

BARBOUR COUNTY SHERIFF'S OFFICE

24 ROBERTSON AIRPORT ROAD, CLAYTON, ALABAMA 36016

PHONE 334-775-3434 FAX 334-775-1096

APPLICATION FOR EMPLOYMENT

Please Read Carefully:

Conditions of employment are stated at the end of this form. Please read carefully before you sign this application. You are not required to answer any question(s) you feel may violate federal, state and/or local law or which you feel is not related to the position for which you are applying. However, the applicable areas of the application must be completed in full, even if attaching a resume. Please include all of your most recent employers, even if you only worked for them for a short period of time. We consider applicants for all positions without regard to age, sex, religion, race, color, national origin, creed, marital status, political affiliation or disability.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

				(PLEASE T	YPE OR PRINT)		
TODAY'S DATE	i.	AVAILABLE START DATE:			POSITION DESIRED			
		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
HOURS OF AVAILABILIY:	AM							
	PM							
Applying for:		F	Full time		Part time □	Тет	porary 🗆	
Have you eve date(s)					Sheriff's Office books		o□ If yes, give	position &
Are you at least Would you Birth Certific Social Securit Valid ACT W	be able tate ty Card ork keys	to provide a d High DD2 s Assessment	copy of the foll School Diplon 14 for military	lowing documona or State Eq (if applicable)	ents upon hire for quivalency Certific	•	o the Police Acad Priver's License	demy:
Name:								
Current Address	3			First			Middle	
Former Address	Stre	et	Apt#			City/State	Zip	
	Stre	eet	Apt#			City/State	Zip	
Phone ()_				_ Alternat	te Phone ()_			=====
Best time to con-	tact you	is ‡ _	AM P	'M Social	Security Number		-	
Em	ail Addr	ess:						r:
Desired Salary Range: \$				(Hourly or Salary)				

THE OWNERS OF THE OWNER, TO	Please Read C	•			
EMPLOYMENT HISTORY: Your appli Please provide the correct telephone numb	•				
MOST RECENT EMPLOYER		Full time □ Part time □			
COMPANY NAME:				MPLOYED: and Year)	Are you still working? YES □ NO □ If YES, may we contact?
			FROM:	TO:	YES \(\text{NO} \(\text{D} \)
ADDRESS:	JOB TITLE:				
TELEPHONE:	SUPERVISOR:		REASON FO	OR LEAVING	
DUTIES AND RESPONSIBILITIES;	•				
SECOND MOST RECENT EMPLOYER	Full time □	Part time □	Temporary [
COMPANY NAME				MPLOYED:	Are you still working? YES □ NO □
				and Year) TO:	If YES, may we contact? YES □ NO □
ADDRESS:	JOB TITLE:				
TELEPHONE:	SUPERVISOR:		REASON FO	REASON FOR LEAVING:	
DUTIES AND RESPONSIBILITIES					
THIRD MOST RECENT EMPLOYER	Full time	Part time □	Temporary [Are you still working?
COMPANY NAME:	-			MPLOYED: and Year)	YES □ NO □
			FROM:	TO:	If YES, may we contact? YES □ NO □
ADDRESS:	JOB TITLE:				
TELEPHONE:	SUPERVISOR:		REASON FO	OR LEAVING	(
DUTIES AND RESPONSIBILITIES					
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MILITARY EXPERIENCE BRANCH OF MILITARY:	SUPERVISOR:		T DATES EA	MPLOYED:	
BRANCH OF WILLIAM 1.	SUPERVISOR	SUPERVISOR:		APLOYED: and Year) TO:	JOB TITLE/RANK
ADDRESS:	TELEPHONE:		FROM:		
DUTIES AND RESPONSIBILITIES:					
REFERENCES: Include only individual	s familiar with your wor	k ability. Do	not include j	family mem	ibers.
Name Address/Telephon	ne		Years known		Relationship
Name Address/Telephon	пе		Years known	1	Relationship
Name Address/Telephot	ne		Years known	n	Relationship

