

Applicant Name: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

# Barrow County Sheriff's Office



## Application For Employment

Barrow County is an Equal Opportunity Employer  
Drug Free Work Place



Barrow County Sheriff's Office 233 E Broad St. Winder, GA 30680 770-307-3080

# Barrow County Sheriff's Office Application For Employment

## Notice to ALL Applicants

It is the policy of the Barrow County Sheriff's Office that all applicants meet the minimum qualifications of the position applied for. It is your responsibility to review the minimum qualifications contained within the appropriate applicable job description prior to continuing with the completion of the Application for Employment packet.

The Barrow County Sheriff's Office has established high standards for its employees. It is the policy of this agency to hire only the best qualified individuals for full and part time positions. Our employee selection process is thorough and regimented. It affords the opportunity to everyone regardless of race, creed, color, gender, religion, national origin, age, sexual orientation, disability, or any other legally protected classification. All eligible applicants will be afforded the same opportunity for employment selection. Accordingly, should you have a disability or disabling condition, you may request any reasonable accommodation in order to further participate in the application process by contacting the Barrow County Sheriff's Office Employee Services Office at 770-307-3080 ext. 3133.

The complete Application for Employment packet contains the following documents:

1. Instruction Sheet (1 page)
2. Factors for Disqualification (1 page)
3. Waiver and Authorization for Release of Information. (1 page)
4. Personal History Questionnaire (5 pages)
5. Background Investigation Questionnaire (12 pages)

All questions contained in the Application for Employment packet MUST be answered fully and completely. If a question does not apply to you, indicate so by placing "N/A" in the field. If your answer to the question is "No," indicate so by writing "No" in the field. Failure to complete this application accurately and fully may subject your application to disqualification.

# Instruction Sheet

## Read Carefully

1. Please Check the position(s) for which you are applying:
  - a. Deputy Sheriff
  - b. Detention Officer
  - c. Secretarial/Clerical
  - d. Records
  - e. Other \_\_\_\_\_
2. Please Make sure that ALL questions in this application are answered completely. If a question does not apply to you, indicate so by placing "N/A" in the field. If your answer to a question is "No" indicate so by writing "No" in the field. An incomplete application will not be considered.
3. This application is in two (2) parts. The first part is a General Application for Employment which contains the Instruction Sheet, Factors for Disqualification, and the Waiver for Release of Information. The second part is a Personal History Questionnaire. The entire completed Application for Employment packet should be returned to the Employee Services Officer.
4. Provide the following certified copied documents: NO ORIGINALS, PLEASE
  1. High School Diploma or GED certificate
  2. Birth Certificate
  3. DD-214 (if veteran)
  4. Georgia Driver's License
5. To be eligible for consideration for employment, you must submit to the following:
  1. Oral Interview
  2. Fingerprint and Background Investigation
  3. Credit Investigation
  4. Drug Screening
  5. Physical Examination
  6. Polygraph Examination
  7. Psychological Examination
6. When you have completed this Application for Employment packet, please return all contents including attachments to the Employee Services Officer whose office is located at the Barrow County Sheriff's Office, 233 E Broad Street, Winder, GA 30680. If you have any questions please call 770-307-3080 ext. 3133.
7. Please PRINT or TYPE all information you provide in the packet.

# Factors for Disqualification

Read AND sign where indicated

An applicant may be disqualified and cannot be considered for employment if ANY of the following situations exist:

1. Conviction in any court for a felony offense.
2. Conviction in any court for a drug related offense.
3. Any pending criminal actions in any court.
4. Presently under investigation for any criminal offense by this or any other law enforcement agency.
5. Dishonorable discharge from any branch of the military.
6. Unable, for any reason, to obtain a Georgia Driver's License.
7. Absence of high school diploma or GED certificate.
8. Tattoos on the head, face (including the inside of the mouth), neck, or hands.
9. Any known association with any group, organization, or otherwise whose primary objective is to foster hatred, oppression, or persecution of any individual, group of individuals, or any private or public company or organization.
10. Not having attained the age of 18 years for Detention Officer or 21 years of age for Deputy Sheriff at the time of application.
11. In accordance with the Immigration Reform and Control 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.

