont County? Yes No

If yes, give name and relationship to you: _____

Documents To Be Attached To Application

1. Attach a certified copy of birth certificate.
2. Attach a certified copy of high school diploma or GED, college diploma or transcripts.
3. Attach a copy of military discharge (s).

Other Requirements

When requested by this agency, applicant will be fingerprinted and shall be required to submit to a drug test and complete physical examination, as well as be required to complete the Background Information for and may be subject to a polygraph examination.

CERTIFICATION

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should an investigation disclose untruthful or misleading answers, my application may be rejected, my name removed from consideration, or my employment may be terminated.

I understand and agree that, if hired, my employment is for no definite period and either Fremont County or I may terminate our relationship at any time, and that this employment application does not constitute an employment contract.

Signature of Applicant: _____ Date: _____

IT IS THE POLICY of FREMONT COUNTY to provide equal opportunity in all terms, conditions and privileges of employment for all qualified job applicants and employees without regard to race, color, national origin, gender or age (unless a bona fide job requirement) or the presence of any disability. Reasonable accommodations will be made for disabled persons.

VETERAN'S PREFERENCE

If you are NOT claiming Veteran's Preference, please initial here _____ and proceed to the next page.

Per Idaho Code, Title 65, Chapter 5, Fremont County will afford a preference to employment of veterans. In the event of equal qualifications and experience between candidates for an available position, a veteran who qualifies will be preferred. If claiming veteran's preference, please complete the information below and attach a copy of your DD-214 to this application.

(Reference Idaho Code, Title 65, Chapter 5, and 5 U.S.C. § 2108)

The term "active duty" means full-time duty in the Armed Forces, but NOT active duty for training.

Part 1. Preference Eligible Veterans:

- I have a service-connected disability of 10% or more.
- I am the spouse of an eligible disabled veteran, who has a service-connected disability.
- I am the widow or widower of an eligible veteran and have remained unmarried.
- I do not meet any of the selections above, but I served on active duty in the armed forces of the United States for a period of more than one-hundred eighty (180) days and was honorably discharged.

Part 2. Documentation & Signature:

By my signature, I certify that all statements on this form are true and complete to the best of my knowledge. I understand that should an investigation disclose inaccurate or misleading answers, my application may be rejected and my name removed from consideration for employment with Fremont County.

- I have attached a copy of my DD-214. Veteran's preference will not be considered without this document.

Name (Please Print)

Signature

DATE: _____

MAY WE CONTACT YOUR PRESENT EMPLOYER? Yes No

Best time to contact you at home: _____

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, an applicant for employment with Fremont County, do hereby authorize a review of and full disclosure of all records or information concerning myself to any duly authorize agent of Fremont County, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of all records and information of educational institutions; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, either criminal or civil, in which I have, or have had any interest or involvement.

I understand that any information obtained during any personal history background investigation which is developed directly or indirectly, in whole or in part, upon this authorization will be considered in determining my suitability for employment by the Fremont County. I hereby agree that any person(s) or entities who may furnish such information concerning me shall not be held liable for providing this information; and I do hereby release said person(s) and entities from any and all liability which may be incurred as a result of furnishing such information.

I further authorize that a photocopy of this signed release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

Signature

Witness

DATED: _____

Printed Name, including all names I have previously used or been known by:

Phone: _____

DOB: _____