



OFFICE of the SHERIFF

McDuffie County
P. O. Box 360
751 Public Safety Drive
Thomson, GA 30824
Telephone (706) 595-2040
Fax (706) 595-2043



Dear applicant:

I am pleased that you have decided to apply for employment with the McDuffie County Sheriff's Office. Should you be selected for employment, you will find that the employees of the agency are highly motivated, career oriented, competent men and women with high ethical standards, who provide the entire range of law enforcement services to the community.

Therefore, we have established very high standards for our 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 equal opportunity to everyone regardless of race, creed, color, gender, national origin, age or disability. All eligible applicants will be afforded the same opportunity for employment selection. Accordingly, should you be disabled, you may request any reasonable accommodation in order to further participate in the application process by contacting Major A. R. Williamson at (706) 595-2040.

To be considered for employment, applicants must meet the following minimum qualifications: Applicants must be at least 21 years of age for sworn positions or 20 years of age for civilian positions, possess a high school diploma or GED, possess a valid driver's license, honorable discharge (if prior military), and have no adverse driving record nor felony convictions, possess proof of Selective Service Registration, if required.

The hiring process includes but is not limited to the following: Passing an adult basic education test, passing a physical agility test, intensive background investigation, polygraph examination, oral interview and following a conditional job offer, medical examination, and drug screen. The entire selection process takes approximately 45-60 days from the date of the written test.

If you fail to pass the written competency test or physical agility test, you may re-apply. Any subsequent failure of these tests will disqualify you from further consideration of employment with the McDuffie County Sheriff's Office.

It is essential that you follow all directions provided. The application process requires you to provide much detailed information about yourself. Because we are a public safety organization, we must have accurate and extensive information upon which to base our employment decisions so that we can properly serve the citizens of McDuffie County. Should you have any questions, please contact Major A. R. Williamson at (706) 595-2040.

Due to the number of applications for employment we receive you will only be contacted if the McDuffie County Sheriff's Office is interested in your application.

Sincerely,
Sheriff Logan Marshall

**OFFICE of the SHERIFF
McDuffie County**

P.O. Box 360
751 Public Safety Drive
Thomson, GA 30824

Telephone: (706) 595-2040
Fax: (706) 595-2043
www.co.mcduffie.ga.us

APPLICATION FOR EMPLOYMENT

Position: Deputy Jailer Communications Officer Civilian Date: _____

Please print or type. Use black ink.

PERSONAL INFORMATION		
Name:		Social Security No:
(Last)	(First)	(Middle)
List Any Alias Names Used i.e. maiden names, nicknames etc. _____		
Present Address:		
(County)		(State) (Zip code)
County of Residence: _____	Birth date: _____	Place of Birth _____
Home Telephone: () _____	Business Telephone: () _____	
Person to contact in case of emergency:		
Are you willing to work shift work (nights, holidays, weekends, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you object to wearing a uniform? <input type="checkbox"/> Yes <input type="checkbox"/> No		
EDUCATION		
Are you a high school graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes please list below.		
If no circle the highest grade completed 5 6 7 8 9 10 11 12		
If not a high school graduate, do you have a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No		
School	Name and location of school (address) and dates attended	Completed
High School		9 10 11 12
Business/Technical School		1 2 3 4
College		1 2 3 4
Graduate School		1 2 3 4

GENERAL INFORMATION

Have you ever been employed by or applied with the McDuffie County Sheriff's Office? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes when?	Position
Are you related to anyone currently employed by the McDuffie Sheriff's Office? <input type="checkbox"/> Yes <input type="checkbox"/> No	Relative's Name	Relationship	Position
How did you learn of this opening?	Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		
In accordance with the Immigration Reform 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.			
Have you ever been convicted of, or plead guilty or Nolo to a felony or misdemeanor, other than a minor traffic violation? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes please attach a written statement that answers what, where, when, the specific circumstances surrounding the event as well as the outcome.			
Active Military Service (list date, serial or service number for all active service)			
From _____ to _____ Serial Number _____ Branch of Service			
Discharge type:			
Are you now or have ever been an active member of any branch of the U.S. Reserve Forces or National Guard? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type and branch?			
Have you ever possessed, sold, manufactured, used or delivered illegal drugs or marijuana? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever illegally possessed, sold, manufactured, used or delivered legal prescription medication? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you answered yes to either of the above statements concerning drug use, answer the following question: Used: <input type="checkbox"/> Possessed: <input type="checkbox"/> Sold: <input type="checkbox"/> Manufactured: <input type="checkbox"/> Delivered: <input type="checkbox"/> Type of Drug(s):			
Date(s) used, possessed, sold, manufactured, or delivered:			
Number of times used, possessed, sold, manufactured, or delivered:			
Are you a graduate of a police mandate school or academy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, location:			

DRIVING HISTORY

Do you have a valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No	Which State?	Driver's License Number.	Date of Expiration
--	--------------	--------------------------	--------------------

Have you ever been licensed to drive in another state? Yes No
 If Yes indicate which state(s). Operator's License Number:

Have you incurred any traffic charges within the last three (3) years? Do not include Parking tickets.
Yes No If yes, give date(s) and type of charges:

I hereby authorize the Department of Public Safety of Georgia, or any other authorized agency to whom this authorization may be presented, to release to the McDuffie County Sheriff's Office and abstract of my driving record for use in processing my employment application.

