

Applicant's Full Name: Last	First	MI	Date Applied	Social Security Number	Date of Birth	Type of Employment Full Time Part Time
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Position(s) Applied For: Please circle position you are applying for

- Investigative Unit
- Detention
- Transportation
- Patrol

- Reserves
- Clerical
- Court Security/Bailiff
- Volunteer
- Other - Describe _____

PRE-EMPLOYMENT APPLICATION

BARRY COUNTY SHERIFF'S OFFICE



APPLICATION WILL BE KEPT FOR ONE YEAR ONLY

AN EQUAL OPPORTUNITY EMPLOYER M/F/V/H



Dear Applicant:

Thank you for applying for a position with the Barry County Sheriff's Office. We want to take this opportunity to tell you that we are proud of our agency and the good work we do. We maintain high ethical standards at our office and always stress honesty and integrity. During the course of the hiring process you will be asked to answer many questions and to provide much information about your life. We expect you to tell the truth at all times. We expect you to maintain a high level of integrity. If you lie, provide false information, or engage in deception during the process, you may be eliminated from further consideration.

By signing this notice you acknowledge that you understand the expectations of our office for honesty and integrity.

Again, thank you for your interest in The Barry County Sheriff's Office and good luck.

Sheriff Gary Davis
Barry County Sheriff's Office

Applicant Signature:

Date:

Honesty Statement

An intensive pre-employment review may appear intrusive and even embarrassing: however, the inquiries that are made are either pursuant to law or otherwise job-relevant in nature. Background investigators, who will review your application, do not make inquiries into areas of a person's background that have no legitimate bearing on their suitability for the position of public trust, for which you have applied

Fundamental to this process is your integrity and trustworthiness. The number one reason individuals "fail" pre-employment reviews is because they attempt to withhold job-relevant information from the prospective employer. Any attempt to do so will undoubtedly be quickly discovered, and it will unquestionably result in your disqualification from further consideration.

Quibbling, hair-splitting, or out-and-out untruthfulness, for the purpose of concealing relevant information, will not be tolerated. Deliberate deception of any type will disqualify you. There are no "perfect" applicants: indeed, there are no "perfect" people. The Barry County Sheriff's Office evaluates issues in your past, both positive and negative, for the impact on your qualifications for this position. However, if you attempt to withhold information from us, we have no other option but to assume you are attempting to obtain this position by means of deception and you will be disqualified.

I attest that all of the statements made by me in this background questionnaire and the documents that I have submitted are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I understand that any false statements made with the intent to commit fraud, any fraudulent conduct, or any attempted deception by me or by others with my knowledge, approval or support, in any application, paper or document submitted, shall bar me from further examinations: or omissions of any information from this questionnaire may be cause for my rejection, removal from any eligibility list, or dismissal if employed.

I fully understood the questions in this background questionnaire and what was being inquired of me throughout this questionnaire. I further acknowledge the discovery of any omissions or discrepancies may be grounds for dismissal from the Barry County Sheriff's Office hiring process.

Certification by Applicant

My signature below attests to the fact that I have read this form carefully and I understand that any attempt to be deceptive whatsoever, whether by omission or commission, to withhold job-relevant information from the Barry County Sheriff's Office may result in my disqualification.

Signature: _____

Date: _____

PRE-EMPLOYMENT QUESTIONNAIRE

Please circle answers throughout application

Applicant Name:	Social Security Number:
Position Applied For:	Referral Source:
Have you ever filed an application with this office?	YES NO
Have you ever been employed by Barry County?	YES NO
If Yes, give dates and Division:	
Reason for leaving:	

NOTE: The information and answers to questions contained in this questionnaire may be verified by CVSA Examination and will be addressed in a complete Background Investigation. Omissions and falsification will be considered grounds for rejection of your application.

