

Sheriff Steve M. Harkins

Chief Deputy Will Fruehling



# **BLAINE COUNTY SHERIFF'S OFFICE**

## **Application for Employment**

### **Phases of the Hiring Process:**

1. **TO APPLY** download the application to your desktop, enter your information in the fillable PDF, print the application, and hand sign on pages 3, 15, and 18. You may also hand print your information. Attach all required documentation and mail or hand deliver. Be sure to notarize and include:
  - Notarized Personal Inquiry Waiver
  - Cover Letter
  - Copies of all Required Documents (listed on page 5)
2. **REVIEW:** All submissions will be reviewed for eligibility and completeness. Incomplete Applications will not be accepted or processed.
3. **POSITION TESTING:**
  - Applicants for certified deputy positions must pass a Written Basic Skills Test and Physical Readiness Test. PRT Test Information is available at [www.blainesherriff.com](http://www.blainesherriff.com)
  - Applicants for Control Operator or Administrative positions must pass a Computer Skills Test.
4. **INTERVIEWS:** Applicants will be selected for Oral Board and Background Interviews.
5. **BACKGROUND:** All Applicants must pass a thorough background investigation.
6. **CONDITIONAL OFFER:** Finalists who have successfully passed all phases of the hiring process will be given a Conditional Offer which may include medical, hearing, sight, and polygraph examination requirements according to the position being hired.
7. **OFFER:** A formal job offer will be made to those individuals selected for employment.

### **COMPLETED APPLICATIONS SHOULD BE SENT TO:**

**The Blaine County Sheriff's Office**  
**Attention: Holly Carter**  
**1650 Aviation Drive**  
**Hailey, Idaho 83333**  
**(208) 788-5536**

## **FY: 2021 Salary and Benefits**

### **Salary Ranges**

	<u>Starting</u>	<u>Lateral DOE</u>
<b>Patrol Deputy:</b>	<b>\$28.11 per hour (\$58,468)</b>	<b>\$58,468-\$72,000</b>
<b>Detention Deputy:</b>	<b>\$28.11 per hour (\$58,468)</b>	<b>\$58,468-\$72,000</b>
<b>Control Operator:</b>	<b>\$20.01 per hour (\$41,620)</b>	
<b>Drivers Services Clerk</b>	<b>\$17.61 per hour (\$36,650)</b>	

### **Full Benefits Package**

Medical Insurance	Step, Merit/Market Increases Possible
Dental Insurance	PERSI Retirement System
Vision Insurance	11 Paid Holidays; Vacation & Sick Time
Prescriptions Coverage	Payroll Direct Deposit
Life Insurance	Employee Assistance Program
Personal Leave	Pre-Tax Cafeteria Plans
Available PERSI 401K	Supplemental Insurance Available
Air St. Luke's Family Membership	

### **Mission Statement**

The men and women of the Blaine County Sheriff's Office are committed to being a professional organization dedicated to the concepts of personal excellence, continuous improvement, teamwork, and service to our community. We take pride in our organization, our professional accomplishments, and our abilities to make Blaine County a safe place to live, work and play.

### **Employee Value Statement**

The men and women of the Blaine County Sheriff's Office are responsible for each other and will always strive to work together to serve the citizens of our county. We will treat each other fairly, in a working environment that rewards and reinforces cooperation at all levels. Positive thinkers, who are adaptable to our organization's needs, will be recognized by the department. We are empowered to make suggestions and express our concerns. With management's commitment to quality training and staff development, we accept the responsibility to contribute by our actions and ideas, to improve our organization's effectiveness and efficiency. Our fundamental commitment is to ourselves, our organization, and our customers—the citizens of Blaine County. With these commitments in place, we will positively impact our profession to the highest degree possible.