I, \_\_\_\_\_, certify that I have read the entire contents of this page and fully understand the same. I also certify, that to the best of my knowledge, none of the situations stated above apply to me.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
SSN

\_\_\_\_\_  
Witness Name

\_\_\_\_\_  
Date

# Waiver and Authorization for Release of Information

Read carefully AND sign where indicated

I hereby authorize a review of and full disclosure of all records concerning me, \_\_\_\_\_, to any duly authorized agent of the Barrow County Sheriff's Office whether said records are of a public, private or confidential nature.

The intent of this authorization is to give my full consent for full and complete disclosure of all records including, but not limited to, records of educational institutions, GCIC and/or NCIC criminal history records, financial or credit institutions including reports or ratings and other financial statements and records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and the record and reconciliations of attorneys or other counsel whether representing me or another party in any case either criminal or civil in which I presently have or have had an interest.

I understand any information obtained in a personal history background investigation arising in whole or in part, directly or indirectly, from this waiver and authorization will be considered in determining my suitability for employment with the Barrow County Sheriff's Office.

I certify any person furnishing information concerning me shall not be held accountable for such information, and I hereby release said person from any and all liability, be it civil or criminal in nature, which may be incurred as a result of furnishing such information. I understand that the 1974 Privacy Act affords me the right to expect certain types of information not to be disseminated by persons who have access to such information. For the purpose of a personal history background investigation to determine my suitability for employment with the Barrow County Sheriff's Office, I hereby WAIVE said rights.

\_\_\_\_\_  
Sworn to me and subscribed before me  
this \_\_\_\_\_ day of

\_\_\_\_\_20\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Legal Signature of Applicant

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Date of Birth SSN

\_\_\_\_\_  
Telephone Number

## Section I Identification Information

Name: Last, First, Middle/Maiden:			Date of Birth	
Social Security Number:	Race:	Sex:	Weight:	Height:
Place of Birth ( County, City, State):		Are you a U.S. citizen? YES NO		

## Section II Current Address Information

Current Home Address:		Years at this address:
Mailing Address (if different than above):		
Primary Phone Number:	Secondary Phone Number:	
Alternate Phone Number:		

## Section III Driver's License Information

Do you have a current GA driver's license? YES NO	License Number if YES:	
Do you have a current license from another state? YES NO	License Number if YES:	State:

## Section IV World Wide Web Information

Do you have a WEB page? YES NO	If YES, what is it?
How many email addresses do you have?	List your primary email address here:
List any other email addresses	List the name of any Internet social networking sites you are currently or have ever been a member. Include the screen name used for each site.
1.	
2.	
3.	
4.	
5.	

## Section V Employment History

1

Employer Name:		Employment Dates
Address:		City and State:
Phone Number:	Position:	Duties Performed:
Salary:	Supervisor's Name:	
Reason for leaving:		

2

Employer Name:		Employment Dates
Address:		City and State:
Phone Number:	Position:	Duties Performed:
Salary:	Supervisor's Name:	
Reason for leaving:		

3

Employer Name:		Employment Dates
Address:		City and State:
Phone Number:	Position:	Duties Performed:
Salary:	Supervisor's Name:	
Reason for leaving:		

Section continue on next page

## Section V Continued

4

Employer Name:		Employment Dates
Address:		City and State:
Phone Number:	Position:	Duties Performed:
Salary:	Supervisor's Name:	
Reason for leaving:		

5

Employer Name:		Employment Dates
Address:		City and State:
Phone Number:	Position:	Duties Performed:
Salary:	Supervisor's Name:	
Reason for leaving:		

6

Employer Name:		Employment Dates
Address:		City and State:
Phone Number:	Position:	Duties Performed:
Salary:	Supervisor's Name:	
Reason for leaving:		

End of Section V



## Section VI Education Information

Indicate ALL schools you have attended and/or courses you have completed.  
Begin with grammar schools:

School Name	City and State	Major	Graduation Date

If you are currently enrolled in school, please describe your class schedule:

