

Rabun County Sheriff's Office Application for Employment

CONFIDENTIAL

Equal Opportunity Employer

The Rabun County Sheriff's Office does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or provision of services.

All pages must be completed in black or blue ink.

Applicant Name

Last

First

Middle

Date_____

Position applied for: ____Deputy ____Detention Officer ____Administration

Dear Applicant,

I am pleased that you have decided to apply for employment with the Rabun County Sheriff's Office. Should you be selected for employment, you will find that the employees of the agency are highly motivated, career orientated, competent men and women with high ethical standards, who provide the entire range of law enforcement services to the community.

Therefore, we have established very high standards for our employees. It is the policy of this agency to hire only the best-qualified individuals for full and part-time positions. Our employee selections process is thorough and regimented. It affords equal opportunity to everyone regardless of race, creed, color, gender, national origin, age, or disability. All eligible applicants will be afforded the same opportunity for employment selection.

To be considered for employment, applicants must meet the following minimum qualifications: Applicants must be a least 21 years of age for Deputy Sheriff, 18 years of age for Detention Officer or 18 years of age for civilian positions, possess a high school diploma or GED, possess a valid driver's license, honorable discharge (if prior military), and have no adverse driving record nor felony convictions.

The hiring process includes but is not limited to the following: Passing an intensive background investigation, voice stress analysis and/or polygraph examination, oral interview and following a conditional job offer, medical examination and drug screen. The entire selection process takes approximately 90 to 180 days from the date background questionnaire is returned to my office.

It is essential that you follow all directions provided. The application process requires you to provide much detailed information about yourself. Because we are a public safety organization, we must have accurate and extensive information upon which to base our employment decisions so that we can properly serve the citizens of Rabun County. Should you have any questions, please contact my office.

Sincerely,

hal X. Null

Sheriff Chad Nichols

STATEMENT OF HIRING PRACTICES

- 1. It is the policy of the Rabun County Sheriff's Office to hire the best-qualified individuals by using a selection process that measures each applicant's traits and characteristics in a manner that is related to the job applied for.
- 2. The agency will practice a regimented and thorough selection process while simultaneously affording equal opportunity to everyone regardless of race, creed, color, gender, national origin, or age.
- 3. The agency relies upon the accuracy of information contained in the employment application and other data obtained throughout the selection process. Any misrepresentations, falsification, or material omissions of this information may result in the exclusion of the applicant from further consideration for employment or, if the individual has been hired, termination of his/her employment.

The minimum employment qualifications for all applicants are:

- ✓ Be at least 21 years of age (Deputy applicants) or 18 years of age (nonsworn applicants) when the employment application is submitted;
- Be a citizen of the United States (or legally qualified to work in the United States as of the date employment commences);
- ✓ Be a high school graduate or its equivalent;
- ✓ Possess an Honorable Discharge (if prior military service);
- ✓ Possess a valid driver's license;
- ✓ Be able to perform the essential job functions for the position applied for;
- ✓ Successfully pass an oral hiring board interview;
- ✓ Successfully pass an extensive background investigation, which includes a check of school records, prior employment history, and driver's history; inquiries into character and reputation through interviews of references and previous work/school association; and a fingerprint-based criminal records check.
- ✓ Complete a voice stress analysis and/or polygraph examination;
- ✓ Successfully pass drug screening test; and
- ✓ Successfully pass a medical examination and psychological evaluation.

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O.C.G.A. 35-8-8 requires a pre-employment background for Deputy Sheriff and Jailers (including Jailers who are certified Jailers). The Rabun County Sheriff's Office will conduct a thorough background on each applicant that applies for a position as a Peace Officer, Jailer, or any administrative staff. The background investigation includes, but is not limited to:

- ✓ Check of applicant's work history
- ✓ Driver's history
- ✓ Criminal history
- ✓ Administering of a written and/or clinical psychological evaluation
- ✓ Administering of a voice stress analysis and/or polygraph examination
- ✓ Pre-employment drug screening
- ✓ References (personal and work)

Employment in law enforcement requires integrity and public trust. Only those applicants whose conduct, character, and behavior, that does not discredit either themselves or the Rabun County Sheriff's Office, will be employed. The process of employment with the Rabun County Sheriff's Office will address the integrity, ethical, conduct, honesty, prejudices, and past behavior of all applicants.

