

SHERIFF'S MERIT COMMISSION
KANE COUNTY GOVERNMENT BUILDING
Building A Room 103

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KANE COUNTY
CORRECTIONS OFFICER LATERAL TRANSFER APPLICATION 2019

THE FOLLOWING ITEMS MUST BE RETURNED WITH YOUR APPLICATION

1. COPY OF VALID DRIVERS LICENSE
2. COPY OF YOUR BIRTH CERTIFICATE (THIS MUST BE A COPY IT IS NOT RETURNABLE)
3. COPY OF YOUR HIGH SCHOOL DIPLOMA, G.E.D. OR TRANSCRIPTS
4. TWO (2) PASSPORT SIZE PHOTOS
5. PROOF OF PASSING POWER TEST WITHIN ONE YEAR PRIOR TO THE WRITTEN EXAM

*IF YOU QUALIFY FOR MILITARY POINTS YOU MUST PROVIDE
COPY OF YOUR MILITARY DISCHARGE (DD214)*

COLLEGE POINTS CAN ONLY BE USED FOR PROMOTIONAL TESTING

DO NOT INCLUDE COLLEGE CREDENTIALS, OR ANY OTHER DOCUMENTATIONS WITH APPLICATION
ALL DOCUMENTATION SEPARATE FROM APPLICATION ARE TO BE PRESENTED AT THE TIME OF INTERVIEW

*YOU MUST BE A CITIZEN OF THE UNITED STATES FOR 1 YEAR
NO FELONY CONVICTIONS*

*EYESIGHT CORRECTABLE TO 20/20, VISION FREE FROM COLOR BLINDNESS
BE A RESIDENT OF KANE COUNTY OR THE CONTIGUOUS COUNTIES TO KANE
A POLYGRAPH EXAM, PSYCHOLOGICAL TESTING, BACKGROUND CHECK
IN ADDITION, A PHYSICAL EXAM WILL BE REQUIRED BEFORE BEING HIRED*

*ALL APPLICATIONS MUST BE RETURNED TO THE MERIT COMMISSION OFFICE BY MAY 7, 4:00 P.M.
APPLICATIONS MAY ALSO BE MAILED TO THE MERIT COMMISSION OFFICE
POSTMARKED NO LATER THAN MAY 7TH, ANY APPLICATION POSTMARKED AFTER MAY 7TH WILL BE REJECTED.*

DETACH THIS SHEET PRIOR TO SUBMITTING THIS APPLICATION

INSTRUCTIONS

THIS APPLICATION MUST BE CLEARLY PRINTED IN BLACK INK OR TYPEWRITTEN

This sheet has been prepared to assist you in completing the application for the Kane County Sheriff's Office. Any questions that do not pertain to you, please answer with the letters N/A, meaning "Not applicable".

If additional space is needed for any section or questions on the application, or if you wish to furnish additional information, attach sheets of the same size as this application, and number answers to correspond with the questions.

PURPOSE AND USE

The principal purpose of the employment application forms is to collect information needed to determine the qualifications, suitability, and availability of applicants for the Kane County Sheriff's Office employment. All or part of your completed Kane County Sheriff's application form may be disclosed outside the Kane County Sheriff's Office to:

1. Appropriate Federal, State, or local law enforcement agencies charges with the responsibility of investigating a violation alternatively, potential violation of the law.
2. Appropriate Federal, State or Local agency maintaining records on you to obtain information relevant to a Kane County Sheriff's Office decision about you.
3. A requesting Federal, State, or local agency to the extent the information is relevant to the requesting agency's decision.

EFFECTS OF NON-DICLOSURE

It is in your best interest to answer all questions asked on the application. Omission of an item means you might not receive full consideration for a position in which this information is needed. A false answer to a question on the employment application may be grounds for not employing you, or for dismissing you after you begin work. All information you give will be considered in reviewing your statement.