## Section VII Supplemental Questionnaire

1. Are you currently employed by the Barrow County government?	YES	NO
2. If YES, in which department do you work in at this time?		
3. Have you previously been employed by the Barrow County government?	YES	NO
4. If YES, in which department and when?		
5. Do you currently have any relatives employed by the by the Barrow County government?	YES	NO
6. If YES, provide the following information:		
Name	Relationship	Department
7. Would you accept temporary work?	YES	NO
8. Would you accept part-time work?	YES	NO
9. Would you accept shift work?	YES	NO
10. Would you accept weekend and holiday work?	YES	NO
11. Would you accept having to work nights?	YES	NO
12. Would you accept having to work a rotating schedule?	YES	NO
13. Do you have a valid commercial driver's license?	YES	NO
14. CDL classification if YES:		

Section continued on next page

## Section VII Continued

15. Have you received any traffic citations in the past five(5) years?

Explain if YES. Print NO if the answer is NO:

16. Have you ever been convicted of OR pled guilty OR no contest to a misdemeanor?

Explain if YES. Print NO if the answer is NO:

17. Have you ever been convicted of OR pled guilty OR no contest to a felony?

Explain if YES. Print NO if the answer is NO:

18. Have you ever been suspended, dismissed, or asked to resign from any job?

Explain if YES. Print NO if the answer is NO:

## Section VIII Other Training/Skills/Languages

Please List:

## Section IX Signature

Attestation: I hereby certify that each and every statement that I have made in this application is true and complete to the best of my knowledge and belief. I understand that any untrue statement in this application will result in my dismissal at any time during my employment with the Barrow County Sheriff's Office. I further understand that any intentional false statement made in this application will result in my disqualification of my application and/or prosecution for the offense of False Swearing (O.C.G.A. 16-10-71), which is 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 that any erroneous answers given by me in this application and/or 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 to do so and my application may be terminated. I understand that I may be required to produce documentation verifying identity and employment eligibility in the United States. I understand that I may be required to verify any and all information provided in this application. I understand that this completed application, and copies of any documentation provided in support of this application shall be and become the property of Barrow County Sheriff's Office and will not be returned. The Sheriff's Office is hereby authorized to make any investigation of my personal, educational, criminal, financial, credit, driving, past employment, reputational, military service and other personal history and actions to assist in determining my qualification and fitness for the position I am seeking with this agency. I understand that I must notify the Employee Services Office of any changes in my name, address, or phone number. I further understand that certain information I have provided on this application may be subject to public disclosure under the Georgia Open Record Act.

Signature

Date



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# Barrow County Sheriff's Office Application For Employment

233 E Broad Street  
Winder, GA 30680  
770-307-3080

The Barrow County Government and the Barrow County Sheriff's Office are equal opportunity employers. Applicants for all positions within the Barrow County Government and the Barrow County Sheriff's Office are considered for employment based upon their qualifications for the position applied for and without regard to race, creed, color, gender, religion, national origin, age, sexual orientation, disability, or any other legally protected status.

Identification Information			
Name (Last, First, Middle/Maiden):			Date of Birth:
Social Security Number:	Race:	Sex:	Driver's License Number:
Primary Phone Number:	Secondary Phone Number:		Alternate Phone Number:
Email Address:			

## Protective Services Applicant:

The Barrow County Sheriff's Office maintains strict hiring guidelines that ALL applicants must satisfactorily meet or surpass in order to be considered for any position within the Sheriff's Office.

The following questions address several of the areas covered in the hiring guidelines. Your responses will be verified during the background investigation process. Complete and honest answers are required. Any negative facts contained within the information provided in this questionnaire will be evaluated to determine compliance with those guidelines. Any false or misleading information uncovered during investigation of your background may result in the immediate disqualification of Application for Employment. Therefore, it is imperative that ALL your answers to the questions are truthful and honest to the best of your ability.

Questionnaire begins on the next page.

