

# LAW ENFORCEMENT APPLICATION



# MCKENZIE COUNTY SHERIFF'S OFFICE



County Sheriff's Office. The McKenzie County Sheriff's Office is a modern law enforcement agency utilizing the latest in technology to effectively investigate, deter, and apprehend criminals. Working with other city, state, and federal agencies that operate in the confines of the county, we dedicate ourselves 24/7 to ensure the safety and security of the citizens of McKenzie County. The McKenzie County Sheriff's Office is committed to promoting individual responsibility and community commitment; we will work together to resolve problems, reduce crime, and provide a safe environment for our residents and visitors.

#### THIS IS YOUR APPLICATION!

An applicant who is a resident of North Dakota and eligible to claim veteran's preference must abide by the Department of Veterans Affairs guidelines available at www.nd.gov/veterans/benefits/veterans-preference-state/documentations-required-applicant and submit any documentations with an otherwise complete application.

McKenzie County is an equal opportunity employer.

### The Packet MUST be executed by the applicant and completed by printing in blue ink.

The packet may be submitted by mail, email, or hand delivered to (no picture copies of the application will be accepted):

McKenzie County Human Resources 201 5th ST NW, SUITE 700 Watford City, ND 58854 jobs@co.mckenzie.nd.us

### OR

McKenzie County Sheriff's Office 1201 12<sup>th</sup> St SE SUITE B Watford City, ND 58854 sheriffjobs@co.mckenzie.nd.us



### **Minimum Requirements:**

To be eligible for appointment to the McKenzie County Sheriff's Office an applicant must:

- Be of excellent moral character
- Obtained a High School Diploma or GED
- Be at least 18 years of age
- Possess a valid driver's license
- Pass background investigation
- Pass oral review board
- ND POST Licensed or ND POST License eligible
- Must be a U.S. citizen or Naturalized Citizen
- No misdemeanor convictions within the last 3 years
- No domestic violence convictions
- No felony convictions

A resume with cover letter must be submitted with this application. It is the requirement of the applicant to fully complete this packet before submission. Failure to complete the necessary requirements pertaining to background investigations will disqualify the applicant from further consideration.

Should additional space be necessary, use the continuation sheets at the end of this packet. Label each entry so that it corresponds with the section title and page number in this packet. This packet is **CONFIDENTIAL** and will only be reviewed by investigative personnel, the Oral Review Board, and the Human Resources Office of McKenzie County. **NO** material can be released from this packet to any agency or individual without the written release from/by the applicant.

It will be required of the applicant to submit the following **COPIES** (**DO NOT SEND IN ORIGINAL DOCUMENTS**):

- Driver's license and/or passport
- Social security card



#### DISCLOSURE AUTHORIZATION AND CONSENT FORM

We welcome your application with McKenzie County. This document serves solely as a clear and conspicuous written disclosure as required by the Federal Fair Credit Reporting Act set forth in Section 604(b) to the applicant that a social security number trace, motor vehicle verification, education, previous employment, credit and a criminal background verification. In addition, investigative consumer reports gathered from personal interviews with former employers and other past or current associates of mine to gather information regarding my work performance, character, general reputation, and personal characteristics may be obtained for the purpose of this employment application. By the signature below, the Applicant acknowledges that McKenzie County has made this disclosure.

### APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

This release and authorization acknowledges McKenzie County may now, or any time while I am employed/training, conduct a verification of my education, previous employment/work history, credit history, contact personal references, motor vehicle records, conduct drug testing, and to receive any criminal history information pertaining to me which may be in the files of any Federal, State, or Local criminal justice agency, and to verify any other information deemed necessary to fulfill the job requirements pursuant to North Dakota Public Access Record Laws and/or the Freedom of Information Act (28 C.F.R. Part 16). The results of this verification process will be used to determine employment/training eligibility under McKenzie County employment/training policies. In the event that information from the report is utilized in whole or in part in making an adverse action decision with regard to your potential employment/training, before making the adverse decision, we will provide you with a copy of the report and a description in writing of your rights under the law.