THE KANE COUNTY SHERIFF'S OFFICE IS AN EQUAL OPPORTUNITY EMPLOYER

DETACH THIS INFORMATION SHEET PRIOR TO SUBMITTING APPLICATION

IDENTIFICATION

*CORRECTIONS LATERAL _____ DATE _____

Candidate's Name: _____
Last
First
Middle

Address _____ Apt. _____

City _____ County _____ State _____ Zip _____

() _____ () _____

Primary Phone _____ Work _____

E-mail _____

Social Security No. _____ Driver's License No. _____

State Issued _____

Place of Birth _____ Birth Date _____

City _____ County _____ State _____

Photograph of yourself, passport size, and full face; print your name on the back of the photo
 The photo must have been taken not more than 3 months prior to the date of application

ATTACH PHOTO HERE

ATTACH PHOTO HERE

CORRECTIONS LATERAL TRANSFER 2019

PLEASE PRINT LEGIBLY

NAME _____
LAST FIRST MIDDLE

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PRIMARY PHONE _____

E-MAIL (PRINT CLEARLY) _____

OFFICE USE: PAID _____

PERSONAL HISTORY

Name (Last, First, Middle) _____

List all other names you have used including nicknames. _____

Have you ever legally change your name. _____

Have you ever filed an application with the Kane County Sheriff's Office? Yes _____ No _____

What position? _____ Date _____

Have you ever applied for employment with other law enforcement agencies? Yes _____ No _____

What agencies and what position? _____

With what results? _____

Indicate any law enforcement education/training _____

Do you speak, read or write any foreign languages? Yes _____ No _____

If yes describe _____

Are you a United State Citizen? Yes _____ No _____

By Birth _____ By Naturalization _____ By Derivative _____

If by naturalization, give naturalization number, date, place, and court of decree.

If by derivative, explain through whom your citizenship was obtained.

Circle correct answer: Single Married Separated Divorced Widowed

Number of Children _____

COURT DATA

- 1. Have you ever been ticket or been charged with any traffic violations? Yes _____ No _____
- 2. Has your Driver's License ever been revoked or suspended? Yes _____ No _____
- 3. Have you ever been arrested or charged with any criminal violations? Yes _____ No _____

If you have answered yes, please explain.

PLACE & DEPARTMENT	DATE	CHARGE	COURT & PLEA	DISPOSITION

CONTROLLED SUBSTANCES

Do you use or have used illegal drugs or controlled substances such as marijuana, uppers/downers heroin, cocaine, steroids or any other drug. Yes _____ No _____

If your answer is YES explain in detail and when was last drug use.

RESIDENCES

Chronologically list all your residence in the past three (3) years

Dates/Mo./Yr.	To	Street Address/ Apt. No.	City/County	State/Zip
1.				
2.				
3.				

EDUCATION/TRAINING

1. High School	Dates Attended	Years Completed	Did you Graduate?	Type of Diploma
2. College	Dates Attended	Years Completed	Did you Graduate?	Type of Degree
3. Other Schools Trade, Vocational Miscellaneous				

MILITARY DATA

Have you ever served on active duty in the Armed Forces of the United States? Yes _____ No _____

If yes, please attach a copy of your DD-214

Branch of Service: _____ Rank: _____

From: _____ To: _____

Type of Discharge: _____ if less than honorable. Explain

Was any type of disciplinary action taking against you in the services? Be sure to include non-judicial punishment Yes _____ No _____ if yes please provide the nature of offense and action taken

Are you now or ever been a member of the Reserve Unit or National Guard? Yes _____ No _____

List any rewards or medals received while in the Military _____

PHYSICAL DATE

Do you have any physical problems such as but not limited to a bone, joint or other deformity or loss of a figure which would preclude, restricted regular participation in all phases of the Kane County Sheriff's Office firearms training, physical training and defensive tactics? Yes _____ No _____ If yes describe

Have you ever-received compensation or pension benefits, or intend to apply for pension or compensation for physical problems? Yes _____ No _____

If yes, specify what kind, granted by whom, and what amount, when and why. If applicable, include Veterans administration claim #. _____