In an effort to maintain an equitable standard for the positions of Deputy Sheriff or Jailer, the Command Staff of the Rabun County Sheriff's Office has set certain standards and guidelines. The following standards are among those that will automatically disqualify an applicant for consideration:

- Intentionally falsifying, misrepresenting, or omitting pertinent information while completing the employment application, preliminary interview questionnaires, or any other pre-employment document(s).
- If you deliberately make any inaccurate, misleading, false, or fraudulent statements during the employment process.
- Any felony convictions
- Any outstanding criminal charge pending adjudication and completion of any sentence or probation.
- > Sufficient misdemeanor convictions to establish a pattern for disregard of the law.
- No conviction for misdemeanor of an aggravated nature, public order, decency or moral turpitude.

GENERAL QUESTIONS

Applicant's consent for criminal background/driver's history check

Name:								
(Last)		((First) (Mi		(Middle Ini	ddle Initial)		
List any alias na	imes used (i.	e. maiden r	ames, nicknam	nes, etc.)				
Present Address	5:							
County of Resid	lence:		Age:	Birth date:	/	/		
Social Security N	No:		Place of Birth: _	City	County		State	
			Hair					
		Single	Married	Div	orced			
Home Telephon	ue: ()		Business T	elephone: ()			
Cell Phone: ()	<u> </u>	Email:					
Are you willing Do you object to Date you are av	o wearing a ı	uniform?	2		,	YES YES	NO NO	

As an applicant for employment, I hereby authorize Rabun County Sheriff's Office to receive any criminal history, driver's history or previous employment information pertaining to me for the purpose of my background investigation which may be in the file of any federal, state or local criminal justice agency.

(Note): In order to be employed with the Rabun County Sheriff's Office Applicant must check consent below to a background check.

Employment with Rabun County Government Law Enforcement Sworn Officer (Z)
 Employment with Rabun County Government Law Enforcement Non-Sworn Officer (J)
 Employment with Rabun County Government Non-Law Enforcement (E)

How did you learn of this available position?	Walk-in RCSO Website Social Media
Are you available to work any time of the day?	YES NO
Are you available to work any day of the week?	YES NO
Are you willing to work nights or weekends?	YES NO
Do you object to wearing a uniform?	YES NO

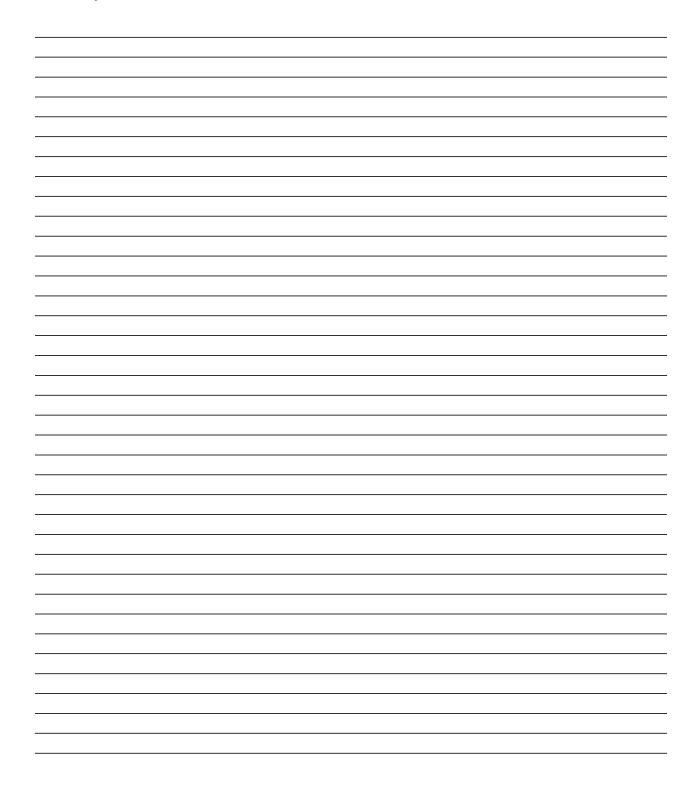
DRIVER'S HISTORY

Do you have a valid Driver's license	? YES	NO	State:		
Driver's license number:			Date of expiration:		
Have you ever been licensed to drive in another state? YES NO State:					
Operator's license number:					
Have you ever incurred any traffic of	harges withi	n the las	st three (3) years? YES NO		
If yes, please do not include parking	tickets.				
Date:	Type of Cha	arge:			
Date:	Type of Cha	arge:			
Date:	Type of Cha	arge:			
I hereby authorize the Department agency to which this authorization Sheriff's Office an abstract of my d application.	may be pres	ented, t	to release to the Rabun County		
Signature of applicant:			Date:		
Notary Signature:			Date:		

