

COMMUNICATIONS/ADMINISTRATIVE APPLICATION



MCKENZIE COUNTY SHERIFF'S OFFICE



Congratulations on your application to become a law enforcement member of the McKenzie County Sheriff's Office. The McKenzie County Sheriff's Office is a modern law enforcement agency utilizing the latest in technology to effectively investigate, deter, and apprehend criminals. Working with other city, state, and federal agencies that operate in the confines of the county, we dedicate ourselves 24/7 to ensure the safety and security of the citizens of McKenzie County. The McKenzie County Sheriff's Office is committed to promoting individual responsibility and community commitment; we will work together to resolve problems, reduce crime, and provide a safe environment for our residents and visitors.

THIS IS YOUR APPLICATION!

An applicant who is a resident of North Dakota and eligible to claim veteran's preference must abide by the Department of Veterans Affairs guidelines available at www.nd.gov/veterans/benefits/veterans-preference-state/documentations-required-applicant and submit any documentations with an otherwise complete application.

McKenzie County is an equal opportunity employer.

The Packet MUST be executed by the applicant and completed by printing in blue ink. The packet may be submitted by mail, email, or hand delivered to (no picture copies of the application will be accepted):

McKenzie County Human Resources 201 5th ST NW, SUITE 700 Watford City, ND 58854 <u>hr@co.mckenzie.nd.us</u>

McKenzie County Sheriff's Office 1201 12th St SE SUITE B Watford City, ND 58854 <u>sheriffjobs@co.mckenzie.nd.us</u>



Minimum Requirements:

To be eligible for appointment to the McKenzie County Sheriff's Office an applicant must:

- Be of excellent moral character
- Obtained a High School Diploma or GED
- Be at least 18 years of age
- Possess a valid driver's license
- Pass background investigation
- Pass oral review board
- ND POST Licensed or ND POST License eligible
- Must be a U.S. citizen or Naturalized Citizen
- No misdemeanor convictions within the last 3 years
- No domestic violence convictions
- No felony convictions

A resume with cover letter must be submitted with this application. It is the requirement of the applicant to fully complete this packet before submission. Failure to complete the necessary requirements pertaining to background investigations will disqualify the applicant from further consideration.

Should additional space be necessary, use the continuation sheets at the end of this packet. Label each entry so that it corresponds with the section title and page number in this packet. This packet is **<u>CONFIDENTIAL</u>** and will only be reviewed by investigative personnel, the Oral Review Board, and the Human Resources Office of McKenzie County. <u>NO</u> material can be released from this packet to any agency or individual without the written release from/by the applicant.

It will be required of the applicant to submit the following <u>COPIES.</u> (<u>DO NOT SEND IN ORIGINAL</u> <u>DOCUMENTS):</u>

- Driver's license and/or passport
- Social security card



DISCLOSURE AUTHORIZATION AND CONSENT FORM

We welcome your application with McKenzie County. This document serves solely as a clear and conspicuous written disclosure as required by the Federal Fair Credit Reporting Act set forth in Section 604(b) to the applicant that a social security number trace, motor vehicle verification, education, previous employment, credit and a criminal background verification. In addition, investigative consumer reports gathered from personal interviews with former employers and other past or current associates of mine to gather information regarding my work performance, character, general reputation, and personal characteristics may be obtained for the purpose of this employment application. By the signature below, the Applicant acknowledges that McKenzie County has made this disclosure.

APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

This release and authorization acknowledges McKenzie County may now, or any time while I am employed/training, conduct a verification of my education, previous employment/work history, credit history, contact personal references, motor vehicle records, conduct drug testing, and to receive any criminal history information pertaining to me which may be in the files of any Federal, State, or Local criminal justice agency, and to verify any other information deemed necessary to fulfill the job requirements pursuant to North Dakota Public Access Record Laws and/or the Freedom of Information Act (28 C.F.R. Part 16). The results of this verification process will be used to determine employment/training eligibility under McKenzie County employment/training policies. In the event that information from the report is utilized in whole or in part in making an adverse action decision with regard to your potential employment/training, before making the adverse decision, we will provide you with a copy of the report and a description in writing of your rights under the law.

I HAVE READ AND UNDERSTAND THIS DISCLOSURE, AND I AUTHORIZE THE BACKGROUND VERIFICATION.