## Section I Previous Address Information

List all addresses you have resided at for the past TEN years

Address	From/To

## Section II Personal Family Information

Married	Single	Divorced	Widowed	
Are you living with your spouse?		YES	NO	Explain if "NO":

### Marriage History Information:

Date of Marriage	Place of Marriage	Spouse's Name

Section continued on next page

## Section II Continued

Do you have any roommates?	YES	NO	How many if "YES":	
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**Roommate's Identification and Personal Information:**

Roommates' Full Name	Occupation and Place of Employment

**List all children currently receiving support from you and those no longer living with you:**

Full Name	Address

Do you currently have ANY relatives employed by the Barrow County Government?      YES      NO

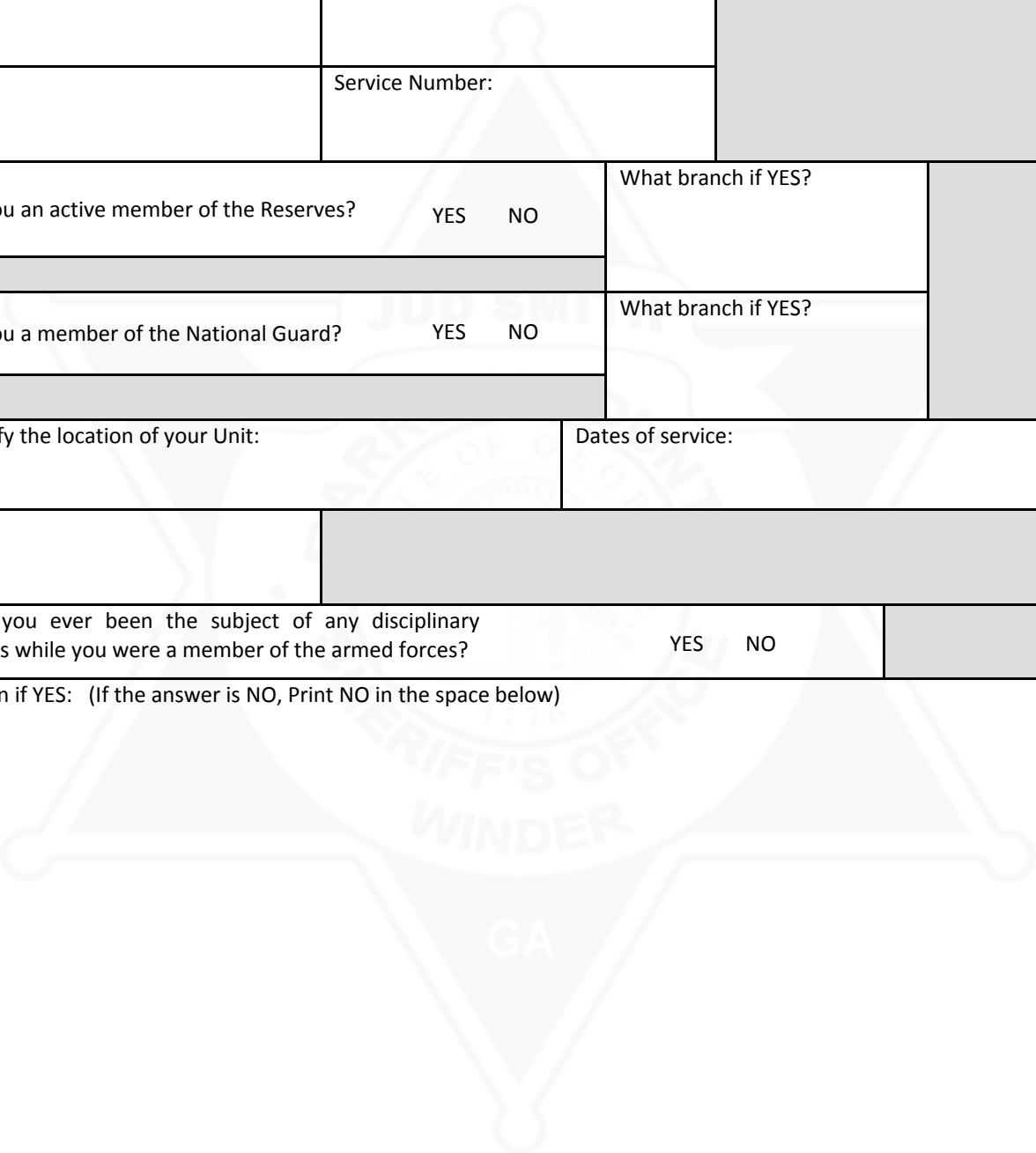
If YES, list names, relation, and department

