





**HAMPSHIRE COUNTY SHERIFF'S OFFICE**  
**CORRECTIONAL/COURT SECURITY OFFICER**  
**APPLICATION FOR EMPLOYMENT**

(Please type or neatly print)

College/ University				
Vocational- Technical				

**Law Enforcement/Corrections Academies attended and other certificates/training earned**

Academy	City/State	Hours	Certificate Earned	Expiration of Cert.

**Military Service/Experience**

Branch	Dates of Service	Location	Grade/Rank	Supervisor

**EQUAL OPPORTUNITY EMPLOYER**

The Sheriff's Office request that all of the information in this application be completed. Failure to complete all of the information will result in the incomplete evaluation of the qualifications of the applicant



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**Work Experience**

**(Start by listing most recent) (List any volunteer organizations)**

Dates Employed	Employer	Position and Job Description	Immediate Supervisor	Phone # and Address	Reason for leaving

May a member of the Hampshire County Sheriff's Office contact your past employer(s) for reference? If you do not want all employers contacted specify which ones.                      YES                      NO

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Have you ever been dismissed from employment for any reason?                      YES                      NO

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**(Please type or neatly print)**

If YES, Explain (use additional if necessary):

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Have you ever resigned in lieu of dismissal from employment for any reason?    YES    NO  
 If yes, explain (use additional sheets if necessary)

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Have you ever been charged or convicted of a felony or misdemeanor?    YES    NO  
 If YES, explain (use additional sheets if necessary)

Date	Charge	Court	City/State	Circumstances	Disposition
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Have your driving privileges ever been suspended and/or revoked in any state for any reason?  
 YES    NO

If YES give dates of suspension and/or revocation, state of suspension or revocation and reason:

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Are you or have you in the past been addicted to any type of intoxicating liquors or drugs? YES    NO  
 If YES, explain:

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Have you ever used and/or possessed a controlled substance illegally?    YES    NO  
 If YES, explain:

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Have you ever been diagnosed with any type of mental disorder?    YES    NO  
 If YES, explain:

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(Please type or neatly print)

**RESIDENCE**

(Start by listing current)

Dates lived at residence	Address of residence

**PERSONAL REFERENCE**

(Only list references you want contacted by this agency)

(List a minimum of five)

NAME	OCCUPATION	ADDRESS	PHONE #

I declare, that to the best of my knowledge and belief, the above information is true, correct and complete.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

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