



Sheriff Wes Drury

Scott County Sheriff's Office

P.O. Box 279
131 South New Madrid Street
Benton, Missouri 63736
Phone: 573-545-3525 Fax: 573-545-3527

APPLICATION FOR EMPLOYMENT

ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

Position Sought: Corrections Officer _____ Clerical _____ Court Bailiff _____ Communications _____
 Deputy Sheriff (Patrol Officer) _____ Reserve Officer _____

How did you learn about the position?

Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Office Phone _____

Other Phone _____

Email Address: _____

Social Security Number: _____

Date of Birth: _____

List ALL other names you have used or names by which you may have been know, officially or unofficially, including nicknames, former names, maiden names and abbreviations: _____

On what date would you be available for work? _____

Desired Wage/Salary \$ _____

Are you a U.S. citizen, or are you otherwise authorized to work in the U.S. without any restriction?
Yes [] No []

Have you ever been involuntarily terminated or asked to resign from any position of employment?
Yes [] No []

If yes, please describe circumstances: _____

EMPLOYMENT HISTORY

(Most recent first .Go back 10 years. Use another sheet if necessary)

1. Employer _____
Job Title _____ Dates Employed _____
Prior Position Held within Company (if any): _____
Address _____ City _____ State _____
Zip _____ Phone _____ Supervisor _____
Starting Salary _____ Ending Salary _____
Duties Performed _____
Reason for Leaving _____

2. Employer _____
Job Title _____ Dates Employed _____
Prior Position Held within Company (if any): _____
Address _____ City _____ State _____
Zip _____ Phone _____ Supervisor _____
Starting Salary _____ Ending Salary _____
Duties Performed _____
Reason for Leaving _____

3. Employer _____

Job Title _____ Dates Employed _____

Prior Position Held within Company (if any): _____

Address _____ City _____ State _____

Zip _____ Phone _____ Supervisor _____

Starting Salary _____ Ending Salary _____

Duties Performed _____

Reason for Leaving _____

Have you ever been convicted of a felony? Yes [] No []

If yes, please describe circumstances: _____

LIST ALL **ARRESTS** AND CONVICTIONS FOR VIOLATIONS OF **MISSOURI** CRIMINAL AND TRAFFIC STATUTES, BOTH MISDEMEANOR AND FELONY; INCLUDE RECEIVING A SUSPENDED IMPOSITION OF SENTENCE. THIS INFORMATION IS USED BY P.O.S.T. (Peace Officer Standards Training) IN DETERMINING IF YOU ARE ELIGIBLE TO BE CERTIFIED AS A PEACE OFFICER IN THE STATE OF MISSOURI:

BACKGROUND – STATE OF MISSOURI				
Charge	Agency/Location	Date	Court Where Filed	Disposition

List ALL arrests and convictions for violations of criminal statutes of any state OTHER THAN MISSOURI:

BACKGROUND – ALL OTHER STATES				
Charge	Agency/Location	Date	Court Where Filed	Disposition

List ALL traffic related convictions of any state.

TRAFFIC CONVICTIONS – STATE OF MISSOURI				
Charge	Agency/Location	Date	Court Where Filed	Disposition

** If you need more area on any of the above, use a separate piece of paper and add it to the application. **

Do you now or have you ever used alcohol or prescription drugs to excess?

Yes [] No []

If you answered yes, please explain: _____

If selected for employment, are you willing to submit to a pre-employment drug screening test?

Yes [] No []

EDUCATION				
School Name	Location	Years Attended	Degree Received	Major

Other training, certifications, or licenses held:

List other information pertinent to the employment you are seeking:

MILITARY SERVICE				
Branch	Career Field	Dates of Service	Highest Rank Held	Type of Discharge

Specialized Training: _____

Reserve Status _____



List every state in which you have been a licensed driver and your operator's number in each state:

Have you ever had an Ex Parte Order or Order of Protection issued against you?

Yes [] No []

If yes, please list: Court _____ Date _____
Location _____ Disposition _____

Is there any additional information that you would like to explain or provide that relates to your background but have not been asked? Yes [] No []

If yes, please explain: _____

REQUIRED

Please attach copies of the following documents when returning your application:

High School Diploma or GED certificate
Birth Certificate/Certificate of Naturalization/Other Citizenship Document
Social Security Card
Driver's License or State Identification
DD-214 (veterans only)
Training/POST Certificates/MO DPS License (if available)

Applicants will also be required to be fingerprinted and a criminal history check will be completed. In addition, applicant will also be given a pre-employment drug screen prior to final approval for employment.

Incomplete applications will not be processed.

ACKNOWLEDGMENT AND AUTHORIZATION

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the United States

I understand that the Sheriff's Office will check with the Missouri Department of Public Safety, the Missouri State Highway Patrol, the Federal Bureau of Investigation or other organizations for any criminal history in accordance with applicable statutes.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature/Authorization of Applicant

Date

Revised March 14, 2017