



ARCHULETA COUNTY SHERIFF'S OFFICE
Richard Valdez, Sheriff

Application For Employment

Equal Employment Opportunity/Affirmative Action Employer

The Archuleta County Sheriff's Office is an Equal Opportunity Employer and does not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding an applicant from consideration on a basis prohibited by local, state or federal law. Equal access to employment services and programs is available to all persons.

Mail to: Archuleta County Human Resources, P.O. Box 1507
Phone (970- 264-8375 / Fax (970) 264-8306 / e-mail rsmith@archuletacounty.org

Date: _____

Position Applying For: _____

Name (please type or print): _____

Last

First

MI

Mailing Address: _____

Street

City

State

ZIP

Home Phone: _____ Cell Phone: _____

E-mail: _____

Minimum Qualifications

All Positions:

- Must have no record conviction of a misdemeanor in the first degree, any felony or violent crime.
- Must have a valid Colorado driver's license at the time of hire.
- After receiving Conditional Offer of Employment, be able to pass a pre-employment drug test and background investigation.
- Must be able to perform the essential job functions of the position with or without reasonable accommodation.

Patrol Deputy:

- Applicant must be no less than twenty-one (21) years of age by the application deadline.
- Applicant must be Colorado POST certified or eligible for certification.
- Applicant must be a high school graduate or equivalent
- Applicant after receiving Conditional Offer of Employment must be able to pass a pre-employment drug test, physical, psychological evaluation and background investigation.

Detention Officer:

- Applicant must be a high school graduate or equivalent
- Applicant after receiving Conditional Offer of Employment, must be able to pass a pre-employment drug test, physical, psychological evaluation and background investigation.

Required Examinations:

- Oral Interview
- Written Assessment Examination (Patrol Deputy and Detention Officer)
- Written Psychological Assessment (Patrol Deputy and Detention Officer)
- Functional Capacity Exam (Patrol Deputy and Detention Officer - upon conditional offer of employment)
- Pre-employment drug test (all positions – upon conditional offer of employment)
- Physical Agility Assessment (Patrol Deputy & Detention Officer – upon conditional offer of employment)
- Background Investigation – including but not limited to contact with the applicants former employers, associates, neighbors and other pertinent sources. Applicants' military history, school records, police records and driving record will be researched.
- Interview with the Sheriff.

Special Notes:

Copies of the items listed below shall be attached to this application.

- Colorado P.O.S.T Certification (for Patrol Deputy positions)
- Other documents such as certificates, College Diploma and letters of reference may be included to demonstrate applicants additional qualifications.

Work Schedule: All employees are required to work the time periods and/or shifts, rotational and/or stationary, and assignments consistent with the needs of the Sheriff's Office.

Duty Assignments: All applicants hired by the Sheriff serve at the will and pleasure of the Sheriff (Colorado Statute §30-10-506) and may be assigned to any of the interdepartmental divisions, sections or units at the discretion of the Sheriff or his appointed representative.

AN IMPORTANT MESSAGE ABOUT TRUTHFULNESS...

One of the fundamental requirements of working in law enforcement is the ability of an individual to adhere to and demonstrate the highest legal and ethical standards. The Archuleta County Sheriff's Office has an unwavering stand on untruthfulness and dishonesty that can result in the dismissal of an employee who engages in such misconduct.

The same standard applies to the hiring process. Unfortunately, it is our experience that a number of applicants in each hiring process will fail due to such misconduct.

If you are untruthful, dishonest, knowingly omit, falsify, conceal or obscure required information, or engage in any similar misconduct or deception during any part of the application and hiring process, you may be permanently disqualified from being employed by the Archuleta County Sheriff's Office. Information regarding a candidate's disqualification may also be made available to other law enforcement agencies with an authorized request.