Full Name	Relation	Department

End of Section

## Section III Military Service History Information

A copy of your DD214 MUST be attached to this application

Have you ever served as a member of the armed forces?                      YES      NO		What branch if YES?
Dates of service:	Discharge Type:	
Rank:	Service Number:	
Are you an active member of the Reserves?                      YES      NO		What branch if YES?
Are you a member of the National Guard?                      YES      NO		What branch if YES?
Identify the location of your Unit:		Dates of service:
Rank:		
Have you ever been the subject of any disciplinary actions while you were a member of the armed forces?                      YES      NO		
Explain if YES: (If the answer is NO, Print NO in the space below)		
		



## Section IV Driver's History Information

Please answer ALL questions regarding your driving history:

Do you have a current driver's license?      YES    NO	License number:
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License class:	Expiration Date:	Issuing State:
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### Traffic Citation History:

Have you ever received a traffic citation?      YES    NO	If YES, list below beginning with the most recent
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Offense	Location / Agency	Date	Disposition

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Have you ever been in a vehicle accident?      YES    NO	If YES, list details below	<div style="background-color: #e0e0e0; height: 20px;"></div>
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Has your license ever been suspended or revoked?      YES    NO	<div style="background-color: #e0e0e0; height: 20px;"></div>
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Explain if YES:

End of Section

## Section V Personal References

Please list five (5) persons, not related to you, that can provide a personal character reference:

Name	Address	Telephone	Relationship	Time known

Please list five (5) persons, not related to you, that can provide a professional character reference:

Name	Address	Telephone	Relationship	Time known

## Section VI Drug Use History

Please answer the following questions regarding your drug use history:

Have you ever been involved in the sale, distribution, or manufacturing of any illegal substance?

Explain if YES:

Have you ever consumed alcoholic beverages or used any type of illegal drug while working?

Explain if YES:

Section continues on next page

## Section VI Continued

Please answer ALL questions

Do you consume alcoholic beverages?	YES	NO	What frequency if YES?		
Have you ever experimented with marijuana?	YES	NO	How old were you at the time?		
How many times have you smoked marijuana?	When was the last time?				
Have you ever used methamphetamines?	YES	NO	How many times did you use?		
When was the last time?					
Have you ever used cocaine?	YES	NO	How many times did you use?		
When was the last time?					
Have you ever experimented with or used any other controlled substance not mentioned above? If YES, list below				YES	NO
Drug	Age	Times Used	Last Used		
Have you ever used a drug that was prescribed to someone else?				YES	NO
Have you ever abused a drug that was prescribed to you by doctor?				YES	NO
End of Section					

## Section VII Employment Disciplinary History

Have you ever been fired or allowed to resign employment because of breach of trust, embezzlement, theft, or any other crime?

If YES, explain: If the answer is NO, print NO:

Have you ever been fired or allowed to resign employment because of abuse of authority or any disciplinary action?

If YES, explain: If the answer is NO, print NO:

Has a supervisor ever reprimanded you for being late or absent?

If YES, explain: If the answer is NO, print NO:

Has a supervisor ever reprimanded you for misconduct or poor job performance?

If YES, explain: If the answer is NO, print NO:

When you were active duty military, were you ever the subject of a court martial, Article 15, company punishment or disciplinary action?

If YES, explain: If the answer is NO, print NO or NA if not applicable:

Why did you leave your last employer? OR Why would you leave your current employer for a position with the Barrow County Sheriff's Office?