### I HAVE READ AND UNDERSTAND THIS DISCLOSURE, AND I AUTHORIZE THE BACKGROUND VERIFICATION.

I authorize person, schools, current and former employers, and other organizations and Agencies to provide McKenzie County with all information that may be requested. I agree that any copy of this document is as valid as the original. According to the Federal Fair Credit Reporting Act, I am entitled to know if employment/training was denied based on information obtained by my prospective employer/training program and to receive a disclosure of the public record information and of the nature and scope of the investigative report.

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Applicant Information							
Full Last Name	Full First Name		Full Middle Name	Г	Date of Birth	1	
Alias or Nickname	,		Alias or Nickname				
Street Address		Ci	ity		State	Zip	
Home Phone		Co	ell Phone				
Social Security #	Signature	·		Da	te		



## <u>APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION:</u> <u>PSYCHOLOGICAL EXAMINATION</u>

, understand as a requirement of employment with the McKenzie ounty Sheriff's Office, I will be required to take a psychological evaluation as required by North Dakota entury Code NDCC 12-63-06(4) to obtain a peace officer license. If I have completed a psychological valuation within the last twelve [12] months, I have the opportunity to provide the McKenzie County heriff's Office with the results from the psychological examination instead of being required to take a new sychological examination.
his release, when presented by a duly authorized representative of the McKenzie County Sheriff's Office, onstitutes my consent and authority to examine and obtain copies and abstracts of records and to receive tatements and information regarding my background. Specifically, I authorize the release of the following ata or records to the McKenzie County Sheriff's Office: psychological examinations and results which were onducted by prior law enforcement agencies as a result of the hiring process and/or employment with those gencies.
his authorization is given in connection with a background investigation being conducted relative to my pplication for, or continued employment with, the McKenzie County Sheriff's Office. The intent of this uthorization is to provide full and free access to the psychological examination which may provide pertinent ata for the McKenzie County Sheriff's Office, to consider my suitability for employment.
understand that any information obtained by a psychological examination, which is developed directly or adirectly, in whole or in part upon this release authorization, will be considered in determining my uitability for employment by the McKenzie County Sheriff's Office. I understand that all materials pertaining of this psychological examination become the property of the McKenzie County Sheriff's Office and will not be eturned to me.
photocopy of this release form will be valid as an original hereof, even though the said photocopy does not ontain an original writing of my signature.
I authorize the McKenzie County Sheriff's Office to obtain my psychological evaluation from prior law enforcement agencies.
I will obtain and provide the McKenzie County Sheriff's Office with original <b>(no copies accepted)</b> results from my previous psychological evaluation within the last twelve [12] months.
I do not give authorization and will not obtain a prior psychological evaluation. I will submit to a psychological evaluation.
ignature of Applicant Date



Application for Position of:	Date:

**General Instructions:** Please print the required answers to every question. If the question does not apply to you, you may answer "N/A". **If the space available for an answer is insufficient, use the continuation sheets located in the back of this packet.** Remember to precede each answer with the section title and page number. Make every effort to answer every question completely. DO NOT misstate, misrepresent, or omit any material fact since the statements made herein are subject to verification to determine your qualification for employment.

### **PERSONAL**

Last Name:	First Nam	e: Mi	iddle Name:		
Alias or Nickname:					
Have you ever changed	your name: Yes No	If yes, complete the	following:		
Previous Name:		Effective D	Oate:		
Reason for Change					
Current Street Address	City:	S	State: Zip Code:		
Current Mailing Addres	s: City:	S	State: Zip Code:		
	<del>,</del>				
Date of Birth:	Place of Birth (City, State, Co	untry):			
Home Phone:	Cell Phone:	Other Phone:			
Email: US Citizen: Yes No					



### PAST AND PRESENT EMPLOYMENT

List all of your employment history for the past ten (10) years. Begin with your current employer first then working backwards, to include all periods of unemployment, internships, military and volunteer positions. Please be specific with dates and addresses. Contact with your present, as well as past employers, is a part of every applicant's background investigation. Knowing this, if you, as an applicant, have any concerns convey them to your investigator.