The following factor and/or behaviors are considered to disqualify for consideration and or employment with the Archuleta County Sheriff's Office. If the candidate has been involved or participated in any of the following behaviors the candidate should stop the application process at this time. This list is not inclusive. A candidate or employee may also be disqualified from employment if the totality of their circumstances indicates that they would not be suitable as a Sheriff's Office Employee.

DISQUALIFYING FACTORS / BEHAVIORS

BIOGRAPHICAL

- Falsification or omission of any part of the application packet
- False information regarding age/date of birth
- Falsification or omission of information regarding current or past addresses
- Falsification or omission of information regarding relatives employed by the County

EMPLOYMENT HISTORY (includes school and military)

- Fabrication of any information related to a job
- Failure to list any job on application packet
- Failure to report a discharge, forced termination or resignation for any reason
- Failure to report employment discipline, including written warnings, reprimands, etc., or court-martial (if in the military)

WORK AVAILABILITY

- Refusal to work paid overtime, all shifts, all days of the week, and on holidays, as evidenced in past jobs

FINANCIAL RESPONSIBILITY

- Any checks intentionally written on a closed account
- Two or more separate incidents within the past 5 years of being convicted of or having wages garnished for failure to pay child support
- Failure to pay taxes

INTEGRITY

- Taking of items and/or money without permission (added together) of over \$100 from an employer within the past 3 years (includes military)
- Any incidents of misdemeanor shoplifting, or accessory to shoplifting, whether caught or not, within the past 3 years
- Giving perjured, sworn testimony at any time
- Giving false statements or making falsified reports as a law enforcement officer
- Offering or paying a bribe
- Soliciting or accepting a bribe at any time as a law enforcement officer

DRUG BEHAVIOR

- Illegal use of marijuana within the past 18 months
- Under the effects of medical marijuana while at work
- Use of any illegal drug, except marijuana, within the past 3 years (includes speed, heroin, cocaine, PCP, mushrooms, prescription drugs, etc.)
- Use of any illegal drug, on or off duty, while employed as a law enforcement officer
- Any sale, manufacture or distribution of any illegal drug, including marijuana, within the past three years. If beyond 3 years, the following factors should be considered: The frequency of the behavior; the quantity of drugs involved; and the type of drug.
- Deliberate abuse of prescribed controlled substances within the past 3 years
- Refusal to agree to submit to “pre-employment” drug screening as an applicant or “reasonable suspicion” drug testing as an employee

ALCOHOL BEHAVIOR

- Unauthorized consumption of alcoholic beverages while on duty as a law enforcement officer, as evidenced in past jobs
- Refusal to agree to submit to post-offer, pre-employment alcohol screening as an applicant or reasonable suspicion alcohol testing as an employee
- Any pattern of excessive alcohol abuse

CRIMINAL BEHAVIOR

- Any felony committed will be an automatic disqualifier unless as an adult the felony was committed as a juvenile. (An adult applicant committing a felony as an adult would be disqualified. If an adult committed a felony as a juvenile, the following circumstances will be considered: The applicant's age at time of the illegal act and the nature and severity of the offense.)
- Any misdemeanor crime commission (excludes marijuana-related misdemeanors or those involving unlawful use of physical force) within the past 3 years, whether arrested and charged or not
- Certain misdemeanor crime convictions, as defined by P.O.S.T., which would affect peace officer certification in Colorado. Visit the POST website at www.ago.state.co.us/post/misdemeanors.pdf for a list of misdemeanors that will preclude patrol certification

DRIVING HISTORY

- Any DUI convictions within the past 3 years
- Any DWI convictions within the past 3 years
- Any license suspensions/revocations within the past 3 years
- An applicant must not have a noticeable pattern of traffic arrests, citations and/or convictions within the last 3 years. Stop sign violations, red light violations, reckless driving, speeding and careless driving are just a few examples of traffic violations that could disqualify an applicant if he/she has developed a pattern.
- Any hit and run accidents within the past 3 years
- Failure to produce a current, valid driver's license
- Failure to show proof of liability insurance (Colorado drivers), if applicant owns a vehicle

CERTIFICATION/ELIGIBILITY

- Falsifying documentation of a college degree, transcript or specialized training
- Falsifying documentation of law enforcement certification

I have reviewed the disqualifying behavior list and declare that I do not meet any of the disqualifying behaviors listed on this sheet.