I authorize person, schools, current and former employers, and other organizations and Agencies to provide McKenzie County with all information that may be requested. I agree that any copy of this document is as valid as the original. According to the Federal Fair Credit Reporting Act, I am entitled to know if employment/training was denied based on information obtained by my prospective employer/training program and to receive a disclosure of the public record information and of the nature and scope of the investigative report.

Applicant Information						
Full Last Name	Full First Name		Full Middle Name	Date	e of Birth	
Alias or Nickname			Alias or Nickname			
Street Address		C	ity	S	State	Zip
Home Phone		C	ell Phone			
Social Security #	Signature			Date		



Application for Position of:	Date:

General Instructions: Please print the required answers to every question. If the question does not apply to you, you may answer "N/A". **If the space available for an answer is insufficient, use the continuation sheets located in the back of this packet.** Remember to precede each answer with the section title and page number. Make every effort to answer every question completely. DO NOT misstate, misrepresent, or omit any material fact since the statements made herein are subject to verification to determine your qualification for employment.

PERSONAL

Last Name:		First Name	2:	Middle Name:
Alias or Nickname:				
Have you ever changed	your name: Yes	No	If yes, complete	the following:
Previous Name:			Effecti	ve Date:
Reason for Change:				
Current Street Address	City:			State: Zip Code:
Current Mailing Addres	s: City:			State: Zip Code:
Date of Birth:	Place of Birth (Cit	τy, State, Coι	intry):	
Home Phone:	Cell Phone:		Other Phone:	
Email:		·	US Citizen: Yes	No



PAST AND PRESENT EMPLOYMENT

List all of your employment history for the past ten (10) years. Begin with your current employer first then working backwards, to include all periods of unemployment, internships, military and volunteer positions. Please be specific with dates and addresses. Contact with your present, as well as past employers, is a part of every applicant's background investigation. Knowing this, if you, as an applicant, have any concerns convey them to your investigator.

	Name & Address of Company &	Fr	om		То	Starting	Ending Hourly	Name of
	Type of Business	Мо	Yr	Мо	Yr	Hourly Wage	Wage	Supervisor
		1.1.00.	1 (D		/D //			
		Job Tit	le/Desc	ription	/Duties			
Ι								
	Telephone	Reaso	n for Lea	iving:				
	List one person who you worked	with du	iring thi	s emplo	vment:	Contact Number	•	
	1 5		0	1	5			
	Name & Address of Company &	Fr	om		То	Starting	Ending Hourly	Name of
	Type of Business	Мо	Yr	Мо	Yr	Hourly Wage	Wage	Supervisor
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	Telephone	Reaso	n for Lea	iving:				
	List one person who you worked	with du	iring thi	s emplo	yment:	Contact Number	:	
	Name & Address of Company &	Fro	m	Т	o	Starting	Ending Hourly	Name of
	Type of Business	Мо	Yr	Мо	Yr	Hourly Wage	Wage	Supervisor
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	Telephone	Reaso	n for Lea	wing				
		i neuso						
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	List one person who you worked		iring thi	s emplo	yment:	Contact Number	:	



PAST AND PRESENT EMPLOYMENT (cont'd)

	Name & Address of Company	From	То	Starting	Ending	Name of		
	& Type of Business	Mo Yr	Mo Yr	Hourly Wage	Hourly Wage	Supervisor		
		Job Title/Des	cription/Duties					
V								
	Tolorhous	Decor for La						
	Telephone	Reason for Le	aving:					
	List one person who you worke	l d with during th	us employment.	Contact Number:				
			ile empregnient.	Contact Hampe				
	Name & Address of Company	From	То	Starting	Ending	Name of		
	& Type of Business	Mo Yr	Mo Yr	Hourly Wage	Hourly Wage	Supervisor		
	Job Title/Description/Duties							
VI								
	Telephone Reason for Leaving:							
	1		0					
	List one person who you worke	d with during th	is employment:	Contact Number	r:			
	Name & Address of Company	From	То	Starting	Ending	Name of		
	& Type of Business	Mo Yr	Mo Yr	Hourly Wage	Hourly Wage	Supervisor		
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		Job Title/Des	cription/Duties					
VII								
	Telephone	Reason for Le	aving					
	relephone		aving.					
	List one person who you worke	d with during th	is employment:	Contact Number:				
	List one person who you worked with during and employment.							
	Name & Address of Company	From	To	Starting	Ending	Name of		
	Name & Address of Company & Type of Business	From Mo Yr	To Mo Yr	Starting Hourly Wage	Ending Hourly Wage	Name of Supervisor		
		Mo Yr	Mo Yr					
		Mo Yr						
VIII	& Type of Business	Mo Yr Job Title/Dese	Mo Yr cription/Duties					
VIII		Mo Yr	Mo Yr cription/Duties					
VIII	& Type of Business Telephone	Mo Yr Job Title/Dese Reason for Le	Mo Yr cription/Duties aving:	Hourly Wage	Hourly Wage			
VIII	& Type of Business	Mo Yr Job Title/Dese Reason for Le	Mo Yr cription/Duties aving:		Hourly Wage			
VIII	& Type of Business Telephone	Mo Yr Job Title/Dese Reason for Le	Mo Yr cription/Duties aving:	Hourly Wage	Hourly Wage			