	Name 0 Address of Commons 0	Eas	om		То	Chautina	Ending Hamber	Name of			
	Name & Address of Company &		ī.			Starting	Ending Hourly				
	Type of Business	Mo	Yr	Mo	Yr	Hourly Wage	Wage	Supervisor			
		Job Title/Description/Duties									
		Job Tit	le/Desc	ription	/Duties						
I											
	Telephone	Reason for Leaving:									
	relephone	reason for Bearing.									
	List one person who you worked	with du	ıring this	s emplo	wment.	Contact Number	٠.				
	List one person who you worked	with au		cinpic	y mene.	dontact Number	. •				
	Name & Address of Company &	Fre	om		То	Starting	Ending Hourly	Name of			
	Type of Business	Mo	Yr	Mo	Yr	Hourly Wage	Wage	Supervisor			
	Job Title/Description/Duties										
II											
**	_, ,	December Leaving									
	Telephone	Reason for Leaving:									
	T., 1 1 1 1	2.1 1	1.			C N 1	L ou.				
	List one person who you worked	with du	iring this	s emplo	yment:	Contact Number	r:				
	Name & Address of Company &	Fro	ım	7	To	Starting	Ending Hourly	Name of			
	Type of Business	Mo	Yr	Mo	l Yr	Hourly Wage	Wage	Supervisor			
	Type of Business	1410	11	1410	11	Hourry wage	Wage	Super visor			
		Iob Tit	le/Desc	ription	/Duties						
***	Job Title/Description/Duties										
III											
	Telephone	Reason	n for Lea	ving:							
List one person who you worked with during this employment: Contact Number:											



### PAST AND PRESENT EMPLOYMENT (cont'd)

	Name & Address of Company & Type of Business	Mo Yr	Mo Yr	Starting Hourly Wage	Hourly Wage	Name of Supervisor					
V	Job Title/Description/Duties										
	Telephone	Reason for Leaving:									
List one person who you wo		d with during t	his employment:	Contact Number:							
	Name & Address of Company & Type of Business	From Mo Yr	To Mo Yr	Starting Hourly Wage	Ending Hourly Wage	Name of Supervisor					
VI	a Type of Business	Job Title/Description/Duties									
	Telephone	Reason for Leaving:									
	List one person who you worked	ed with during this employment: Contact Number:									
	Name & Address of Company & Type of Business	From Mo Yr	To Mo Yr	Starting Hourly Wage	Ending Hourly Wage	Name of Supervisor					
VII		Job Title/Description/Duties									
	Telephone	Reason for Leaving:									
	List one person who you worked	l d with during t	his employment:	Contact Numbe	r:						
	Name & Address of Company & Type of Business	From Mo Yr	To Mo Yr	Starting Hourly Wage	Ending Hourly Wage	Name of Supervisor					
VIII		Job Title/Description/Duties									
	Telephone	Reason for Le	eaving:								
	List one person who you worked	d with during t	his employment:	Contact Numbe	r:						



### PAST AND PRESENT EMPLOYMENT (cont'd)

Have you ever resigned (quit) from a job by mutual agreement following allegations of misconduct? If yes, explain.
·
Have you ever walked off (left) a job without giving proper notice? If yes, explain.
Have your ever resigned (quit) from a job by mutual agreement following allegations of unsatisfactory work performance? If yes, explain.
performance: if yes, explain.
·
Are you currently under investigation by your current employer that could result in disciplinary action being taken
against you? If yes, explain.
Have you ever been discharged (fired), asked to resign, furloughed, or put on inactive status for cause, or subjected to
disciplinary action while in any position? If yes, give name and address of employer, approximate date, and reason for
each case.
Have your ever resigned (quit) after being informed your employer intended to discharge (fire) you for any reason? If yes,
give name and address of employer, approximate date, and reason for each case.