**Sheriff Steve M. Harkins**

## HIRING STANDARDS AND MINIMUM QUALIFICATIONS

Applicants must:

1. Be a citizen of the United States.
2. Be a high school graduate or have earned a GED certificate.
3. Possess or be able to possess a valid driver's license.
4. Must meet the following age requirements:
  - a. Commissioned Deputy (Detention or Patrol) 21 years of age
  - b. Central Control: 19 years of age
  - c. Records Clerk or Drivers Services Clerk: 18 years of age
5. Have a minimum of 2 years of any combination of responsible work experience, military service, education, or any other productive activity.
6. Not have committed five (5) or more moving traffic offenses within the past 3 years.
7. Not have been convicted of any misdemeanor sex crimes, crimes of deceit, or drug-related offenses. Any criminal probation must already have been served. General misdemeanor convictions are reviewed on a case-by-case basis, however:
  - a. **NO** conviction of any misdemeanor within 2 years of application (includes Deferred Prosecution and Withheld Judgments). No current pending misdemeanor case.
  - b. **NO** Civil Protection Orders or No Contact Orders served or issued against the applicant within 2 years of application.
  - c. **NO** D.U.I. convictions in the past 3 years (includes Withheld Judgments).
  - d. **NO** driver's license suspensions in the past 3 years for violations relating to D.U.I., chemical test refusal, or points assessed due to moving traffic violations
  - e. **NO** conviction for willful concealment or petit theft within 5 years of application.
  - f. **NO** convictions for domestic battery, child abuse, stalking, or voyeurism.
  - g. **NO** convictions or commission of a felony as an adult; case-by-case review of juvenile felony convictions.
8. Meet the following drug usage policy: **Failure to disclose your past drug usage regardless of these standards will automatically disqualify you for employment.**
  - a. **NO** "soft" illegal drug use in the **past 3 years** – marijuana or synthetic variations such as "spice", psilocybin mushrooms, or illegal use of prescription drugs, etc.
  - b. **NO** "hard" illegal drug use in the **past 5 years** - methamphetamines, LSD, cocaine, heroin, etc.
9. Never received a military dismissal, bad conduct discharge, or dishonorable discharge.
10. Not presently planning to file or undergoing action in bankruptcy court in any state (personal or business). Applicants must wait a period of at least 1 year after bankruptcy before applying for a position, during which they have demonstrated fiscal responsibility.
11. Applicants must be of good moral character and not have engaged in conduct or a pattern of conduct that would jeopardize public trust in the law enforcement profession.

### APPLICANT ACKNOWLEDGEMENT

**By my signature below, I acknowledge that I have read and understood the standards listed above, and that written and physical testing, a background investigation, oral board interview, medical, hearing, sight, and polygraph examinations may be conducted to verify my compliance with all the standards for the position in which I am applying.**

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

(Handwritten Signature Required)

## PERSONAL INFORMATION

FIRST NAME:  MIDDLE NAME:  LAST NAME:  LIST ANY OTHER NAMES EVER USED (MAIDEN):  MAILING ADDRESS – BOX NO., CITY, STATE, & ZIP  PHYSICAL ADDRESS - STREET, CITY, STATE, & ZIP  PLACE OF BIRTH  LIST ALL THE CITIES AND STATES YOU HAVE EVER LIVED IN:  CELL PHONE#                      WORK PHONE#                      HOME PHONE#  HAVE YOU EVER PREVIOUSLY BEEN EMPLOYED BY BLAINE COUNTY?                      YES                      NO IF YES, WHEN?    WHAT POSITION?  ANY RELATIVES EMPLOYED BY BLAINE CO. SHERIFF’S OFFICE?                      YES                      NO IF YES, WHAT POSITION? TYPE OF WORK YOU ARE SEEKING                      DATE AVAILABLE TO WORK? <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">FULL TIME</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">PART TIME</td> </tr> </table>		FULL TIME		PART TIME	CHECK ALL POSITIONS YOU ARE APPLYING FOR: <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">PATROL DEPUTY</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">DETENTION DEPUTY</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">CONTROL OPERATOR</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">DRIVERS SERVICES</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">ADMINISTRATIVE ASST.</td> </tr> </table> SOCIAL SECURITY NO.                      STATE ISSUED  DATE OF BIRTH                      AGE  E-MAIL ADDRESS  		PATROL DEPUTY		DETENTION DEPUTY		CONTROL OPERATOR		DRIVERS SERVICES		ADMINISTRATIVE ASST.		
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ARE YOU WILLING TO WORK  <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">DAY SHIFTS</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">NIGHT SHIFTS</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">ROTATING SHIFTS</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">WEEKENDS</td> </tr> </table>		DAY SHIFTS		NIGHT SHIFTS		ROTATING SHIFTS		WEEKENDS	HOW DID YOU LEARN ABOUT THE JOB OPENING?  <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">NEWSPAPER</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">BCSO WEBSITE</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">FACEBOOK</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">INDEED</td> </tr> </table> OTHER PLEASE SPECIFY  		NEWSPAPER		BCSO WEBSITE		FACEBOOK		INDEED
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	ROTATING SHIFTS																
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CAN YOU OPERATE A COMPUTER?	<table style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">YES</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 100px;">NO</td> <td style="width: 100px;">WORDS PER MINUTE:</td> </tr> </table>		YES		NO	WORDS PER MINUTE:											
	YES		NO	WORDS PER MINUTE:													