My Commission Expires: _____

Have you ever been employed by or applied with the Rabun County Sheriff's Office?	If yes, when?	Department/Office		
YES NO				
How did you learn of this opening?				
	Are you a Citiz	zen of the United States?		
	<u>۲</u>	(ES NO		
Are you related to anyone Relative's Name	Relationship	Department/Office		
currently employed by the				
Rabun County Sheriff's				
Office? YES NO				
In accordance with the Immigration Ref				
employed in the United States will b	e required of all pr	ospective employees.		
Failure to establish such proof will	prohibit or discon	tinue employment.		
Have you ever been convicted of, or plead guilty or r	olo to a felony or misder	meanor, other than a minor		
traffic violation? YES NO	2			
If yes, please attach a written statement that answers what	, when, the specific circums	stances surrounding the event as		
well as the outcome.				
Active Military Service (list date, serial or service	number for all active se	rvice) N/A		
FromToSerial or S	ervice Number			
	_			
Branch of Service:Discharg	e Type:			
A 1 1	1 (1 1 (1)			
Are you now or have you ever been an inactive mem		U.S. Reserve Forces or National		
Guard? YES NO If yes, what type of branch?				
Please indicate below any answers that are true state	ment(s).			
Have you ever used marijuana? YES NO		1		
Have you ever:possessed,sold,	manufactured,	_usea,		
ordelivered illegal drugs	cold manufacture	rad usad		
Have you ever:illegally possessed,sold,manufactured,used, ardelivered logal pressription modication				
 or delivered legal prescription medication Date(s) used, possessed, sold, delivered 				
- Duic(5)uscu,possesseu,				
Type of Drug(s):				

Explain in full detail why you want to become a Deputy sheriff/Jailor or civilian employee of the Rabun County Sheriff's Office. Attach an additional page if necessary; do not exceed 500 words.



EDUCATION INFORMATION

Are you a high school gradu	iate?	Yes		No)					
If no, circle highest grade co	mpleted:	5	6	7	8	9	10	11	12	
Do you have a GED:	Yes		No)		Dat	te cor	nplet	ed:	

		ADDRESS/PHONE	DATES		DEGREE
SCHOOL	NAME	NUMBER	ATTENDED	COMPLETED	EARNED
HIGH					
SCHOOL				9 10 11 1 2	
BUSINESS /					
TECHNICAL					
SCHOOL				1234	
COLLEGE				1 7 7 /	
				1234	
GRADUATE					
SCHOOL				1234	

SKILLS AND TRAINING

Please list any skills/training you have that would be beneficial to this agency.

PERSONAL REFERENCES

Please list five (4) personal references. These are people you have known for at least four (4) years, which are **NOT** former employers, relatives, or people with whom you are living.

NAME	ADRESS	PHONE	RELATIONSHIP
		Work:	
		Cell:	
		Work:	
		Cell:	
		Work:	
		Cell:	
		Work:	
		Cell:	

EMPLOYMENT HISTORY

Describe your work history beginning with your current or most recent job. Include military, volunteer experience and periods of unemployment. Complete address with zip code and phone numbers for all employers are necessary. A resume may be attached only as additional information and will not be accepted in lieu of completing this section.

Please cover employment history for past five years, including military if applicable. Use attachment if necessary.

	From Mo/Yr	To Mo/Yr	Wage Rate Start/Finish	Job Title and Duties	Reason for leaving and supervisor's name
Name: Address:					
Phone:()					
Name: Address:					
Phone:()					
Name: Address:					
Phone:()					
Name: Address:					
Phone:()					
Name: Address:					
Phone:()					

WORK REFERENCES

Please list (4) work related references. These are people you have worked with for the last (4) years, which are NOT relatives or people with whom you are living.