Please print (legibly) all responses. If you need more space to answer a question, attach an additional sheet, identify the question and write your response. **Leave no question blank or unanswered.** Write "None" if this is an appropriate answer. If a question does not apply to you, print "N/A" (not applicable). No question is intended as a medical inquiry. The American with Disabilities Act prohibits employers from making medically related inquiries prior to a conditional offer of employment. Therefore, if you are completing this questionnaire before you have received a conditional offer of employment, **do not;** divulge information concerning physical or medical conditions, either past or current.

The following questions are to determine if you meet the minimum qualifications of employment.

- Yes No Do you currently possess a High School Diploma or GED?
- Yes No Are you currently a United States Citizen?
- Yes No Are you legally authorized to work in the US?
- Yes No Do you currently have a valid driver license?
- Yes No Are you at least 21 years of age (18 for Detention or Clerical positions)?

If you answer "Yes" to any of the following five questions, you may not meet the minimum acceptable hiring standards.

- Yes No Have you ever been convicted of a felony offense?
- Yes No Have you ever been convicted of a domestic violence offense or any charge that was reduced from the charge of domestic violence?
- Yes No Have you ever been convicted of more than one DWI/Excessive BAC offense?
- Yes No Have you used any illegal substances during the last 12 months?
- Yes No Have you ever been a member of a terrorist group, street gang, or other organization that promotes or participates in criminal activity?

Personal Information

Last Name:		First Name:		Middle Name:	
Street Address:		City:	County:	State:	Zip:
Home Phone:		Cell Phone:		Alternate Phone:	
EMAIL Address:			How long have you lived at the above address?		
Date of Birth:		Birthplace:		Sex: Male Female	
Height:	Weight:	Marital Status:	Alias Names (include maiden names if applicable):		

Secondary Address (if applicable: college, military)

Street Address:		City:	State:	Zip:
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Operator s License Information

License Number:	State:	Expiration Date:
Chauffeur s License Number:	State:	Expiration Date:
Has your license ever been suspended or revoked in any state?		Yes No
If yes, please explain where and why:		

List all relatives/family members employed by Barry County

Name:	Division/Office:
Name:	Division/Office:

In case of emergency, notify:

Name:	Relationship:
Address:	City, State, ZIP:
Telephone:	Alternate Phone:
Name:	Relationship:
Address:	City, State, ZIP:
Telephone:	Alternate Phone:

Previous Addresses (Last 10 Years)

Street Address:	City:	County:	State:	Zip:
Street Address:	City:	County:	State:	Zip:
Street Address:	City:	County:	State:	Zip:
Street Address:	City:	County:	State:	Zip:
Street Address:	City:	County:	State:	Zip:

Education

High School:		
Address:		
Dates of Attendance:	Graduated: YES NO	Date of Graduation:

General Equivalency (GED):	Date Obtained:
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Trade/Vocational School:	Major/Course of Study:	
Address:	City, State, ZIP:	
Dates of Attendance:	Graduated: YES NO	Date of Graduation:

College / University:	Major/Course of Study:	
Address:	City, State, ZIP:	
Dates of Attendance:	Graduated: YES NO	Date of Graduation:

College / University:	Major/Course of Study:	
Address:	City, State, ZIP:	
Dates of Attendance:	Graduated: YES NO	Date of Graduation:

POST Certification: YES NO	Class:
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Military Service

Branch:	Specialty (MOS):	Highest Rank Obtained:
Dates of Service:	Date of Discharge:	Honorable Discharge: YES NO
Were you ever subject to court martial? YES NO	Security Clearance: YES NO	Were you ever rejected for a security clearance? YES NO

Roommates: List those individuals with whom you have resided with since you were 18. EXCLUDE family members.

Name:	Telephone:
Address:	City, State, ZIP:
For How Long:	Occupation:

Name:	Telephone:
Address:	City, State, ZIP:
For How Long:	Occupation:

Name:	Telephone:
Address:	City, State, ZIP:
For How Long:	Occupation:

References: Please list five persons as personal references. **DO NOT** list family members, former employers, or anyone listed above. Use friends, neighbors, co-workers, school teachers, coaches, or other associates. If you cannot list five people then attach a sheet explaining why.