Applicant

Date

Instructions

Do not misstate or omit material facts since the statements made herein are subject to verification to determine your qualifications for employment. Any false or misleading information will result in your application being rejected. Once submitted, this application becomes the property of the Archuleta County Sheriff's Office.

Completed applications must be returned to the Archuleta County Human Resources Department on or before the closing date of the position posting.

Every section of the application must be completed in order for the Archuleta County Sheriff's Office to accept the application as complete. If a particular question does not apply to you, answer the question with N/A. If the space is insufficient, use an additional page to proceed with the number of the referenced block.

Correctness, validity, and content of your answers are subject to investigation.

Answer all questions completely. If a question is not applicable, write "N/A". Write "Unknown" if you do not know the answer and cannot obtain the answer from your records.

Type or print legibly. Illegible forms will not receive consideration. It is imperative that all information is accurate and up-to-date. Information on names, telephone numbers, complete addresses (including city, state and zip code) references must be correct in order to process your application.

Attached copies of your high-school diploma or GED, college transcripts and/or diploma, Military form DD214 and applicable P.O.S.T. documents.

Please circle the correct answer to the following questions. If you answer “yes” to any question you must provide additional information about the circumstances, including dates. Attach additional pages if necessary. A “yes” answer may not automatically bar an applicant from employment; however, you must provide detailed information about each “yes” response. Failure to provide the information requested will disqualify you from the process.

Have you ever:

- 1. Been arrested or charged by any court of a criminal offense, misdemeanor or felony? Yes or No
- 2. Used any illegal drugs in the last 2 years? Yes or No
- 3. Used any hallucinogenic drugs? Yes or No
- 4. Used heroin, PCP, steroids or methamphetamine? Yes or No
- 5. Have you abused any prescription drugs. Yes or No
- 5. Been arrested for DWI or DUI in the last three years? Yes or No
- 6. Sold any illegal drug at any time in your life? Yes or No
- 7. Been convicted of, or entered a guilty plea to any assault in a domestic setting? Yes or No
- 8. Falsified any document, form, testimony, or pleading as an officer of the court or as a witness? Yes or No
- 9. Omitted, misstated or falsely stated any information, in writing or orally during an application process with any agency? Yes or No
- 10. Have you ever been a member of a Militia or Street Gang? Yes or No
- 11. Are you now, or have you ever been the subject of a restraining order? Yes or No

If yes to any of the above please explain: (Attach additional pages if needed)

- 12. Are there any incidents in your life, whether or not you were directly involved, which if discovered by a subsequent investigation, would disqualify you as an applicant. Yes or No

If yes, please explain: _____

13. Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group or combination of persons which have adopted, or shown a policy of advocating or approving the commission of acts or force of violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of Government of the United States by unconstitutional means? Yes or No

If yes, please explain: _____

14. Have you ever stolen anything from an employer? Yes or No

If yes, please explain: _____

Have you used any other names? Yes or No

If yes, give the names used and period of time you used them, for example, your maiden name, name(s) by a former marriage, former name(s), alias(es), nickname(s). If the other name is your maiden name put "maiden" in front of it.

