

Johnson County Sheriff's Office Employment Application

An Equal Opportunity Employer



The Johnson County Sheriff's Office provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state, or local laws. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough space on the application. **Please print**, except for the signature at the end of the application.

Position Applied For _____ Date _____

Full-time Yes No Part-time Yes No Date when available _____

Name _____

Last Name First Name Middle Name Phone Number

Mailing Address _____

Street or P O Box City State Zip

Email Address _____ Other Names Used _____

Are you 18 years or older? Yes No
(For Patrol Deputy the minimum age is 21)

Are you legally qualified to work in the U.S.? Yes No

If you wish to claim veterans' preference (Wyoming State Statute 19-14-102), please attach the appropriate documentation (DD-214 Form) to your application.

Have you previously been employed by Johnson County? Yes No

Are you available weekends? Yes No Are you available to work night shifts? Yes No

Have you ever been convicted of a misdemeanor or felony: Yes No

If yes, please explain _____

Education

High School or Equivalent _____ City _____ State _____

Did you graduate? Yes No If no, highest grade completed. _____

College or University _____ City _____ State _____

Degree Received or Credit Hours Earned _____

Vocational or Technical School _____ City _____, State _____

Did you graduate? Yes No Description of Course _____

Do you have a valid driver's license? Yes No Driver License No: _____

Class _____, State _____ Has your license ever been revoked/suspended Yes No

If Yes, Please Explain: _____

Employment History

List names of employers in consecutive order with present or most recent employer listed first. Please account for all periods of time including military service, self-employment, or any periods of unemployment.

Name of Employer	Job Title or Duties
Address:	Telephone Number: _____ Date From: _____ To: _____
Supervisor:	Pay Rate: _____
Reason for Leaving:	
Name of Employer	Job Title or Duties
Address:	Telephone Number: _____ Date From: _____ To: _____
Supervisor:	Pay Rate: _____
Reason for Leaving:	
Name of Employer	Job Title or Duties
Address:	Telephone Number: _____ Date From: _____ To: _____
Supervisor:	Pay Rate: _____
Reason for Leaving:	
Name of Employer	Job Title or Duties
Address:	Telephone Number: _____ Date From: _____ To: _____
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Reason for Leaving:	
Name of Employer	Job Title or Duties
Address:	Telephone Number: _____ Date From: _____ To: _____
Supervisor:	Pay Rate: _____
Reason for Leaving:	

What skills or additional training do you have that relates to the position for which you are applying?

Do you have any certifications? Yes No If so, please list _____

Are you a Certified Peace Officer Yes No Detention Officer Yes No

If yes, are you currently certified in the State of Wyoming Yes No

Personal and Professional References

List three people who know you well enough to provide current and past information about you. Do not list relatives or former employers:

Name:	Home Phone:
Address:	Work Phone:
	Years Known:

Name:	Home Phone:
Address:	Work Phone:
	Years Known:

Name:	Home Phone:
Address:	Work Phone:
	Years Known:

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand a conditional job offer is contingent upon the following: completion of a satisfactory background check, passing a pre-employment drug test, satisfactory reference checks, pre-employment physical exam.

I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time.

Signature _____

Date _____

Johnson County Sheriff's Office

Pre –Employment PREA Questionnaire

As outlined by the Prison Rape Elimination Act (PREA), the Johnson County Sheriff's Office shall ask all applicants and employees, who may have contact with inmates, about previous conduct described below in written applications or interviews for hiring or promotions and in any interviews or written self- evaluations conducted as part of reviews of current employees.

DOJ § 115.17

(a) The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who—

- (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997);
- (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Have you ever engaged in or been found responsible for engaging in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? (If yes, explain.)

Have you ever been convicted of engaging or attempting to engage in sexual activity (in the community) facilitated by force, overt or implied threats of force, or coercion, or where the victim did not consent, was unable to consent or refused? (If yes, explain.)

Have you ever been civilly or administratively adjudicated for engaging or attempting to engage in sexual activity (in the community) facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent, was unable to consent or refused? (If yes, explain.)

Applicant Signature: _____

Date: _____