

JOHNSON COUNTY DETENTION CENTER

301 PORTER INDUSTRIAL ROAD
CLARKSVILLE, ARKANSAS 72830
479-754-2200
FAX -754-1072

LARRY JONES
SHERIFF

GREG DONALDSON
DETENTION ADMINISTRATOR

Applicant:

Johnson County Detention Center accepts applications continuously. When a position is open, applications are reviewed and interviews are conducted. After an interview, prospective applicants are then asked to complete information sheets. Due to the nature of our work, it is very important that we obtain any and all information about the applicant. This information will be held in strict confidence. This will allow us to proceed with the application process and background history checks.

Please fill out all blanks on the attached sheet and return to the Johnson County Detention Center.

Thank you,
Johnson County Detention Center

STATE OF ARKANSAS

COMMISSION

ON

LAW ENFORCEMENT STANDARDS

AND TRAINING

PERSONAL HISTORY STATEMENT

PERSONAL HISTORY STATEMENT

Law Enforcement Agency _____

Month _____

Day _____

Year _____

INSTRUCTIONS: Fill out this questionnaire completely and accurately. All statements in your questionnaire are subject to verification. Incorrect statements may bar or remove you from employment. If space provided is inadequate, add additional pages and identify information by item number. If a question does not apply to you, indicate by writing N/A in the answer blank. Type or print legibly in ink all responses.

PERSONAL

1. Name _____ / _____ / _____
First Middle Last Social Security Number

Nicknames or Aliases _____

2. Height _____ Weight _____

3. Present Mailing Address: _____
Street and Number City State Zip Code

Permanent Mailing Address: _____
Street and Number City State Zip Code

Telephone Number: Home _____ Business _____

4. Date of Birth _____ Place of Birth _____

5. Citizenship: U.S. Born U.S. Naturalized Other Specify _____

6. List organizations, clubs and associations of which you are or have been a member, or with which you are or have been associated;

7. List hobbies and/or special skills.

MARITAL

8. Marital status (check one) Single Married Divorced
 Engaged Separated Widowed

Name of spouse or Fiancee _____

REFERENCES:

9. Give the names of five responsible persons, other than relatives or past employers, who could provide information about your character, ability, experience, personality and other qualities;

NAME	ADDRESS	TELEPHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

FAMILY HISTORY;

10. List your parents, brothers and sisters:

NAME	ADDRESS	TELEPHONE
Father	_____	_____
Mother	_____	_____
Bro/Sis	_____	_____
Bro/Sis	_____	_____
Bro/Sis	_____	_____

Has any member of your immediate family ever been arrested for or convicted of a felony offense:

_____ Yes _____ No If yes, complete the following:

DATE	LOCATION	CHARGE	DISPOSITION
_____	_____	_____	_____
_____	_____	_____	_____

11. Give the following information concerning your spouse's parents:

Father

Mother

12. List below every child born to you:

NAME	BIRTH DATE	PLACE OF BIRTH	WITH WHOM RESIDES
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RESIDENCES:

13. List addresses for past 10 years starting with **present** address at top:

FROM MO. YR.	TO MO. YR.	ADDRESS/RESIDENCE	CITY & STATE	LANDLORD
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WORK HISTORY

14. Are you now or have you ever been engaged in any business as an owner, partner or corporate board member?

_____ Yes _____ No If yes, give details below: _____

15. If you have ever been discharged or forced to resign because of misconduct or unsatisfactory service, give details;

16. Have your employers always treated you fairly? _____ Yes _____ No. If no, explain:

17. Do you object to wearing a uniform? _____ Yes _____ No

18. Do you object to working nights? _____ Yes _____ No

19. Do you object to working shifts? _____ Yes _____ No

20. List all jobs you have held in the last ten years. Put your present or most recent job first. If you need more space, you may attach additional sheets. Include military service in proper time sequence and temporary part-time jobs.

