



**OFFICE OF THE SHERIFF
McDuffie County, Georgia**

**Logan Marshall
Sheriff**

APPLICATION FOR EMPLOYMENT

Position: Deputy Jailer Communications Officer Civilian

Date: _____

Name:			Social Security Number:			
(Last)	(First)	(Middle)				
List all other names you have used (maiden name, nicknames, etc.):						
List all other social security numbers you have used:						
Address:						
City:		County:		State:		Zip:
On a separate sheet, list all places you have lived, worked, or stayed for a period exceeding sixty (60) days.						
Date of Birth		Place of Birth (City & State):				
Home Telephone:		Cell Telephone:		Email:		
Are you willing to work shift work, nights, holidays, weekends, etc.?				<input type="checkbox"/> Yes		<input type="checkbox"/> No
Do you object to wearing a uniform?				<input type="checkbox"/> Yes		<input type="checkbox"/> No
EDUCATION						
Are you a high school graduate?				<input type="checkbox"/> Yes		<input type="checkbox"/> No
<i>If no</i> , circle the highest grade completed:				5	6	7
				8	9	10
						11
						12
If not a high school graduate, do you have a G.E.D.?				<input type="checkbox"/> Yes		<input type="checkbox"/> No
School		Name and Address of School			Completed	
High School					9 10 11 12	
Business or Technical School					1 2 3 4	
College					1 2 3 4	



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GENERAL INFORMATION

Have you ever been employed by or applied with the McDuffie County Sheriff's Office?

Yes No

If yes, when?

Position:

Are you related to anyone currently employed by the McDuffie County Sheriff's Office?

Yes No

Relative's Name

Relationship

Relative's Name

Relationship

How did you learn of this opening?

Are you a citizen of the United States?

Yes No

If no, explain on a separate sheet of paper and attach to application.

In accordance with the Immigration Reform Act of 1986, proof of authorization to be employed in the United States will be required of all prospective employees. Failure to establish such proof will prohibit or discontinue employment.

Have you ever been charged, convicted, pled guilty or nolo contendere to a felony or misdemeanor other than a minor traffic violation? Yes No

If yes, provide a statement that answers what, where, when, the specific circumstances surrounding the event, as well as the outcome. If possible, attach a copy of the court disposition.

Military Service: List date, serial or service number for all military service. Use additional sheets if necessary.

From:

To:

Serial Number:

Branch of Service:

Discharge Type:

Are you an active member of any branch of the U.S. Reserve Forces or National Guard?

Yes No If yes, what type and branch?

Are you a graduate of a police mandate, D.O.C. school, or academy? Yes No

If yes, location:



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DRIVER HISTORY

Do you have a valid driver's license? Yes No

State Issued	License Number	Date of Expiration
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Have you ever been licensed to drive in another State? Yes No *If yes, list below.*

State Issued	License Number
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State Issued	License Number
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Have you ever incurred any traffic charges? Do not include parking tickets.

Yes No *If yes, give date(s), type of charge, and disposition.*

REFERENCES

List three (3) 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 presently living.

DO NOT LEAVE BLANK SPACES!

Name:	Complete Address (City, State, & Zip Code)
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Occupation:	Telephone Number:
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Email:

Name:	Complete Address (City, State, & Zip Code)
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Occupation:	Telephone Number:
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Email:

Name:	Complete Address (City, State, & Zip Code)
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Occupation:	Telephone Number:
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Email:



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WORK HISTORY

Describe your complete work history beginning with your current or most recent job. Include military and unpaid experience. Failure to give complete information regarding each job held may result in your disqualification. Complete addresses with telephone numbers of all employers are necessary. Attach additional pages if necessary.

Most Recent Employer:

Address (City, State & Zip Code)

Telephone Number:

From:

To:

Salary:

Job Title:

Supervisor:

Duties:

Reason for Leaving:

May we contact employer? Yes No

Employer:

Address (City, State & Zip Code)

Telephone Number:

From:

To:

Salary:

Job Title:

Supervisor:

Duties:

Reason for Leaving:

May we contact employer? Yes No



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WORK HISTORY (Continued)

Employer:

Address (City, State & Zip Code)

Telephone Number:

From:

To:

Salary:

Job Title:

Supervisor:

Duties:

Reason for Leaving:

May we contact employer? Yes No

SKILLS AND TRAINING

List any special skills/training you have that would be beneficial to this Agency:

Are you able to perform all the duties listed in the job description? Yes No

If you answered no to the above, explain what can be done to provide you with reasonable accommodations. Attach additional sheets if necessary.



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Explain why you want to become an employee of the McDuffie County Sheriff's Office. Attach an additional sheet if necessary. Do NOT exceed 500 words. You may include a résumé, but you ***must complete this section in your own handwriting.***

Handwriting area consisting of 25 horizontal lines for writing.



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APPLICANT ACKNOWLEDGEMENT & CONSENT WAIVER

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 any time during my employment with the McDuffie County Sheriff's Office. I understand that any intentional false statement will result in the disqualification of my application and/or prosecution for the offense of False Swearing (Georgia Code Section 16-10-71), punishable by a maximum fine of \$1,000 plus imprisonment for not less than one nor more than five years or both. I further understand 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 my application process will be terminated.