DESCRIBE THE TYPES OF COMPUTER EQUIPMENT & SOFTWARE PROGRAMS YOU HAVE USED AND YOUR LEVEL OF EXPERIENCE WITH EACH:		
DO YOU HAVE A VALID DRIVER'S LICENSE?	YES	NO
DRIVERS LICENSE #	EXPIRATION DATE:	
STATE ISSUED	NAME USED	
LIST ANY OTHER STATES IN WHICH YOU HAVE BEEN PREVIOUSLY ISSUED A DRIVERS LICENSE.		
ARE YOU 21 YEARS OF AGE OR OLDER?	YES	NO
ARE YOU A CITIZEN OF THE UNITED STATES?	YES	NO
DO YOU HAVE A HIGH SCHOOL DIPLOMA OR GED?	YES	NO

### **REQUIRED DOCUMENTATION**

The following documents are required to submit your application. If you require additional time to request a document from its original source, list the specific document missing, the reason, and your estimate of the time required to obtain and submit it to BCSO. Do not send original documents as they will not be returned. Failure to provide these required items may be grounds for rejection of your application.

SEPARATE RECENT PHOTOGRAPH OF YOURSELF (APPROXIMATE SIZE 2"x3")

VALID DRIVERS LICENSE

SOCIAL SECURITY CARD

BIRTH CERTIFICATE

HIGH SCHOOL DIPLOMA, G.E.D. OR TRANSCRIPTS SHOWING GRADUATION - \*state requirement\*

COLLEGE DIPLOMA (IF APPLICABLE)

ONE FULL CREDIT HISTORY REPORT (AVAILABLE FREE AT "ANNUAL CREDIT REPORT.COM")

SELECTIVE SERVICE REG./MILITARY DD214 Long Form(IF APPLICABLE)

CITIZENSHIP RECORDS – OR - NAME CHANGE RECORDS (IF APPLICABLE)

P.O.S.T. CERTIFICATES, LAW ENFORCEMENT TRAINING RECORDS (IF APPLICABLE)

BANKRUPTCY DISCHARGE PAPERS (IF APPLICABLE)

**List Any Missing Documentation and Reason:**

## EDUCATIONAL HISTORY

List your educational history below. Use additional pages if necessary.