# McKENZIE COUNTY

### **EDUCATION**

School	Name and Address of School	Course of Study	Number of Credits	Did you Graduate	Diploma/Degree & GPA/GED Score		
High	30.000		Ground	Yes: Date:	411,422 50010		
				No:			
College				Yes: Date:			
				No:			
Other (specify)				Yes: Date:			
				No:			
If your major was not Criminal Justice/Law Enforcement, how many police related courses have you taken?							
Have you ever been suspended, expelled, or placed on academic probation from any school or educational facility? If yes, explain.							
List all trade, vocational, business, or military schools by name, location, dates attended, subjects studied, and certificates issued.							



### **SPECIAL QUALIFICATIONS AND SKILLS**

Indicate type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued, and date current license expires. (This section does not apply to vehicle operator's license.)
Special skills you possess and machines and equipment you can use. For example, computer, software programs, scanner, photography or other.
Special qualifications not covered in application. For example, your most important publications (do not submit copies unless requested); your patents or inventions; public speaking and publications experience; membership in professional or scientific societies; and honors and fellowships received.
Typing — approximate number of words-per-minute:



### LAW ENFORCEMENT APPLICATIONS

	List all law enforcement/security guard/dispatch positions with a city, county, state, special						
district, regional, or federal governme		pplied. Includes age	ncies for which				
you have worked as a "reserve officer							
A. Agency and Location: Date:							
Position/Classification:							
What steps did you complete? (check all that	apply) Application Only	Oral Int	erview 🔲				
Background Investigation Polygra	ph Other (please	e specify) 🔲					
What is the status of your application?	Still being considered fo						
	No longer being considered	d for hire					
If you were not hired, what reason was given	to you?						
B. Agency and Location:	n:	ate:					
5. Agency and Bocación.	D.	ute.					
Position/Classification:							
What steps did you complete? (check all that	apply) Application Only	Oral Int	erview				
Background Investigation Polygra	aph Other (please	e specify) 🔲					
What is the status of your application? Still being considered for hire							
No longer being considered for hire							
If you were not hired, what reason was given	to you?						
DOCT LICENCE							
POST LICENSE		)	_				
Are you currently P.O.S.T. (Peace Officer Standards and Training) certified?  Yes							
No ∐							
Have you ever been certified as a law enforcement officer?  Yes							
No ∐							
P.O.S.T. License #							
Have you taken a Psychological Examin	ation within the last 12 m	nonths? Yes 🗌	No 🗌				
Agency:	City, State:	Date From:	Date To:				



### **RESIDENCES**

You are required to list all of your residences for the past 10 (ten) years. You must provide
complete addresses including zip codes. Investigators will not search for this information.
Incomplete information could slow down your process or cause your removal from consideration.
Be sure to include all college addresses and military addresses.

				Name/Contact Number for			
Street Address (City, State & Zip Code)	From:	To:	Rent/Own	Landlord			
				Banarora			
Have the Police ever been called to any home/r	esidence in wl	hich you have	ever resided? If y	es, provide date(s), reason(s),			
agency(s), and disposition(s).							



### **MILITARY SERVICE**

Have you served in the U.S. Mi				
Service from any other foreign	n nation?	Branch:		
		From		То
		110111.		10.
	e you ever arrested and convict			
	ecial, or general court-martial?			
court or court-martial, charge	and action taken for each incid	ent, using con	ntinuation sheet to	o record this information.
Yes: No:				
Type of Discharge:		Rank at time	e of Separation:	
	d under the Uniformed Code of		ce (Article 15) or	subjected to any type of
disciplinary action(s) while se	erving in the Armed Forces? If y	es, explain.		
Have you over been reduced /	demoted in rank? If yes, explain			
nave you ever been reduced/	demoted in rank? if yes, explain			
77 ' 1	. 1 .210 1.			
Have your ever received comp	pany punishment? If yes, explain	1.		
C 1/1		1	1.0	276
Were you ever confined/detail	ined in a brig, stockade, guardho	ouse, or jail w	thile in the militar	y? If yes, explain.
	if still enlisted or last Comman		f discharged): Contact Number:	
Rank:	Name:	Ĺ	ontact Number:	
Reserve/Guard Information	1			
Grade or Service Number:		Service and	Component:	
Organization and Station or U	nit and Location.			
Organization and Station of O	int and Location.	Active:	_ Inactive:	Standby:
Indicate Reserve Obligation, if	fany:			
_				
Selective Service Information	on	D : 07	01 101	
Selective Service Number:		Date of Last	Classification:	
Local Board:		Address:		