A. Title of present or last position _____ Starting salary _____ Last salary _____

Date Employed: _____ Name and title of supervisor _____
Date Separated: _____ Employer _____ Address _____
Full Time Yrs. Mos. Phone Number: _____
Duties _____
Part-time Yrs. Mos. _____
Number of employees supervised by you: _____:
Reason for leaving: _____

B. Title of present or last position _____ Starting salary _____ Last salary _____

Date Employed: _____ Name and title of supervisor _____
Date Separated: _____ Employer _____ Address _____
Full Time Yrs. Mos. Phone Number: _____
Duties _____
Part-time Yrs. Mos. _____
Number of employees supervised by you: _____:
Reason for leaving: _____

C. Title of present or last position _____ Starting salary _____ Last salary _____

Date Employed: _____ Name and title of supervisor _____
Date Separated: _____ Employer _____ Address _____
Full Time Yrs. Mos. Phone Number: _____
Duties _____
Part-time Yrs. Mos. _____
Number of employees supervised by you: _____:
Reason for leaving: _____

D. Title of present or last position _____ Starting salary _____ Last salary _____

Date Employed: _____ Name and title of supervisor _____
Date Separated: _____ Employer _____ Address _____
Full Time Yrs. Mos. Phone Number: _____
Duties _____

Part-time Yrs. Mos. _____

Number of employees supervised by you: _____:
Reason for leaving: _____

21. Have you previously submitted an application for employment with this agency? _____ Yes _____ No
If yes, approximate date; _____

MILITARY SERVICE

22. Were you ever in the U.S. Military Service or any other military organization? _____ Yes _____ No
Branch of Service _____ Unit _____ Date of Enlistment _____
Date of Discharge _____ Service Number _____ Highest Rank _____

23. List medals and decorations: _____

24. Type of Discharge: _____

25. If you are presently a member of the National Guard or any military reserve, give the unit, location and describe your obligation: _____

26. List all schools attended:

Name of School	Location City and State	From Mo. & Yr.	To Mo. & Yr.	Year Completed
Grade School				
High School				
College or University				

27. Did you either graduate from high school or pass the high school equivalency test? _____ Yes _____ No

28. List college degrees received and major field of each. Include incomplete courses: _____

29. Were you ever expelled from any school or were you ever disciplined by any school official?
_____ Yes _____ No If yes, explain: _____

ARREST AND MILITARY DISCIPLINARY

Answer all of the following questions completely and accurately. Any falsifications or misstatements of fact may be sufficient to disqualify you. (Exclude minor traffic violations.)

30. Have you ever been arrested or detained by police? _____ Yes _____ No If yes, give details;

Crime charged _____ Police Agency _____

Date _____ Disposition of Case _____

Crime charged _____ Police Agency _____

Date _____ Disposition of Case _____

31. Have you ever been placed on probation? _____ Yes _____ No If yes, give details below:

32. Have you ever been required to pay a fine in excess of \$25.00 _____ Yes _____ No If yes give details; _____

33. Have you ever been reported as a missing person or as a runaway? _____ Yes _____ No If yes, give complete details including jurisdiction, dates and outcome: _____

34. Were you ever court - martialed, tried on charges or were you the subject of a summary court, deck court, captain's Mast or company punishment or any other disciplinary action while a member of the armed forces?

_____ Yes _____ No If yes, explain; _____

35. List any disciplinary action taken against you in the National Guard or other reserve unit: _____

36. If you have ever been fingerprinted by a police agency other than for an arrest, give details below. Your answers will be checked with the FBI and other agencies;

Agency _____ Date _____ Purpose _____

Agency _____ Date _____ Purpose _____

Agency _____ Date _____ Purpose _____

37. Can you operate a motor vehicle? _____ Yes _____ No

38. Do you possess a valid operator's license from the State of Arkansas? _____ Yes _____ No
Operator's License Number _____ Date issued _____

39. Do you possess an operator's license issued by any state other than Arkansas ? _____ Yes _____ No
If yes, what state _____ Number _____

40. Where did you hear about this position? _____

I understand that this application is not intended to create any contractual agreement for employment.

I certify that I have made no willful misrepresentations in this application nor have I withheld information in my statements and answers to questions. I am aware that the information given by me in my application will be investigated, with my full permission, and that any misrepresentations may cause my application to be rejected.

I authorize any present and or former employer to release to the County or its authorized representative any and all employment records and other information it may have about my employment record. Any information obtained will be used for the purpose of evaluating my application for employment with the County. A photocopy of this authorization shall be as valid as the original.

I understand that this application is the property of the County and will become part of my employment record should I be accepted for employment.

Signature of Applicant: _____