	NAME, CITY, AND STATE OF SCHOOLS ATTENDED	LAST GRADE ATTENDED	YEAR	DID YOU GRADUATE?	DEGREE / MAJOR
<b>HIGH SCHOOL</b>		9	FROM:	YES	
		10		NO	
		11	TO:	GED	
		12		ONLINE	
<b>COLLEGE</b>		1 YEAR	FROM:	LE PROGRAM	
		2 YEARS		AA	
		3 YEARS	TO:	BA/BS	
		4 OR MORE		OTHER	
<b>COLLEGE</b>		1 YEAR	FROM:	LE PROGRAM	
		2 YEARS		AA	
		3 YEARS	TO:	BA/BS	
		4 OR MORE		OTHER	
<b>OTHER</b>		SPECIFY	FROM:	YES	
			TO:	NO	
<b>OTHER</b>		SPECIFY	FROM:	YES	
			TO:	NO	

List any specialized training, additional schooling, or educational awards you may have:

List any foreign languages you speak and the extent of your proficiency:

Summarize any other experience, volunteer work, licenses, or technical skills:

## EMPLOYMENT HISTORY

List all of your employment for the past ten (10) years, beginning with your present or most recent job. You must provide current contact information for all employers or supervisors.

EMPLOYER/COMPANY NAME		FROM:	TO:
		DATE	DATE
FULL MAILING ADDRESS		TOTAL TIME EMPLOYED	HOURS PER WEEK
DUTIES (BE SPECIFIC)	POSITION/TITLE	WAGE	WAGE
		STARTING	ENDING
SPECIFIC REASON FOR LEAVING	SUPERVISOR'S NAME	PHONE NO.	

EMPLOYER/COMPANY NAME		FROM:	TO:
		DATE	DATE
FULL MAILING ADDRESS		TOTAL TIME EMPLOYED	HOURS PER WEEK
DUTIES (BE SPECIFIC)	POSITION/TITLE	WAGE	WAGE
		STARTING	ENDING
SPECIFIC REASON FOR LEAVING	SUPERVISOR'S NAME	PHONE NO.	

EMPLOYER/COMPANY NAME		FROM:	TO:
		DATE	DATE
FULL MAILING ADDRESS		TOTAL TIME EMPLOYED	HOURS PER WEEK
DUTIES (BE SPECIFIC)	POSITION/TITLE	WAGE	WAGE
		STARTING	ENDING
SPECIFIC REASON FOR LEAVING	SUPERVISOR'S NAME	PHONE NO.	

EMPLOYER/COMPANY NAME		FROM:	TO:
		DATE	DATE
FULL MAILING ADDRESS		TOTAL TIME EMPLOYED	HOURS PER WEEK
DUTIES (BE SPECIFIC)		POSITION/TITLE	WAGE
		STARTING	ENDING
SPECIFIC REASON FOR LEAVING	SUPERVISOR'S NAME	PHONE NO.	

EMPLOYER/COMPANY NAME		FROM:	TO:
		DATE	DATE
FULL MAILING ADDRESS		TOTAL TIME EMPLOYED	HOURS PER WEEK
DUTIES (BE SPECIFIC)		POSITION/TITLE	WAGE
		STARTING	ENDING
SPECIFIC REASON FOR LEAVING	SUPERVISOR'S NAME	PHONE NO.	

If you need additional space for your employment history please use the Comment Page.

### **LAW ENFORCEMENT EXPERIENCE**

List all public safety agencies at which **you have been employed** (law enforcement, fire department, correctional, etc.) Include agency name, position, dates of employment, supervisor name, and reason for leaving. If additional space is needed, use the comment page.

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List all public safety agencies that **you have applied with** (law enforcement, fire department, correctional, etc.) Include agency name, date applied, contact name, and how far you got in their hiring process. If additional space is needed, use the comment page.

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## PERSONAL REFERENCES

Provide full and correct mailing addresses and contact information for at least five (5) personal references that you have known for five (5) years. List only persons we may contact. Notify your references that they will be contacted. Do not include anyone related to you or previous employers.