NAME	ADDRESS	PHONE	TITLE
		Work: Cell:	
		Work:	
		Cell:	
		Work: Cell:	
		Work:	
		Cell:	

APPLICANT'S STATEMENT/CONSENT WIAVER

I certify that I have read and understand all questions and instructions in this application, and that my answers are true and complete. I understand that this application is **not an offer of or a contract for employment.**

I understand that any untrue statement in this application may result in my dismissal at any time during my employment with the Rabun county Sheriff's Office. I understand that any intentional false statement will result in my disqualification of my application and/or prosecution for the offense of False Swearing (Ga. Code Section 16-10-71) punishable by a maximum fine of \$1000 plus imprisonment for not less than one, or more than five years or both. I further understand that any erroneous answer given by me during any part of the application process, whether intentional or not, will constitute a basis for my elimination from consideration for the employment I now seek. I understand that if I do not wish to answer a question in the process, I may choose not to do so and application will be terminated.

I hereby authorize the Rabun County Sheriff's Office to receive any Criminal/Driver's History Record information, pertaining to me which may be in the files of any State or Local Jurisdiction. I also respectfully request and authorize all information that there may be concerning my employment record, my educational record, and my reputation be released to the Rabun County Sheriff's Office. I request that all records pertaining to my military service, to include undeleted DD214 forms be released to the Rabun County Sheriff's Office. You may include all information of a confidential or privileged nature and any photocopies or facsimile of the same, if required.

This information will be used to assist the Rabun County Sheriff's Office in determining my qualification and fitness for the position I am seeking with this agency. I hereby release you, your organization and/or others from liability, which may result from furnishing the information I have requested above. A PHOTOCOPY of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I understand resumes; letters of reference, etc., submitted with the application become property of the Rabun County Sheriff's Office and cannot be returned. The information I have provided on the application is subject to public disclosure under the Georgia Open Records Act.

By signing this application, I hereby acknowledge that I have read, understand, and agree to all provisions outlined herein.

Applicant's Signature	Date
Applicant printed name:	
Applicant Social Security Number:	
Applicant Date of Birth:	
STATE OF GEORGIA COUNTY OF	
Before me appeared,	
My commMy comm	ission expires:

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND ALL QUESTIONS AND INSTRUCTIONS IN THIS QUESTIONNAIRE, AND THAT MY ANSWERS ARE TRUE AND COMPLETE.

I UNDERSTAND THAT ANY INTENTIONAL UNTRUTHFUL MISSTATEMENT OF MATERIAL FACT WILL RESULT IN:

- DISQUALIFICATION OF MY APPLICATION OR DISMISSAL FROM EMPLOYMENT WITH THE RABUN COUNTY SHERIFF'S OFFICE
- PROSECUTION FOR THE OFFENSE OF FALSE SWEARING (OCGA 16-10-71), A FELONY PUNISHABLE BY A MAXIMUM FINE OF \$1,000.00 PLUS IMPRISONMENT FOR NOT LESS THAN ONE, NOR MORE THAN THREE YEARS, OR BOTH.

APPLICANT SIGNATURE

DATE

STATE OF GEORGIA COUNTY OF _____

BEFORE ME PERSONALLY APPEARED______, WHO SAYS THAT HE / SHE EXECUTES THE ABOVE STATEMENT OF HIS / HER OWN FREE WILL AND ACCORD, WITH FULL KNOWLEDGE OF THE PURPOSE THEREOF.

SWORN AND SUBSCRIBED TO ME

THIS _____ DAY OF _____ IN THE YEAR _____.

NOTARY PUBLIC

MY COMMISSION EXPIRES:

RABUN COUNTY SHERIFF'S OFFICE EMPLOYMENT APPLICATION AGREEMENT

Applicant Name:

(Last, First, MI.)

- 1. I understand that if I decide I do not wish to answer a question in this application booklet or provide documents as indicated, I may choose not to do so and my application process will be terminated.
- 2. <u>COPIES</u> of the following documents are required to be attached to application; failure to attach these documents at the time your application is submitted will result in an incomplete application and the application will be terminated:
 - Social Security Card
 - High School Diploma or GED
 - Copy of Valid Driver's License
 - Application Agreement
 - Completed Application
 - Applicant Photo
 - Copy of Social Security Card
 - Copy of Passport (if applicable)
 - Certified Copy of Birth Certificate
 - Military DD214 Copy #2 and/or #4 (if you are a military veteran) OR Service Copy
 - Basic Law Enforcement Training Certificate (if applicable)
- 3. This application will be considered only for vacancies existing on or within ninety (180) days after the filing of this application. After this time, a new application must be filed in writing for further consideration.

Applicant's Signature

Date

FOR OFFICE USE ONLY

This application packet was received in this office on _____, 20___