PAST AND PRESENT EMPLOYMENT (cont'd)

Have you ever resigned (quit) from a job by mutual agreement following allegations of misconduct? If yes, explain.

Have you ever walked off (left) a job without giving proper notice? If yes, explain.

Have your ever resigned (quit) from a job by mutual agreement following allegations of unsatisfactory work performance? If yes, explain.

Are you currently under investigation by your current employer that could result in disciplinary action being taken against you? If yes, explain.

Have you ever been discharged (fired), asked to resign, furloughed, or put on inactive status for cause, or subjected to disciplinary action while in any position? If yes, give name and address of employer, approximate date, and reason for each case.

Have your ever resigned (quit) after being informed your employer intended to discharge (fire) you for any reason? If yes, give name and address of employer, approximate date, and reason for each case.





EDUCATION

School	Name and Address of School	Course of Study	Number of	Did you	Diploma/Degree &
High	501001		Credits	Graduate Yes:	GPA/GED Score
0				Date:	
				No:	
College				Yes: Date:	
				No:	
Other (specify)				Yes: 🔲 Date:	
				No:	
If your major wa	s not Criminal Justice/Law Er	nforcement, how man	y police relate	d courses have y	ou taken?
Have you ever be explain.	een suspended, expelled, or p	laced on academic pr	obation from a	ny school or edu	cational facility? If yes,
expiaii.					
	ational, business, or military	schools by name, loca	ation, dates att	ended, subjects s	studied, and certificates
issued.					



SPECIAL QUALIFICATIONS AND SKILLS

Indicate type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued, and date current license expires. (This section does not apply to vehicle operator's license.)

Special skills you possess and machines and equipment you can use. For example, computer, software programs, scanner, photography or other.

Special qualifications not covered in application. For example, your most important publications (do not submit copies unless requested); your patents or inventions; public speaking and publications experience; membership in professional or scientific societies; and honors and fellowships received.

Typing — approximate number of words-per-minute:



LAW ENFORCEMENT APPLICATIONS

List all law enforcement/security guard/dispatch positions with a city, county, state, special					
district, regional, or federal government for which you have applied. Includes agencies for which					
you have worked as a "reserve officer".					
A. Agency and Location: Date:					
Position/Classification:					
What steps did you complete? (check all that apply) Application Only Oral Interview					
Background Investigation Polygraph Other (please specify)					
What is the status of your application? Still being considered for hire No longer being considered for hire					
If you were not hired, what reason was given to you?					
B. Agency and Location: Date:					
Position/Classification:					
What steps did you complete? (check all that apply) Application Only Oral Interview					
Background Investigation Polygraph Other (please specify)					
What is the status of your application? Still being considered for hire No longer being considered for hire					
If you were not hired, what reason was given to you?					

POST LICENSE

Are you currently P.O.S.T. (Peace Officer Standards and Training) certified? Yes No							
Have you ever been certified as a law enforcement officer? Yes No							
P.O.S.T. License #	P.O.S.T. License #						
Agency:	City, State:	Date From:	Date To:				



RESIDENCES

You are required to list all of your residences for the past 10 (ten) years. You must provide complete addresses including zip codes. Investigators will not search for this information. Incomplete information could slow down your process or cause your removal from consideration. Be sure to include all college addresses and military addresses.