**Please verify all addresses prior to submission of application.**

Name		Years Known		Cell Phone	
Occupation				Work Phone	
Address				Relationship	
City		State		Zip Code	

Name		Years Known		Cell Phone	
Occupation				Work Phone	
Address				Relationship	
City		State		Zip Code	

Name		Years Known		Cell Phone	
Occupation				Work Phone	
Address				Relationship	
City		State		Zip Code	

Name		Years Known		Cell Phone	
Occupation				Work Phone	
Address				Relationship	
City		State		Zip Code	

Name		Years Known		Cell Phone	
Occupation				Work Phone	
Address				Relationship	
City		State		Zip Code	

## PERSONAL HISTORY

To be eligible for employment you must successfully pass a background investigation and meet established standards set by the Blaine County Sheriff's Office and the Idaho POST Academy. Answers to the following questions are required to determine your eligibility IF you answer YES to ANY question, you MUST provide details.

This includes charges that were dismissed or received a Withheld Judgement .

Your answers will be verified through a detailed interview assessment, background investigation, and background examination. It is to your advantage to BE ABSOLUTELY TRUTHFUL in answering all questions. You must answer yes or no to each question.

Any falsification or omission of information will result in disqualification for employment.

### HAVE YOU **EVER** RECEIVED A CITATION OR BEEN CHARGED WITH:

INFRACTION	YES		NO	
MISDEMEANOR	YES		NO	
FELONY	YES		NO	
CHARGE(S):				
DISPOSITION(S):				
DATE(S):				
LOCATION(S):				

IF MORE SPACE IS NEEDED PLEASE USE THE COMMENT PAGE

### HAVE YOU **EVER** BEEN CONVICTED OF:

INFRACTION	YES		NO	
MISDEMEANOR	YES		NO	
FELONY	YES		NO	
CHARGE(S):				
DISPOSITION(S):				
DATE(S):				
LOCATION(S):				

IF MORE SPACE IS NEEDED PLEASE USE THE COMMENT PAGE

**NOTE: A CONVICTION MAY NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT. PROVIDE DETAILS OF ALL CHARGE(S), DISPOSITION(S), DATE(S), AND LOCATION(S) THE CIRCUMSTANCES SURROUNDING THE OCCURRENCE(S) AND THE DEGREE OF RELEVANCE TO THE JOB FOR WHICH YOU ARE APPLYING FOR WILL BE TAKEN INTO CONSIDERATION.**

## QUESTIONNAIRE

Answer the following questions regardless of whether the incident may have been sealed, expunged, or dismissed. Detailed explanations are required for any YES answers on the COMMENT PAGE (p. 14). **DO NOT WRITE EXPLANATION ON THIS PAGE.**

1. As a juvenile or as an adult have you ever committed an offense where you could have been/or were arrested? If yes, give the date the offense was committed, what the offense was, and the disposition of charge(s) on the Comment Page.	Yes	No
2. Have you ever petitioned any court to seal or expunge a criminal or juvenile record? If yes, explain in detail on the Comment Page.	Yes	No
3. Have you been arrested or convicted of a misdemeanor within 2 years of this application? (Includes Deferred Prosecution and Withheld Judgment) If yes, explain in detail on the Comment Page.	Yes	No
4. Have you ever had a Civil Protection Order or No Contact Order served or issued against you? If so, when? Provide full details on the Comment Page	Yes	No
5. Have you ever been involved in or arrested for any crime of unlawful sexual conduct, stalking, or employing physical or domestic violence of any kind?	Yes	No
6. Have you ever been the subject of an investigation dealing with the theft? If yes, what was taken, what was the value, and when did this occur?	Yes	No
7. Have you ever purchased an item(s) that you knew or suspected was stolen? If yes, list the item, quantity, estimated value, and the date of purchase.	Yes	No
8. Have you ever had a criminal warrant or a traffic warrant issued for your arrest? If yes, provide the date the warrant was issued and the date it was cleared.	Yes	No
9. Do you reside or associate with anyone (family or friends) who is or has been charged with or convicted of a misdemeanor or felony? If yes, please provide details on the Comment Page.	Yes	No
10. Have you ever been placed on probation or parole? If yes, when, why, and where?	Yes	No
11. Have you ever failed a polygraph examination? If yes, explain when, where, why, and approximate dates on the Comment Page.	Yes	No
12. Have you ever falsified an insurance claim, income tax return, or collected unemployment or welfare benefits that you were not entitled to?	Yes	No
13. Have you ever fraudulently misused a credit card or forged a check?	Yes	No
14. Have you ever or are you currently involved in a civil lawsuit?	Yes	No