Name #1 _____ month/yr used _____ to _____

Name #2 _____ month/yr used _____ to _____

Residences: List all for the past ten years beginning with current (add additional sheets if needed)

Month and Year		Address	With whom did you live and where are they now?
From	To		

If you rent: Landlord Information _____
Name
Address
Phone Number

List all persons living/staying in your residence:

<u>Name:</u>	<u>How Long</u>	<u>Relationship To You</u>	<u>Phone Number</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Attached additional pages if needed

List all professional or civic organizations that you are a member or have been a member of:

From: Month/Yr	To: Month/Yr	Name	Types

EDUCATION: Please circle highest grade completed. 12 13 14 15 16 16+

High School _____ Address _____

City _____ State _____ Zip Code _____

GED or Diploma Yes No

Date of Graduation _____

College/University or Trade School _____

Address _____ City/State _____

Degree & Major _____ Phone Number _____

Major _____ Minor _____

Type of Degree _____ Date of Degree _____

Attended From _____ To _____

College/University or Trade School _____

Address _____ City/State _____

Degree & Major _____ Phone Number _____

Major _____ Minor _____

Type of Degree _____ Date of Degree _____

Attended From _____ To _____

Other Special Schools, Courses, or Study of Certification:

Name/Address _____
Street City State Zip Code

Course of Study _____

Certification _____ Date Granted _____

Other Skills _____

Typing Yes or No WPM _____ Computer _____ MS Word _____

Excel _____ Access _____

Foreign Languages ?

_____ Speak _____ Understand _____ Read _____

_____ Speak _____ Understand _____ Read _____

EMPLOYMENT HISTORY:

List your work history below. **Start with your present or most recent position and go backward through your experience at least 10 years or back through age 18 (whichever is shorter).** Include military service and volunteer work in your work history in chronological order. Identify by month and year any period of unemployment of six months or more. Also, explain the circumstances for any positions from which you have been fired or terminated. **This section MUST be complete. Attach additional sheets if necessary to provide 10 years work experience.**

Current or Most Recent Employer

_____ Full Time Part Time
_____ () _____ Volunteer
Company Name City/State Phone # of Supervisor
From _____ to _____
Dates Employed Job Title Supervisor Name
Duties: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason for Leaving
May we contact this employer? Yes No or wanting to leave? _____

Second Most Recent Employer

_____ Full Time Part Time
_____ () _____ Volunteer
Company Name _____ City/State _____ Phone # of Supervisor _____
From _____ to _____
Dates Employed _____ Job Title _____ Supervisor Name _____

Duties : _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason for Leaving
May we contact this employer? Yes No or wanting to leave? _____

Third Most Recent Employer

_____ Full Time Part Time
_____ () _____ Volunteer
Company Name _____ City/State _____ Phone # of Supervisor _____
From _____ to _____
Dates Employed _____ Job Title _____ Supervisor Name _____

Duties : _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason for Leaving
May we contact this employer? Yes No or wanting to leave? _____

Fourth Most Recent Employer

_____ Full Time Part Time
_____ () _____ Volunteer
Company Name _____ City/State _____ Phone # of Supervisor _____
From _____ to _____
Dates Employed _____ Job Title _____ Supervisor Name _____

Duties: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason for Leaving
May we contact this employer? Yes No or wanting to leave? _____

Fifth Most Recent Employer

_____ Full Time Part Time
_____ () _____ Volunteer
Company Name _____ City/State _____ Phone # of Supervisor _____
From _____ to _____
Dates Employed _____ Job Title _____ Supervisor Name _____

Duties: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason for Leaving
May we contact this employer? Yes No or wanting to leave? _____

Sixth Most Recent Employer

Full Time Part Time
 Volunteer

 Company Name City/State () _____ Phone # of Supervisor
 From _____ to _____
 Dates Employed Job Title Supervisor Name
 Duties: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason for Leaving
 May we contact this employer? Yes No or wanting to leave? _____

Seventh Most Recent Employer

Full Time Part Time
 Volunteer

 Company Name City/State () _____ Phone # of Supervisor
 From _____ to _____
 Dates Employed Job Title Supervisor Name
 Duties: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason for Leaving
 May we contact this employer? Yes No or wanting to leave? _____

List all law enforcement agencies which you have applied for employment:

Date	Agency

MILITARY EXPERIENCE:

Have you ever served in the Army, Navy, Marine Corps, Air Force, Coast Guard, or any other military organization?