How Did You Hear About Us?	□Advertisement □Employmen	nt Agency □Inquiry □Curre □ Former Employe	ont Employeeon?
From: To: Jo	vith the County before? YES □ b Title	NO ☐ If YES, what divisi Reason for Leaving	on?
If YES, list names, positions:	oyed with the Barbour County Sl		ature of the charge:
	(A con	viction record will not necessarily a	lisqualify applicant)
Are you currently on 'lay off' st	atus and subject to recall? YES	S□ NO□ Can you travel i	f the job requires it? YES \(\simeq \) NO \(\simeq \)
EDUCATION:	Name and Location	Graduate? - Degree?	Major - Course of Study
High School			
College or University			
Other training or Trade Schools			
Certificate(s) or License(s) held			
		l qualifications acquired fr	om other experience or any job
REQUIREMENTS OF THE		APPLYING: Are you capab	EEN INFORMED OF THE ble of performing in a reasonable or occupation for which you are

IMPORTANT INFORMATION TO APPLICANT

Federal law prohibits the *Barbour County Sheriff's Office* from hiring any person unless he/she presents documents which establish identity and eligibility to work in the United States. Therefore, the *Barbour County Sheriff's Office* will require that each new hire present such documents as a condition of employment.

The use, possession, or being under the influence of illegal drugs or alcohol while on County time is prohibited. Preemployment drug screens are conducted for Safety Sensitive Positions in accordance with the *Barbour County Sheriff's Office* Substance Abuse Policy.

For sworn law enforcement positions, the *Barbour County Sheriff's Office* requires pre-employment testing that may include a psychological profile, a voice stress or polygraph test, and/or a physical agility/ability test.

PRE-EMPLOYMENT STATEMENT

I certify that all information supplied in this application, and any attached resume, is true and correct. I understand that, because *Barbour County Sheriff's Office* will rely on this application in making its employment decision, any false or misleading information furnished by me regarding this application may result in the rejection of this application or termination if employed by the *Barbour County Sheriff's Office*.

In consideration of my employment, I agree to conform to the rules and regulations of the *Barbour County Sheriff's Office*, and further agree that my employment and compensation are at the will of the *Barbour County Sheriff's Office* and can be terminated at any time at the option of either the *Barbour County Sheriff's Office* or myself. I further understand that neither the policies, rules or regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract.

I certify that the above statements have been read by me and that the statements I have made on this application are true and correct.

X Signature:			Date:
		RELEASE	
served, all of my for all court systems, a any and all inform convictions. In additional bureaus, courts, and them <i>including Ba</i> result of their furn investigative constitutional character, and persperiod of time. I under the served of the	former employers, all corporations, of and all of their representatives to fur ation concerning my education, mildition, I hereby agree to hold harmle and representatives from any and all carbour County Sheriff's Office and dishing information to the Barbour Counter report and understand that suctional reputation and that further information to the representation and that further information are successful to the further information and that further information are successful to the further information and that further information are successful to the further information and the further information are successful to the further information and the further information are successful to the further information and the further information are successful to the further information and the further information and the further information are successful to the further information and the further information are successful to the further information and the further information are successful to the further information and the further information are successful to the further information are successful to the further information are successful to the further information and the further information are successful to the further information a	have attended, all branches of U.S. mecompanies, persons, law enforcement mish to the <i>Barbour County Sheriff's</i> itary service, former employment, cress and to release all of said institution claims that I may have, or which may department personnel who are conducted to the county Sheriff's Office. I further author a report may contain information a formation may be available upon writing future update reports that may be re-	agencies, all credit bureaus, of Office or its representatives edit history, and/or criminal ons, services, employers, or arise against any and/or all of eting this investigation as a norize the procurement of an about my background, ten request within a reasonable
X Signature:			Date:
	For background verifica	tion purposes please provide:	
	Drivers' License Number:State of Issue:	Expiration://	_

THIS APPLICATION IS CURRENT FOR AS LONG AS THE POSITION IN WHICH YOU ARE APPLYING IS OPEN. ONCE THIS POSITION HAS BEEN FILLED, IF YOU WISH FURTHER CONSIDERATION FOR AN OPEN POSITION, IT WILL BE NECESSARY TO SUBMIT A NEW APPLICATION.