Name:	Relationship:
Address:	City, State, ZIP:
Phone:	Occupation:

Name:	Relationship:
Address:	City, State, ZIP:
Phone:	Occupation:

References (Continued)

Name:	Relationship:
Address:	City, State, ZIP:
Phone:	Occupation:

Name:	Relationship:
Address:	City, State, ZIP:
Phone:	Occupation:

Name:	Relationship:
Address:	City, State, ZIP:
Phone:	Occupation:

Employment: Begin with your current employer and work backwards to your first.

Current Employer:		Title / Position Held:	
Address:		City, State, ZIP:	
Phone:	Date Hired:	Date Left:	Immediate Supervisor:
Reason for leaving:			
YES	NO	Have you ever been late for work? How many times?	
YES	NO	Have you ever been the subject of an internal investigation?	
YES	NO	Have you ever received any discipline for a violation of work rules?	
YES	NO	Have you ever been the subject of a customer / employee complaint?	
Explain any circumstances regarding investigations, discipline, and complaints:			

Previous Employer:		Title / Position Held:	
Address:		City, State, ZIP:	
Phone:	Date Hired:	Date Left:	Immediate Supervisor:

Reason for leaving:		
YES	NO	Have you ever been late for work? How many times?
YES	NO	Have you ever been the subject of an internal investigation?
YES	NO	Have you ever received any discipline for a violation of work rules?
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Address:		City, State, ZIP:	
Phone:	Date Hired:	Date Left:	Immediate Supervisor:
YES	NO	Have you ever been late for work?	How many times?
YES	NO	Have you ever been the subject of an internal investigation?	
YES	NO	Have you ever received any discipline for a violation of work rules?	
YES	NO	Have you ever been the subject of a customer / employee complaint?	
Explain any circumstances regarding investigations, discipline, and complaints:			

Driving Record / Status

How long have you been a licensed driver?			
Yes	No	Have you ever had a license in another state? If Yes, what State:	
Yes	No	Has your license ever been suspended or revoked?	
If Yes, explain:			
Yes	No	Do you have any pending traffic tickets / citations?	
Yes	No	Have you ever been cited or issued a summons for a traffic offense?	
Yes	No	Have you ever been placed on "High Risk" insurance?	
Yes	No	Have you ever been arrested or charged with a DWI or Excessive BAC offense?	

List all traffic violations, arrests, or convictions (Include Warnings).

Date	Violation	Location / Court	Police Agency

List all traffic crashes where you were the driver: Include any non-reported crashes.

Date	Location	Police Agency	INJURIES	YOUR FAULT
			Yes No	Yes No
			Yes No	Yes No
			Yes No	Yes No
			Yes No	Yes No
			Yes No	Yes No

Criminal Record

Yes	No	Have you ever been arrested, charged, or convicted of any crime?
Yes	No	Have you ever been the subject of a criminal complaint or case?
Yes	No	Have you ever been investigated for a criminal offense?
Yes	No	Have you ever been indicted by a Grand Jury?
Yes	No	Have you ever been incarcerated?

Explain any of the above circumstances regarding arrests, charges, complaints, or criminal offenses:

List all criminal violations, arrests or convictions.

Date	Violation	Location / Court	Police Agency

Police Reports: List any incidents where you were party to an official police report, complaint, or investigation (not already mentioned above). Include any incidents involving police contact.

Date	Location	Police Agency	Type of Incident

Unlawful Activity: Have you ever committed, participated, or conspired to commit any of the following serious crimes for which you were not arrested or charged?

Yes	No	Murder	Yes	No	Rape	Yes	No	Child Pornography
Yes	No	Theft	Yes	No	DWI	Yes	No	Drug Trafficking
Yes	No	Arson	Yes	No	Attempted Murder	Yes	No	Thefts over \$500.00
Yes	No	Assault	Yes	No	Manslaughter	Yes	No	Domestic Violence
Yes	No	Robbery	Yes	No	Sexual Assault			
Yes	No	Burglary	Yes	No	Prostitution			

Explain any of the above circumstances regarding criminal offenses:

List the types of illegal / controlled substances that you have ever used. Indicate how many times and when last used. Drugs include marijuana, cocaine, crack cocaine, heroin, methamphetamine, PCP, hallucinogens, opiates, steroids, non-prescribed, or other substances.