15. Has there ever been any situation in which you have been involved which may be incompatible with the discharge of the duties of a certified officer? If yes, explain.	Yes	No
16. Has your driver's license ever been suspended, revoked, placed on probation, or received a warning notice from the state who issued your license?	Yes	No
17. Have you ever possessed any drugs, narcotics, or other controlled substances other than those prescribed by a doctor or other licensed medical practitioner?	Yes	No
18. Have you ever illegally purchased, sold, or otherwise distributed any drugs, narcotics, or other controlled substances? Provide detailed answer on Comment Page.	Yes	No
19. Have you ever been involved in the cultivation of marijuana or the manufacturing of any drugs, narcotics, or other controlled substances?	Yes	No
20. Have you ever knowingly stored or transported illegal drugs, narcotics, or other controlled substances for yourself or another person?	Yes	No
21. Have you ever tried, ingested, experimented, or used illegal drugs? This includes as a juvenile or experimental use. Answering yes to this question does not automatically exclude you from employment. Explain what types, how often, and the date of the last occurrence on the Comment Page.	Yes	No
22. Do you drink alcohol? If yes, how much and how frequent?	Yes	No
23. Have you ever had a drug or alcohol-related accident?	Yes	No
24. Have you ever been convicted or pled guilty to driving while under the influence of alcohol or drugs, or to lesser charges following a D.U.I. arrest? If yes, list the date of the arrest, the law enforcement agency involved, and the final disposition?	Yes	No
25. Have you or your spouse: Ever defaulted on any loan, debt or obligation in the past five years? Ever had your wages attached or garnished? Ever had any collection or repossession action taken against you? Ever filed a petition for bankruptcy? When? Ever had a check bounce or returned for insufficient funds? If yes to any, please explain circumstances on the Comment Page.	Yes	No
26. Have you ever been involved in any domestic violence? If yes, explain.	Yes	No
27. Do you have any issues or problems losing your temper or with anger management?	Yes	No
28. Have you ever participated in or been accused, charged, or convicted of sexual abuse or harassment?	Yes	No
29. Have you purposely omitted any information from your employment application?	Yes	No

## LANDLORD / NEIGHBOR REFERENCES

Please provide **physical addresses and contact information** for at least three (3) landlords or neighbors for where you have lived for at least the last three-to-five (3-5) years.

Name		Years Known		Cell Phone	
Address				Work Phone	
City		State		Zip Code	

Name		Years Known		Cell Phone	
Address				Work Phone	
City		State		Zip Code	

Name		Years Known		Cell Phone	
Address				Work Phone	
City		State		Zip Code	

## EMPLOYMENT HISTORY

Provide detailed explanations for any YES answers on the COMMENT PAGE  
**DO NOT WRITE EXPLANATION ON THIS PAGE**

1. Have you ever worked for any law enforcement agency in any capacity? If yes, list agency name, dates, job title, and current status.	Yes	No
2. Are you currently or have you in the past been POST certified? If yes, list the type of certificate, state, the highest level attained, and the date awarded.	Yes	No
3. Have you ever served in the U.S. Military? If yes, list the dates, branch of service, type of discharge and the highest rank held.	Yes	No
4. If you served in the military, were you in a combat or military police position? If yes, explain which position on the Comment Page.	Yes	No
5. Has any supervisor ever reprimanded you for being late, absent, misconduct, or not doing your job properly?	Yes	No
6. Have you ever been terminated during the probationary period from any employment?	Yes	No
7. Have you ever been suspended, fired, or asked to resign from any employment?	Yes	No
8. Have you ever quit a job without giving proper notice? If yes, explain on the Comment Page.	Yes	No
9. Have you ever been rejected for employment for any reason by any law enforcement agency? If yes, which agency and why?	Yes	No
10. Would contacting your current employer during the background investigation present a problem for you?	Yes	No
11. Are you able to lift one hundred (100) pounds?	Yes	No