### **CHARACTER REFERENCES**

List three (3) people that you have known for three (3) years or more. Do not include relatives by blood or by marriage, former employers, or persons living outside the United States or its territories. Do not repeat names of supervisors, or anyone already listed in this packet.

Name	Years Known	Address	Occupation	Phone Number

### **PERSONAL REFERENCES**

List three (3) personal friends with whom you associate frequently, including boyfriends and/or girlfriends, who are not listed anywhere else in this packet.

Name	Years Known	Address	Occupation	Phone Number



### LAW ENFORCEMENT REFERENCES

	family, friends, or relatives that are currently employed by This can also include current members of the McKenzie		
County Sheriff's Office, or past members of			
Name:	Address:		
Home Phone:	Cell Phone:		
Department Name:			
Department Address:			
His/Her Title:	How long employed:		
Name:	Address:		
Home Phone:	Cell Phone:		
Department Name:			
Department Address:			
His/Her Title:	How long employed:		
Name:	Address:		
Home Phone:	Cell Phone:		
Department Name:			
Department Address:			
His/Her Title:	How long employed:		
Name:	Address:		
Home Phone:	Cell Phone:		
Department Name:			
Department Address:			
His/Her Title:	How long employed:		

### **CONTINUATION SHEETS**

Page No	Narrative

### **CONTINUATION SHEETS**

Page No	Narrative

### **CONTINUATION SHEETS**

Page No	Narrative

I understand and acknowledge that all information and all entries made by me in response to the requested information contained within this application are true, complete, and correct to the best of my knowledge. I further understand that if at any time during the course of the background investigation or anytime during the course of my employment with the McKenzie County Sheriff's Office, it is discovered that I have made untruthful statements, falsified my employment application form, given or provided misleading statements, or deliberately omitted or failed to provide required information with the intent to deceive or mislead, it shall be cause for my immediate termination/discharge from the employment process and /or

I certify that there are no fraudulent misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

employment with the McKenzie County Sheriff's Office.

I authorize the companies, schools, or persons named herein to give any information regarding my employment, character, and qualifications. I hereby release these companies, schools, or persons from all liability for any damage for issuing this information.

Signature of Applicant	 Date	-

**SIGNATURE PAGE** 



## **IMPORTANT!**

As a part of the application process, it will be required of the applicant to submit the following documents to the background investigator (if applicable):

- Certified birth certificate
- High school diploma or equivalency certificate
- All college, technical school, and/or police academy diplomas and transcripts
- Official copy of college transcripts (Transcripts can be sent from the institution to the McKenzie County Sheriff's Office at 1201 12th St SE STE B, Watford City, ND 58854.
- Military discharge DD214 (Long Form- Member 4)
- Naturalization papers
- Marriage license, divorce decree, name change documentation
- Prior law enforcement training certificates or training rosters

The full background is a requirement prior to employment. Please take the time to start gathering this information to provide to the background investigator that will be assigned to your application process.

The application process will include the following steps:

- Application
- Initial Background
- Oral Review Board (Interview)
- Completion of Background Questionnaire (Separate from Application)
- Full Background
- Conditional Offer of Employment
- Psychological Evaluation
- Medical Examination
- Offer of Employment

This document is for your records and does **not** need to be returned as a part of the application.

The hiring process may be extensive as the McKenzie County Sheriff's Office is always looking for applicants to be of excellent moral character.