EMPLOYMENT HISTORY

Begin with the most recent and work back, include military experience

1. Employer _____ Dates employed _____ Salary _____

Supervisor's name _____

Position held _____

From _____ Part Time _____

To _____ Full Time _____

Employer city, state _____

2. Employer _____ Dates Employed _____ Salary _____

Supervisor's name _____

Position held _____

From _____ Part Time _____

To _____ Full Time _____

Employer city, state _____

Do we have your permission to contact your employer? Yes _____ No _____

Have you ever been dismissed or asked to resign from any employment or position? Yes _____ No _____

If yes, explain: _____

REFERENCES

List three references you have known for at least 5 years:

Name	Name	Name
Phone	Phone	Phone
Years Acquainted	Years Acquainted	Years Acquainted
Occupation	Occupation	Occupation
Address	Address	Address

ORGANIZATION MEMBERSHIP

List all clubs of which you belong:

Name	Name	Name
Address	Address	Address

RELATIVES

Applicants must give information concerning their relatives.

Fathers Name	Mothers Name
City State Address	City State Address
Occupation/Employment	Occupation/Employment
Place of Birth	Place of Birth

Spouse Name (Maiden Name)	
City state address	
Occupation	
Place of Birth	

Children	Name
Name	Place of Birth
Place of Birth	
Name	
Place of Birth	

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any false statements, omissions, or misrepresentations on this application, or false statements made during the employment process may be considered sufficient cause for rejection, of this application, or dismissal if I have been employed no matter when discovered.

I hereby authorize the Kane County Sheriff's Merit Commission to thoroughly investigate my background, references, employment record, driving record, and other matters related to my suitability for employment and, further authorize my former employers or any third party to disclose to the Kane County Sheriff's Merit Commission all reports and other information related to my suitability for employment, personal or otherwise, without giving me prior notice of such disclosure. In addition, I hereby release the Kane County Merit Commission, the Kane County Sheriff, former employers and all references listed above, from all claim, demands or liability arising out of or related to such investigation or disclosure.

I understand that filling out this form does not indicate there is a position open and does not obligate the Kane County Sheriff or the Kane County Sheriff's Merit Commission to hire me. If hired, I agree to abide by all rules, policies, and procedures relating to work performance and conduct as established by both the Kane County Sheriff and the Kane County Merit Commission.

I understand that nothing containing in this application or conveyed during any interview, which may be granted, is intended to create an employment contact. I further agree that if I am hired my employment is for no definite period, and that I may be terminated at will subject to applicable policies and agreements.

I understand that all appointments and probationary for a period of one year during which I must demonstrate my fitness for continued employment by the Kane County Sheriff's Office. I also understand that in many parts of the Sheriff's Office it has been necessary to establish regular night and midnight shifts in view of which I must be completely available for such assignments as the needs might arise.

I further understand that any appointment tendered me will be contingent upon the results of a complete character and fitness investigation, and I am aware that willfully withholding information or making false statements on this application will be the basis for dismissal from Kane County Sheriff's Office.

I agree to these conditions, and I hereby certify that all statements made by me on this application are true and complete, to the best of my knowledge.

Signature of Applicant

Please print name

Date

APPROVAL FOR BACKGROUND INVESTIGATION

As a Merit Commission Candidate, I do hereby certify that I am applying for a position with the Sheriff's Office of Kane County. I further declare that questions answered by me on the application for employment are true and correct. I understand that any discrepancy will result in my application not being accepted.

I further realize a full background investigation will be done. I hereby authorize individuals contacted to supply pertinent information. I will hold no one liable who supply information, regardless of whether or not I am hired.

The Kane County Sheriff's Merit Commission on this date October 6, 1990 hereby authorizes the Kane County Sheriff's Office to use such information set forth in Title 28, code of Federal Regulations 9CFR) Section 50.12, both governmental and non-governmental entitles for all Merit Commission applicants.

Beginning August 1, 1991 all Deputies after completing the 400 hour Basic Law Enforcement course must successfully complete a Field Training Program, by meeting pre-existing criteria and standards set by Departmental Memorandum and Operating Procedures, as evaluated and documented by field training Officers and Patrol Sergeants, and reviewed by the Patrol Commander and the Sheriff.

I HAVE READ THE ABOVE:

NAME

PLEASE PRINT NAME

DATE