Madison County Sheriff's Department

Online Application for Employment

Please print or type all information

Personal Information

Date _____

Name _____
Last First Middle Maiden

Present address _____ How long? _____
Number Street City State Zip Code

Former address _____ How long ? _____
Number Street City State Zip Code

Former address _____ How long? _____
Number Street City State Zip Code

Home Phone _____ Message or Cell Phone _____

Are you at least 18 years old? ☐ Yes ☐ No Are you at least 21 years old? ☐ Yes ☐ No

Have you ever been arrested? ☐ Yes ☐ No Have you ever been convicted of a crime? ☐ Yes ☐ No

If yes, state all charge(s), location or jurisdiction and disposition of charge(s) _____

_____

Driver's License Number _____ State of issuance _____ Expiration date _____

Have you had any motor vehicle crashes during the past three years? ☐ Yes ☐ No

Have you had any moving violations during the past three years? ☐ Yes ☐ No

Social Security Number _____

*Email Address (*required) _____

Employment Desired

Position ☐ Civilian Jail Officer ☐ Clerical ☐ Reserve Deputy ☐ Special Deputy ☐ Police Officer/Deputy ☐ Kitchen

Employment Desired ☐ Full Time only ☐ Part Time only ☐ Full or Part Time

Shifts Available to Work ☐ Days ☐ Evenings ☐ Midnights

Can you work weekends? _____ Are you presently employed? _____ Date available to work? _____

Education/ Training

Circle Highest Grade/ Year Completed

High School 9 10 11 12

College, Trade or Business 1 2 3 4

Graduate Studies _____

School	Address	Major Studies	Degree or Diploma
High School			
College/ University			
Vocational/ Business			

Additional Training/ Skills, Experience, Special Achievements or Certifications relevant to position seeking:

_____

_____

Military

Have you ever been in the Armed Forces? Yes No

Are you now a member of the National Guard? Yes No

If yes, branch of service? _____ Date of Entry _____ Date of Discharge _____

Specialty _____ Is discharge honorable? Yes No

If no, state type of discharge and an explanation? _____

_____

Personal References

Please list three references other than relatives or previous employers.

Name _____ Address _____
Street City State

Telephone _____ Occupation _____ Years Acquainted _____

Name _____ Address _____
Street City State

Telephone _____ Occupation _____ Years Acquainted _____

Name _____ Address _____
Street City State

Telephone _____ Occupation _____ Years Acquainted _____

Employment History

List all employments for the past ten (10) years, starting with the most recent position. All information must be completed. You may attach a resume, but not in place of completing the required information.

Employer _____ Address _____
Street City State

Phone _____ Type of Business _____ Supervisor _____

Employed from _____ to _____ Reason for leaving _____

Job Title _____ Duties _____

Employer _____ Address _____
Street City State

Phone _____ Type of Business _____ Supervisor _____

Employed from _____ to _____ Reason for leaving _____

Job Title _____ Duties _____

Employer _____ Address _____
Street City State

Phone _____ Type of Business _____ Supervisor _____

Employed from _____ to _____ Reason for leaving _____

Job Title _____ Duties _____

Employer _____ Address _____
Street City State

Phone _____ Type of Business _____ Supervisor _____

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Job Title _____ Duties _____

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Street City State

Phone _____ Type of Business _____ Supervisor _____

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Job Title _____ Duties _____

Employer _____ Address _____
Street City State

Phone _____ Type of Business _____ Supervisor _____

Employed from _____ to _____ Reason for leaving _____

Job Title _____ Duties _____

Certification and Authorization

The above information is true and correct. I understand that, in the event of my employment by the Madison County Sheriff's Department, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery. This application expires within one (1) year of the signature date below unless the Madison County Sheriff's Department begins the review process within that time.

I authorize the Madison County Sheriff's Department to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Madison County Sheriff's Department and will hold the Madison County Sheriff's Department and my former employer harmless from any claim made on the basis of such information. I further authorize the Madison County Sheriff's Department to obtain any credit and consumer check.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the Madison County Sheriff's Department is intended to create an employment contract between myself and the Madison County Sheriff's Department under which my employment could be terminated only for cause. I understand and agree that, if hired, my employment is probationary and terminable at will and may be terminated by me or by the Madison County Sheriff's Department at any time and for any reason. After completion of the probationary period, employment is governed by the terms and conditions of union contracts.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration reform and Control Act of 1986. The documents provided will be used for completion of Form I-9.

The Madison County Sheriff's Department strongly believes in its responsibility to provide a safe and healthful workplace for all its employees. I understand that at any time after I am hired, the Madison County Sheriff's Department may require me to submit to a physical examination to the extent permitted by law. I consent to the disclosure of the results of the physical examinations and related test to the Madison County Sheriff's Department. You should understand that you will be tested for the presence of controlled substances before you are hired as a condition of employment with the Madison County Sheriff's Department. I understand an offer of employment may be made contingent on passing a job-related physical examination. I agree to submit to a controlled substances screening and physical examination by the Madison County Sheriff's Department designated medical practitioner.

I have read, understand, and agree to the above statements and conditions of employment.

_____ _____

Signature Date