Explain your answer:

## Section VIII POST Record History

Are you certified as a Law Enforcement Officer in the state of Georgia? YES    NO

If YES, provide the following:		
Certification Number	Certification Date	Academy Attended

Are you or have you been certified as a peace officer in another state? YES    NO

State	Certification Number	Certification Date	Certification Status

Are you certified as a Jailor in the state of Georgia? YES    NO

If YES, provide the following:		
Certification Number	Certification Date	Academy Attended

**\*\*\*Please attach copies of all law enforcement certificates to application\*\*\***

Are you currently OR have you ever been investigated or placed under file review by the Georgia Peace Officer's Standards and Training Council or any other state's similar law enforcement profession's governing body? Include the date, disposition and also provide a letter from POST or its equivalent saying that you have been cleared and are in good standing with the Council/governing body.

Explain if YES. Print NO if the answer is NO.

## Section IX Criminal History

Please answer the following questions concerning your criminal history

Have you ever been convicted of a misdemeanor?

Explain if YES. Print NO if the answer is NO.

Have you ever been convicted of a felony?

Explain if YES. Print NO if the answer is NO.

Are you currently on probation?

Explain if YES. Print NO if the answer is NO.

At this time do you have any pending criminal charges against you, including but not limited to: traffic citations or domestic violence?

Explain if YES. Print NO if the answer is NO.

At this time are you under subpoena or involved in any criminal or civil litigation, either as a plaintiff or defendant?

Explain if YES. Print NO if the answer is NO.

Have you committed any undetected felonies? (Crimes for which you have not been arrested)

Explain if YES. Print NO if the answer is NO.

Is there anything you would like to tell us about yourself that you have not addressed or have not been given the opportunity to explain at this point?

## Section X Written Essay

Explain why you want to be in law enforcement and/or why you are seeking employment with the Barrow County Sheriff's Office.



## Section XI Closing Questions

Over a period of time the duties and responsibilities of a position will tend to change. This may arise from technological changes or changes in the Sheriff's Office procedural guidelines. Are you willing to accept changes in the duties and responsibilities for the position which you have applied for?

YES NO

Have you been completely honest with us when completing this application for employment and the background questionnaire?

YES NO

Explain if NO. Print YES if your answer is yes.



## Section XII Closing Comments

Answering YES to any of the aforementioned questions will NOT necessarily result in your disqualification from the hiring process. Any intentional omissions or dishonesty in any documents submitted as a part of application or any other part of the Barrow County Sheriff's Office and/or Barrow County Government hiring process will be cause for immediate disqualification from further consideration.



## Section XIII Conditional Offer of Employment

I understand that the completion of this application does not assure me of a position with the Barrow County Sheriff's Office. I further understand that any offer of employment made to me by the Barrow County Sheriff's Office is conditional upon my satisfying all other eligibility requirements, which may include my passing a background investigation, credit investigation, physical fitness and agility evaluation, drug screening, psychological examination, and polygraph examination, as required by the Barrow County Sheriff's Office.

Print Name:

Signature

Date

## Section XIV Signature

Attestation: I hereby certify that each and every statement that I have made in this application is true and complete to the best of my knowledge and belief. I understand that any untrue statement in this application will result in my dismissal at any time during my employment with the Barrow County Sheriff's Office. I further understand that any intentional false statement made in this application will result in my disqualification of my application and/or prosecution for the offense of False Swearing (O.C.G.A. 16-10-71), which is 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 that any erroneous answers given by me in this application and/or 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 to do so and my application may be terminated. I understand that I may be required to produce documentation verifying identity and employment eligibility in the United States. I understand that I may be required to verify any and all information provided in this application. I understand that this completed application, and copies of any documentation provided in support of this application shall be and become the property of Barrow County Sheriff's Office and will not be returned. The Sheriff's Office is hereby authorized to make any investigation of my personal, educational, criminal, financial, credit, driving, past employment, reputational, military service and other personal history and actions to assist in determining my qualification and fitness for the position I am seeking with this agency. I understand that I must notify the Employee Services Office of any changes in my name, address, or phone number. I further understand that certain information I have provided on this application may be subject to public disclosure under the Georgia Open Record Act.

Print Name:

Signature:

Date:

**End of Application**