Drug	How Many Times Used	Last Time Used

Civil Suits / Orders

Yes	No	Have you ever been the subject of a protection order?
Explain:		

Financial Record / Standing

Creditor	Total Debt	Monthly Payment	Are You Delinquent?

Law Enforcement Acquaintances

Name:	Agency:
Rank:	Phone:
How known?	For how long?

Name:	Agency:
Rank:	Phone:
How known?	For how long?

Name:	Agency:
Rank:	Phone:
How known?	For how long?

Name:	Agency:
Rank:	Phone:
How known?	For how long?

Full Disclosure

Is there anything in your past or present, not specifically asked for in this questionnaire, which, if became known, would embarrass you or the Barry County Sheriff's Office? Anything which would cause you to be compromised in the discharge of your duties? Unless it is directly related to your ability to do police work, your answer to this question will not affect your application. You are being asked to fully appraise the Sheriff's Office of your background to prevent the possibility of being compromised in the future. Yes No

If "Yes", explain below in detail:

Additional Information

Yes No Have you ever applied to any other law enforcement agencies?
If "Yes", provide agency name, date, phone number, application date, and status of application:

Yes No Have you ever been the subject of a background investigation conducted by a law enforcement agency, which was considering you for employment?
If "Yes", provide agency name, date, phone number, name of the investigator, and status of the investigation:

Yes No Have you ever been rejected by or have you withdrawn from any background investigation and/or hiring process?
If "Yes", provide agency name, date, phone number, investigator name, and reason for the withdrawal or rejection:

Specialized Training or Skills

Indicate what foreign languages you speak, read, and/or write.

	FLUENTLY	GOOD	FAIR
SPEAK			
READ			
WRITE			

Social Media: List any accounts you have and your username if applicable.

Facebook:	Instagram:	Vine:
Twitter:	Tumblr:	You Tube:
Other:	Other:	Other:

Application Packet Checklist Required Documents

Required forms needed to complete background investigation.

Copy of Birth Certificate	Yes	No	N/A
Copy Naturalization Papers/Work Visa	Yes	No	N/A
Copy of Driver License	Yes	No	N/A
Copy of High School Transcripts & Diploma or GED Certificate	Yes	No	N/A
Copy of Transcripts of all College or Universities attended	Yes	No	N/A
Copy of DD-214 (long form)	Yes	No	N/A
Copy of POST Certification	Yes	No	N/A
Any additional Certificates of Training listed on your application	Yes	No	N/A

Supporting Documentation

List of Certificates and/or Awards	Yes	No	N/A
In-service Training Records	Yes	No	N/A
Copy of last two Performance Evaluations	Yes	No	N/A
Resume	Yes	No	N/A

I understand the documents above should be copies as I may not get them back.

Signature:	Date:
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Is there anything in your background, which has not been addressed, that we should know before beginning your background investigation?



Barry County Sheriff's Office

**505 East St.
Cassville, MO 65625
417-847-6556
Fax: 417-847-6422**

BACKGROUND INVESTIGATION WAIVER

Please read the following statements carefully and sign in the space provided

I certify the answers given herein are true and complete to the best of my knowledge. By my signature below, I voluntarily grant the Barry County Sheriff's Office, its officers and agents, the authority to investigate my background and all statements made in this application. I understand such inquiry as herein agreed to shall bear the utmost degree of confidentiality and will be guarded and protected from disclosure.

I respectfully request and authorize you to furnish the Barry County Sheriff's Office any and all information you may have concerning me, my work record, my reputation, my financial and credit status. This information is to be used to assist the Barry County Sheriff's Office in determining my qualifications and fitness for the position I am seeking at the Barry County Sheriff's Office.

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

Applicants Full Name Signature _____

Date: _____