DECLARATION REGARDING DOMESTIC VIOLENCE CONVICTIONS PER  
18 USC§ 922 AND THE ABILITY TO CARRY FIREARMS/AMMUNITION

PRINT NAME:

AGENCY: Blaine County Sheriff's Office

Pursuant to the U.S. Supreme Court's 2009 decision in *U.S. v. Hayes*, any misdemeanor conviction involving the use or attempted use of physical force or threatened use of a deadly weapon on a person in any domestic relationship (including a current or former spouse, cohabitant, parent or child) will disqualify the convicted person from possessing a firearm or ammunition pursuant to 18 U.S.C. § 922(g)(9).

Since there is no law enforcement exemption under the federal law, it is essential that you fully disclose any such conviction regardless of the date. The burden and expense of obtaining legal relief, in any, from such federal restrictions is on you and you must provide certified proof of such relief if obtained.

**Have you ever been convicted of a misdemeanor for any use or attempted use of physical force or threatened use of force against any individual with whom you were in a domestic relationship? (i.e. spouse, ex-spouse, cohabitant, parent or child).**

NO

YES

NOT SURE

Have you obtained any form of legal relief (e.g. judicial finding of factual innocence) from this conviction? If so, provide a certified copy of the relief.

N/A

YES

Date of Relief

Issuing Jurisdiction

I hereby certify that I have read this declaration, and to the best of my knowledge, all of the information provided above it true, correct, and complete. I understand that false, misleading, or fraudulent information intentionally provided herein may be the basis for administrative action including termination from employment as well as criminal prosecution punishable pursuant to federal law.

SIGNATURE: \_\_\_\_\_

(Handwritten Signature Required)

DATE: \_\_\_\_\_

## WAR VETERAN'S PREFERENCE

I do not qualify for a war veteran's preference.

IF YOU BELIEVE YOU ARE ELIGIBLE FOR VETERAN'S PREFERENCE, CHECK BOX  
A, B, OR C.

**A. WAR VETERAN:**

Employment preference for initial appointment (5 points in competitive examinations) will be given to persons:

1. Who have served on active duty with the U.S. Armed Forces for a period of more than 180 days and during any conflict or war period officially recognized and participated in by the United States, and
2. Who have been discharged under other than dishonorable conditions, and
3. Who are residents of the State of Idaho when the application for employment is made.

YOU MUST INCLUDE A COPY OF YOUR DD214 LONG FORM SHOWING TYPE OF DISCHARGE.

**B. DISABLED WAR VETERAN**

Employment preference for initial appointment (10 points in competitive examinations) will be given to disabled persons:

1. Who have served on active duty the U.S. Armed Forces during any conflict or war period officially recognized and participated in by the United States,
2. Whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty, and
3. Who have a service-connected disability of 10% or more (U.S. Veterans Administration certification required) or have a non-service-connected disability for which they receive a pension or compensation in accordance with laws and regulations administered by the Veterans Administration (certification required), and
4. Who have been discharged under other than dishonorable conditions, and
5. Who are residents of the State of Idaho when the application for employment is made.

YOU MUST INCLUDE A DISABILITY BENEFITS LETTER FROM THE VETERANS ADMINISTRATION.

**C. HUSBAND/WIFE, WIDOW/WIDOWER:**

Employment preference will also be given to spouses of eligible war veterans or disabled war veterans when the disabled veteran is physically unable to perform the duties of the position to which the spouse seeks to apply this employment preference, and to widows and widowers of eligible war veterans or disabled war veterans provided the widow or widower does not remarry. (Documentation required)

Date Entered Military Service:

Date Separated:

Branch of Service:

Date Upon Separation:

(Idaho Code, Title 65, Chapter 5)

## MILITARY SERVICE

Detailed explanations are required for any YES answers on the COMMENT PAGE  
**DO NOT WRITE EXPLANATION ON THIS PAGE.**