Street Address (City, State & Zip Code)	From:	To:	Rent/Own	Name/Contact Number for Landlord
Have the Police ever been called to any home/r agency(s), and disposition(s).	esidence in wl	hich you have	ever resided? If yo	es, provide date(s), reason(s),





MILITARY SERVICE

Have you served in the U.S. Military Service or Military Service from any other foreign nation?	Branch:
	From: To:
Deck court or by summary, special, or general court-martial court or court-martial, charge and action taken for each incide	
Yes: No: Type of Discharge:	Rank at time of Separation:
Type of Discharge.	Raine de de de paradon.
Were you ever court-martialed under the Uniformed Code o disciplinary action(s) while serving in the Armed Forces? If y	
Have you ever been reduced/demoted in rank? If yes, explai	n.
Have your ever received company punishment? If yes, explain	in
Were you ever confined/detained in a brig, stockade, guardh	nouse, or jail while in the military? If yes, explain.
Commanding Officer (Current if still enlisted or last Comman	nding Officer if discharged).
Rank: Name:	Contact Number:
Reserve/Guard Information	
Grade or Service Number:	Service and Component:
Organization and Station or Unit and Location:	Active: Inactive: Standby:
Indicate Reserve Obligation, if any:	indutor buildbyr
Selective Service Information	
Selective Service Number:	Date of Last Classification:
Local Board:	Address:





CHARACTER REFERENCES

List three (3) people that you have known for three (3) years or more. Do not include relatives by blood or by marriage, former employers, or persons living outside the United States or its territories. Do not repeat names of supervisors, or anyone already listed in this packet.

Name	Years Known	Address	Occupation	Phone Number

PERSONAL REFERENCES

List three (3) personal friends with whom you associate frequently, including boyfriends and/or girlfriends, who are not listed anywhere else in this packet.

Name	Years Known	Address	Occupation	Phone Number





LAW ENFORCEMENT REFERENCES

If applicable; list four [4] people who are family, friends, or relatives that are currently employed by a law enforcement or protective agencies. This can also include current members of the McKenzie				
County Sheriff's Office, or past members of the McKenzie County Sheriff's Office.				
Name:	Address:			
Home Phone:		Cell Phone:		
Department Name:				
Department Address:				
His/Her Title:	ŀ	How long employed:		
Name:	Address:			
Home Phone:	0	Cell Phone:		
Department Name:				
Department Address:				
His/Her Title:	ŀ	How long employed:		
Name:	Address:			
Home Phone:	0	Cell Phone:		
Department Name:				
Department Address:				
His/Her Title:	ŀ	How long employed:		
Name:	Address:			
Home Phone:	C	Cell Phone:		
Department Name:				
Department Address:				
His/Her Title:	H	How long employed:		



CONTINUATION SHEETS

Page No	Narrative



CONTINUATION SHEETS

Page No	Narrative



CONTINUATION SHEETS

Page No	Narrative



SIGNATURE PAGE

I understand and acknowledge that all information and all entries made by me in response to the requested information contained within this application are true, complete, and correct to the best of my knowledge. I further understand that if at any time during the course of the background investigation or anytime during the course of my employment with the McKenzie County Sheriff's Office, it is discovered that I have made untruthful statements, falsified my employment application form, given or provided misleading statements, or deliberately omitted or failed to provide required information with the intent to deceive or mislead, it shall be cause for my immediate termination/discharge from the employment process and /or employment with the McKenzie County Sheriff's Office.

I certify that there are no fraudulent misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

I authorize the companies, schools, or persons named herein to give any information regarding my employment, character, and qualifications. I hereby release these companies, schools, or persons from all liability for any damage for issuing this information.

Signature of Applicant

Date



IMPORTANT!

As a part of the application process, it will be required of the applicant to submit the following documents to the background investigator (if applicable):

- Certified birth certificate
- High school diploma or equivalency certificate
- All college, technical school, and/or police academy diplomas and transcripts
- Official copy of college transcripts (Transcripts can be sent from the institution to the McKenzie County Sheriff's Office at 1201 12th St SE STE B, Watford City, ND 58854.
- Military discharge DD214 (Long Form- Member 4)
- Naturalization papers
- Marriage license, divorce decree, name change documentation
- Prior law enforcement training certificates or training rosters

The full background is a requirement prior to employment. Please take the time to start gathering this information to provide to the background investigator that will be assigned to your application process.

The application process will include the following steps:

- Application
- Initial Background
- Oral Review Board (Interview)
- Completion of Background Questionnaire (Separate from Application)
- Full Background
- Conditional Offer of Employment
- Psychological Evaluation
- Medical Examination
- Offer of Employment

This document is for your records and does **<u>not</u>** need to be returned as a part of the application.

The hiring process may be extensive as the McKenzie County Sheriff's Office is always looking for applicants to be of excellent moral character.