Yes No If yes, attached photocopy of DD214 or other separation papers.

If there is more than one period, list the separate periods

Month/Yr Entered	Branch or Organization	Date Of Discharge	Type of Discharge	Rank	Occupational Specialty

Were you ever reduced in rank or other disciplinary action in the Military? Yes No

If yes please explain _____

What was your last duty station ? _____

What was or anticipated date of discharge _____

If you were released early from military service, explain why _____

ARREST HISTORY

Have you been arrested, convicted, charged, questioned, accused, or detained for any reason by any police, security officer, military police authority? Yes No

If yes, describe below:

Date	Charge	Dept. or Agency	Location (City, County, State)	Disposition

Were you ever served with a criminal or civil subpoena or summons other than traffic Yes No If yes explain below.

Has any law enforcement officer ever been called to any of your former or current residences for any reason?
 Yes No If yes explain below.

DRIVING RECORD:

Give the following information concerning any vehicle operator’s license you have held or now hold, either in Colorado or any other state.

Type of License	Number	Issuing Authority	Expiration

Have you ever received a citation/ticket for any of the following offenses? If yes to any, explain below. Attach additional sheets of paper if needed.

- | | | |
|-------------------------------------------------------------------------|------------------------------|-----------------------------|
| Driving while suspended or revoked? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Any alcohol or drug related traffic offense? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Operating a motor vehicle without insurance? (financial responsibility) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Careless driving? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Leaving the scene of a motor vehicle accident | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

List all driving citations/tickets, or summons you have received as an adult or juvenile, beginning with the most recent. (If you cannot remember exact dates or locations, give approximate dates and locations.)

Month/Year	Charge	City/State	Department/Agency Issued By	Disposition

List all vehicles which you own, lease, or have for your personal use (including motorcycles)

Year	Make	Model	License Number	State

How many traffic accidents have you been involved in during the past five years? _____
 Describe here _____

Patrol Deputy Applicants Only

- I am currently Colorado POST certified Certification # _____ (attach copy of certification)
- I am eligible for Colorado POST certification
 - I have graduated from an academy. My test is scheduled for _____ (date)
 - I am certified in another state Certification # _____ State _____ (attach copy of certification)

Use of Force

If the necessity arose for you to shoot a person in the course of your duties as an officer, would you have any reluctance to do so? Yes No

If yes, explain in detail. (attached additional pages as needed)

Have you ever had to use a weapon to defend yourself or others? Yes No

If yes, explain in detail. (attached additional pages as needed)

Detention Officer Applicants Only

This position involves contact with inmates in a correctional facility (jail and prison). As required by the Prison Rape Elimination Act of 2003 (PREA), all applicants who may have contact with an inmate in a correctional facility (jail and prison) as described in the law must answer the three questions below to determine their eligibility for the position.

In accordance with Federal Law, the ACSO shall not hire nor promote anyone who may have contact with inmates who:

- (A) Has engaged in sexual abuse in prison, jail lockup, community confinement facility, juvenile facility or other institution.

Have you ever engaged in sexual abuse as described in (A) above ? Yes No

- (B) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or unable to consent to or refuse.

Have you been convicted of engaging or attempting to engage in sexual activity as described in (B) above
 Yes No

- (C) Has been civilly or administratively adjudicated to have engaged in the activity described in (C) above

Yes No

I certify that my responses to the questions in this questionnaire are true and correct to the best of my knowledge, and I agree and understand that any misstatements of material fact herein may cause forfeiture of all rights to any employment in the service of the Archuleta County Sheriff's Office.

_____ Date _____
Signature

Printed Name

WORK REFERENCES: Include only individuals familiar with your work ability. Do not include relatives.