1. Have you ever attempted to enlist in any branch of the United States Armed Forces? This includes the Reserves, National Guard, or Coast Guard. If yes, list which branch and the date on the Comment Page.	Yes	No														
2. Have you ever served in any branch of the United States Armed Forces? This includes the Reserves, National Guard, or Coast Guard. If yes, list which branch of service, highest rank held, enlistment dates, and your service number on the Comment Page.	Yes	No														
3. If yes to above question, mark which type of military discharge you received? Be specific.																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td>Honorable</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>Dishonorable</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>General</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>Under Honorable Conditions</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>Entry Level Separation</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>Medical</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td>Other --If additional space is needed, please use the Comment Page</td></tr> </table>		Honorable		Dishonorable		General		Under Honorable Conditions		Entry Level Separation		Medical		Other --If additional space is needed, please use the Comment Page		
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	Dishonorable															
	General															
	Under Honorable Conditions															
	Entry Level Separation															
	Medical															
	Other --If additional space is needed, please use the Comment Page															
4. If you answered yes to Q2, were you in a combat or military police position? If yes, provide details on Comment Page.	Yes	No														
5. Have you ever served in any branch of a foreign military? If yes, list name, location, highest rank held, and dates of service on the Comment Page.	Yes	No														
6. Have you ever been involved in or been accused of being involved in a subversive act against the United States Government, or any other government, such as mutiny, treason, sabotage, espionage, etc.? If yes, explain in detail the circumstances on the Comment Page.	Yes	No														
7. Have you ever been court-martialed, tried on charges, or subject of an Article 15, company punishment, OR ANY OTHER disciplinary action while a member of any branch of the Armed Forces? If yes, fully explain all the circumstance and details on the Comment Page.	Yes	No														

### Equal Opportunity Employer

The Blaine County Sheriff's Office is an equal opportunity employer. It is our policy to hire and promote persons without regard to race, sex, age, religion, national origin or physical disability (Except where physical requirements constitute a bona fide occupational qualification). The Blaine County Sheriff's Office complies with the American with Disabilities Act (ADA) and makes reasonable accommodations for disabled persons.

**PRINT, SIGN, AND NOTARIZE THIS APPLICATION. ATTACH ALL REQUIRED DOCUMENTS AND MAIL OR HAND DELIVER TO THE BLAINE COUNTY SHERIFF'S OFFICE.**

## Statement of Understanding

By signing this document, I am acknowledging I have answered the above questions honestly and accurately. I understand and acknowledge that any discovered falsification, omission, or misrepresentation may result in disqualification from the Blaine County Sheriff's Office hiring process.

I have read the job description and I attest that I am currently able to perform all functions of the position for which I am applying without accommodation. If I require an accommodation, I have notified the agency in writing of my specific accommodation.

## PERSONAL INQUIRY WAIVER

### AUTHORIZATION TO RELEASE INFORMATION

**NOTE: PRINT APPLICATION, SIGN, AND NOTARIZE**

To whom it may concern:

I request and authorize you to furnish the Blaine County Sheriff's Office with any and all information that you may have concerning me, my employment and education records, my reputation, my financial and credit status. Please include any and all medical, physical, and mental records, including all information of a confidential or privileged nature, and photocopies of same, if possible. If applicable, I also authorize the release of any military service records. Your cooperation in this reply will be used to assist the sheriff's office in determining my qualification and fitness for the position I am seeking with the Blaine County Sheriff's Office.

I hereby release you, your organization, and others from any liability or damage which may result from furnishing the information requested.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_  
(Handwritten Signature Required)

SUBSCRIBED AND SWORN BEFORE ME ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

(Seal)

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Resides in \_\_\_\_\_  
Notary Expires \_\_\_\_\_

**(NOTARIZATION REQUIRED)**

A photocopy of this request shall be for all intent and purposes, as valid as the original. The original is on file at the Blaine County Sheriff's Office.