I hereby authorize the McDuffie County Sheriff's Office to receive any criminal and/or driver history record information, incident or other reports pertaining to me that may be in the files of any State or local jurisdiction.

I also respectfully request and authorize all information that may be concerning my employment record, my educational record, my reputation, and my financial status be released to the McDuffie County Sheriff's Office.

I request that all records pertaining to my military service, to include undeleted DD214 forms, be released to the McDuffie 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 McDuffie 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. that are submitted with the application become property of the McDuffie County Sheriff office and will not be returned. Some of the information I have provided on the application may be subject to public disclosure under the Georgia Open Records Act or other Freedom of Information 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's Complete Name **PRINTED**

Social Security Number:

Date of Birth:

Subscribed and sworn to (or affirmed) before me on this

_____ day of _____, 20_____

**personally known to me or proved to me on the bases of
satisfactory evidence to be the person who appeared before me.**

Notary Public Signature

Notary Seal

THIS PAGE MUST BE NOTARIZED



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DOMESTIC VIOLENCE CONVICTION ATTESTATION

I,

(Print Name)

do hereby swear and/or affirm that I have never been convicted of any crime, misdemeanor or felony, involving an act of family violence or domestic violence in the State of Georgia or any other State of the United States. I understand it is Federal law that anyone convicted of a crime involving domestic/family violence must surrender all of his/her firearms and may not be in possession of any firearm. I further understand that if I knowingly and willfully lie on this form I may be charged with criminal and administrative charges.

Print Full Name:

Signature:

Date:



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ATTACH THE FOLLOWING TO THIS APPLICATION

1. Copy of your Driver's License
2. Copy of your Social Security Card
3. Copy of your Birth Certificate
4. Copy of your High School Diploma or Certificate of Graduation
5. Copy of you G.E.D. (if applicable)
6. Copy of your Military Selective Service Act Registration (if applicable)
7. Copy of your DD214 Form (if applicable)
8. List any Facebook, Twitter, or other social media site you currently maintain or have maintained within the last five (5) years.

ADDITIONAL INFORMATION

Prior to being employed with the McDuffie County Sheriff's Office, you will be required to pass an extensive background investigation. Part of this investigation may include a polygraph examination, a criminal background check, driver's history check, employment history check, a check with references, credit check, verification of diplomas and/or certificates, a medical examination, and interviews of known associates and neighbors. Following an interview, you may be asked to take a polygraph examination. Polygraph questions may come from any of the following areas:

1. Criminal History
2. Drug Use
3. Driver's History
4. Work History
5. Alcohol Use
6. Gambling
7. Honesty in filling out the application for employment.
8. Honesty in completing the background investigation booklet.

If you are a male applicant, you must provide proof that you have met the registration requirements of the Military Selective Service Act.



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EMPLOYMENT DISQUALIFIERS

Employment in public safety involves public trust. Only those persons whose conduct, character, and/or behavior do not discredit themselves or the McDuffie County Sheriff's Office (MCSO) will be considered employable. The MCSO employment process will address the integrity, ethical conduct, honesty, prejudices, financial responsibility (credit), and past behavior of all applicants. While the MCSO reviews much information and considers the circumstances in many areas regarding an applicant's background, the following standards are among those that will automatically disqualify applicants from consideration.

1. Intentionally falsifying, misrepresenting, or omitting pertinent information while completing the employment application, preliminary interview questionnaires, or any other pre-employment document(s).
2. Deliberately making inaccurate, misleading, false, or fraudulent statements during the employment process.
3. Poor management of personal finances (within the last five years). Debts, pending civil suits, garnishments, dispossessory warrants, bankruptcies, etc. will be investigated to determine a candidate's suitability for employment.
4. Personal state or federal tax liability or delinquent student or government loans unless the applicant is on an approved payment plan.
5. Any felony conviction.
6. Any outstanding criminal charge pending adjudication.
7. Sufficient misdemeanor convictions to establish a pattern of disregard for the law.
8. Discovery of an applicant's involvement in any crime of a serious or aggravated nature.
9. Any conviction or plea of nolo contendere within the last five (5) years for Driving Under the Influence of Drugs or Alcohol (DUI), or for any serious traffic offense, including but not limited to: Fleeing or Attempting to Elude a Police Officer, Vehicular Homicide, Failure to Stop, Render Aid, or Leave Information, and/or Racing.
10. Five (5) or more convictions or pleas of nolo contendere within the past two (2) years for any moving violations.
11. Illegal sale, illegal distribution, or illegal manufacturing of any legal or illegal drug.
12. Deliberate association of a personal nature within the past twelve (12) months with persons who use illegal drugs in the presence of the applicant.
13. Use or possession of marijuana during the last three (3) years.
14. Use (more than experimentation) of an illegal drug or combination of illegal drugs, other than marijuana, during the past ten (10) years. What is considered "experimentation" will be determined on a case by case basis considering the totality of the circumstances.
15. Any tattoo that is visible to the public while on duty and/or in uniform will be evaluated on a case by case basis before an applicant may be considered for employment. For most people this generally means tattoos located on the arm or other body part must not be visible in a short sleeve shirt.
16. Plugs/Gages and their piercings which are visible to the public while on duty.