Name Phone # Address, City, State, Zip

- 1) _____
- 2) _____
- 3) _____

Write a short paragraph explaining: Why you are interested in working for Archuleta County Sheriff's Office.

Other information you feel would be helpful in considering you for employment: _____

Are you related to anyone currently employed by the Archuleta County Sheriff's Office? If yes, provide name and relationship.

Name/s _____ Relationship _____
_____ Relationship _____

Do you know of any reason why you would not be able to perform (with reasonable accommodation) any job related task or function in the job description? If yes, please explain:

AFFIDAVIT:

I certify that the answers given by me to the foregoing questions and statements are true and correct without consequential omissions of any kind. I understand and agree that any misleading or incorrect statements or omissions may render this application void, and if employed could be cause for termination and this employer shall not be liable in any respect for such action or termination.

I understand that any false statement in this document or willful misrepresentation will result in disqualification from the application process. If the misrepresentation is discovered after hiring, I may be subject to an inquiry and appropriate administrative or disciplinary actions, up to and including termination.

As an applicant for employment with the Archuleta County Sheriff’s Office I understand that, if hired, I must comply with the Employee Drug and Alcohol Policy.

I further acknowledge that I understand all employment with the Archuleta County Sheriff’s Office is at the will and pleasure of the Sheriff, per Colorado Revised Statute §30-10-509

NOTE: ALL APPLICATIONS MUST BE SIGNED – FAXED AND E-MAILED APPLICATIONS MUST BE FOLLOWED UP WITH AN ORIGINAL SIGNATURE WITHIN TEN CALENDAR DAYS OF RECEIPT BY ARCHULETA COUNTY HUMAN RESOURCES.

Applicant Signature

Date

Applicant ADA Testing Accommodation Request Form

- Return Only If Requesting Accommodation -

APPLICANT’S NAME: _____ DATE: _____

ADDRESS _____

PHONE _____

TEST DATE _____

POSITION _____

The Americans with Disabilities Act (ADA) enables qualified applicants with impairments that affects one or more major life activities the opportunity to request a reasonable modification to enable them to apply and/or test for a position with the Archuleta County. We will need from the applicant information related to his or her disability to determine what accommodation may be best for the applicant.

What you need to know about the accommodation process:

1. All information provided to Archuleta County is confidential and will only be used to provide an appropriate accommodation to applicants with disabilities whom have requested an accommodation.
2. Most applicants who request accommodation will be asked to submit medical documentation to verify that they are a person with a disability as defined in the ADA.
3. Individuals requesting an accommodation for a learning disability will need to provide documentation from a healthcare provider describing the type of learning disability.
4. All information and documentation submitted from a healthcare provider must be written within the previous twelve (12) months to the date of the application to ensure that the accommodation meets the current needs of the applicant.
5. Any healthcare provider used to support this application must be willing and able to speak knowledgably about the disability and willing to work with our staff in determining the best accommodation for the applicant.
6. This accommodation request form must be received a minimum of fifteen (15) business days prior to the time of the needed accommodation.

To process your request for an accommodation, we need the following information:

Describe your impairment: _____

Describe how your impairment is significant: _____

Describe which activities are of central importance to daily life that are restricted by your impairment.

What accommodation do you feel will enable you to apply and/or test for this position. Please describe in detail.

Please provide the name and phone number of your current treating healthcare provider that can speak to your current limitations. Be sure to contact your healthcare provider to notify them that a representative from Archuleta County will be contacting them. All medical information provided to Archuleta County for persons with disabilities is strictly confidential and will only be used in evaluating this accommodation request.

Health Providers Name: _____

Phone Number: _____

I hereby certify that the information contained in this request is true and accurate.

_____ Date _____

Applicant's Signature

Return this form to: Robert Smith, Human Resources Administrator
P.O. Box 1507
Pagosa Springs, CO 81147
Fax: 970-264-8345
e-mail: rsmith@archuletacounty.org