

## Deputy Sheriff Supplemental Application

Name:(Last, First, Middle):_____ DOB:_____
Social Security #:_____ Driver's License#:_____
Colorado Law requires P.O.S.T. certification in order to be considered for some positions Do you possess a current, valid certification ____Yes ____No  Certificate #:_____
Copy must be attached to this application. Failure to provide this will result in disqualification.
Answer the following questions as they apply to you <b>(attach additional sheets if necessary)</b>  Are you a U.S. Citizen? ____Yes ____No    Are you at least 21 years old? ____Yes ____No  Are you certified in First Aid & CPR? ____Yes ____No Copies of First Aid & CPR certifications must be attached Do you possess a valid Colorado Driver's License? ____Yes ____No
Please describe any experience you have had using computer for data entry, word processing, and spreadsheets, including the type of computer, type of software, and work performed on the computer.
If you are currently employed as a peace officer, submit a copy of your last annual evaluation. If you are not , submit one letter of recommendation.
Explain why you are interested in Logan County Deputy Sheriff's position
Please describe any educational and/or experience you have had which we should consider when evaluating you application:

Have you ever committed, been arrested for, charged with, or convicted of any misdemeanor or felony? \_\_\_Yes \_\_\_No

If yes, please list the dates, and jurisdiction where the action took place.

Date	Charges	Jurisdiction

Have you been arrested, charged, or convicted of any traffic violations? \_\_\_Yes \_\_\_No

If yes, please list the dates, and jurisdiction where the action took place.

Date	Charges	Jurisdiction

Has your driver's license been revoked or suspended? \_\_\_Yes \_\_\_No

Have you ever been involved in any traffic accident? \_\_\_Yes \_\_\_No

Have you ever been involved in a hit and run? \_\_\_Yes \_\_\_No

If yes, please describe nature and date

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Have you ever used excessive physical force against another person \_\_\_Yes \_\_\_No

If yes, please describe nature and date

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Have your wages ever been garnished? \_\_\_Yes \_\_\_No

If yes, please describe nature and date

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Have you ever been involved in a domestic violence dispute (i.e.spouse, boyfriend, or girlfriend?)  
 Yes  No

If yes, please describe nature and date.

Has a complaint ever been lodged against you by a customer, child, parent, citizen, neighbor, or co-worker?  Yes  No

If yes, please describe nature and date.

Have you ever tried or used any illegal drugs, including marijuana or it's derivatives?  Yes  No

If yes, please describe nature and date.

Have you ever been delinquent on income or other tax payments?  Yes  No

If yes, please describe nature and date.

Have you ever falsified your credit information to get money?  Yes  No

If yes, please describe nature and date.

Have you ever knowingly written any checks when you knew you didn't have enough money in your account to cover them?  Yes  No

Have you ever falsified an official report or document? \_\_\_ Yes \_\_\_ No  
If yes, please describe nature and date of incident.

Have you ever taken anything, including money and/or merchandise from a place where you worked without permission? \_\_\_ Yes \_\_\_ No If yes, please describe nature and date of incident.

Have you ever left work without permission? \_\_\_ Yes \_\_\_ No  
If yes, please describe nature and date.

Have you ever taken unauthorized breaks at work? \_\_\_ Yes \_\_\_ No  
If yes, please describe nature and date.

Have you ever slept on a job without permission? \_\_\_ Yes \_\_\_ No  
If yes, please describe nature and date.

Have you ever called in sick for work when you weren't sick? \_\_\_ Yes \_\_\_ No  
If yes, please describe nature and date.

Have you ever used company tools or materials, without permission for personal gain?  
\_\_\_ Yes \_\_\_ No  
If yes, please describe nature and date.

**AUTHORIZATION  
FOR  
BACKGROUND INFORMATION AND INVESTIGATION**

I authorize the Logan County Sheriff's Office to make an investigation of my personal history, financial history, credit record through any investigation or credit agencies or bureaus the the County may choose. I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry may include information as to my character, employment, general reputation, and personal characteristics. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this background information and investigation. To the extent authorized by law, I shall indemnify, save and hold harmless the County, its employees and agents, against any and all claims, damages, liability and court awards including costs, expenses, and attorney fees incurred as a result of, or in connection with, this background information and investigation. A copy of this document may be considered as valid as the original.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date