Signature _____ Date _____

PERSONAL REFERENCES

Please list five references. These are people you have known for at least 4 years which are not former employers, relatives, or people with whom you are living.

Name	Address		
Occupation	Phone Work	Home	
Name	Address		
Occupation	Phone Work	Home	
Name	Address		
Occupation	Phone Work	Home	
Name	Address		
Occupation	Phone Work	Home	
Name	Address		
Occupation	Phone Work	Home	

WORK HISTORY

Describe your work history with your current or most recent job. Include military and unpaid experience. Failure to give complete information regarding each job held may result in your disqualification. Complete addresses with phone numbers of all employers are necessary.

Most recent employer: _____

Address: _____

City: _____ State/Zip _____ Phone# _____

From _____ / _____ To: _____ / _____ Salary: _____ / _____
Month Year Month Year Beginning Ending

Job Title: _____ Supervisor's Name _____

Reason for leaving or considering change: _____

Duties: _____

2ND recent employer: _____ Address: _____

City: _____ State/Zip _____ Phone Number: _____

From _____ / _____ To: _____ / _____ Salary _____ / _____
Month Year Month Year Beginning Ending

Job Title: _____ Supervisor: _____

Reason for leaving or considering change _____

3rd recent employer: _____ Address: _____

City _____ State/Zip: _____ Phone Number: _____

From: _____ / _____ To: _____ / _____ Salary _____ / _____
Month Year Month Year Beginning Ending

Job Title: _____ Supervisor: _____

Reason for leaving or considering change: _____

Duties: _____

APPLICANT'S STATEMENT/CONSENT WAIVER

I certify that I have read and understand all questions and instructions in this application, and that my answers are true and complete. I understand that this application is **not an offer of or a contract for employment.**

I understand that any untrue statement in this application may result in my dismissal any time during my employment with the McDuffie County Sheriff's Office. I understand that any intentional false statement will result in the disqualification of my application and/or prosecution for the offense of False Swearing (Ga. Code Section 16-10-71) punishable by a maximum fine of \$1000 plus imprisonment for not less than one nor more than five years or both. I further understand any erroneous answer given by me 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 not to do so and my application will be terminated.

I hereby authorize the McDuffie County Sheriff's Office to receive any Criminal/Driver's History Record information, pertaining to me which may be in the files of any State or Local Jurisdiction. I also respectfully request and authorize all information that may be concerning my employment record, my educational record, my reputation and my financial/ status be released to the McDuffie County Sheriff's Office. I request that all records pertaining to my military service, to include undeleted DD214 forms be released to the McDuffie County Sheriff's Office. You may include all information of a confidential or privileged nature and any photocopies or facsimile of the same, if required.

This information will be used to assist the McDuffie County Sheriff's Office in determining my qualification and fitness for the position I am seeking with this agency. I hereby release you, your organization and/or others from liability which may result from furnishing the information I have requested above. A PHOTOCOPY of the release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I understand résumés, letters of reference, etc., submitted with the application become property of the McDuffie County Sheriff's Office and cannot be returned. The information I have provided on the application is subject to public disclosure under the Georgia Open Records Act.

By signing this application, I hereby acknowledge that I have read, understand, and agree to all provisions outlined herein.

Applicant's Signature

Date

STATE OF GEORGIA

COUNTY OF MCDUFFIE

Before me appeared _____, who says that he/she executes the above statement of his/her own free will and accord, with full knowledge of the purpose thereof.

Sworn to me and subscribed in my presence this _____ day of _____ 19_____.

Notary Public
My commission expires: _____

POLYGRAPH EXAMINATION

Prior to being employed with the McDuffie County Sheriff's Office, you will be required to pass an extensive background investigation. Part of this investigation will include a polygraph examination, a criminal background check, driver's history check, employment history check, a references check, credit check, verification of diplomas and or certificates, a medical examination, and interviews of known associates and neighbors.

Following an interview with the background investigators, you may be asked to take a polygraph examination. Polygraph questions may come from any of the following areas of the application:

1. Criminal history
2. Drug use
3. Driver's history
4. Work history
5. Alcohol use
6. Gambling
7. Honesty in filing out the application for employment
8. Honesty in completing the background investigation's booklet