

LAUDERDALE CO. SHERIFF'S DEPARTMENT
BILLY SOLLIE, SHERIFF

2001 5TH STREET
MERIDIAN, MISSISSIPPI 39301
601-482-9806

I, _____, authorize you to furnish full and complete information concerning my employment with you to the Lauderdale County Sheriff's Department. Your cooperation in this matter is greatly appreciated.

Signed _____

Date _____

Witness:

* NOTICE TO APPLICANT: Applications will be kept on file for a period of twelve (12) months. After that time the application will be disposed of. If you have not been hired, it will be up to you to come in and fill out another application if you are still interested in employment with the Lauderdale County Sheriff's Department or Detention Facility.

REFERENCES - Continued

Business _____ Telephone _____
 Name _____ Address _____
 Business _____ Telephone _____
 Name _____ Address _____
 Business _____ Telephone _____

41. My relatives are listed below:

	Name	Address	Phone #	Age	Employer
Father	_____	_____	_____	_____	_____
Mother	_____	_____	_____	_____	_____
Brother	_____	_____	_____	_____	_____
Sister	_____	_____	_____	_____	_____
Wife	_____	_____	_____	_____	_____
Husband	_____	_____	_____	_____	_____
Son	_____	_____	_____	_____	_____
Daughter	_____	_____	_____	_____	_____

RESIDENCE RECORD

42. I have resided at the following places during the last two years:

Address _____ From _____ To _____
 Date Date Date
 Address _____ From _____ To _____
 Date Date Date

MISCELLANEOUS INFORMATION

43. I certify that: I do not drink excessively I do not use narcotics or other central nervous system drugs.
44. I further certify that this application contains no willful misrepresentation nor false statements, and I do not know of any legal nor moral prohibitions against my employment in the Sheriff's Office.
45. Inquiry may may not be made of my present or former employer about my character, qualifications, etc.
46. I accept employment with the Lauderdale County Sheriff's Office with the full knowledge and agreement that the sheriff may and can transfer me to any department(s) and shift(s) that he or a supervisor so chooses and at his sole discretion.
47. I accept employment with the Lauderdale County Sheriff's Office with the full knowledge and agreement that I must **pass an initial drug test and consent to random drug testing.**
48. **All applications must be accompanied with a photo; a copy of your high school diploma; a copy of your driver's license; a copy of your birth certificate; and, if you have military experience, a copy of your DD-214, and social security card.**
49. All employees of the Sheriff's Office (unless the contrary is provided for in writing signed by the Sheriff with respect to a specifically named employee), are employed without a fixed term of employment and are subject to termination by the Sheriff without cause at any time. No provisions contained in any employee manual or elsewhere, including but not limited to expiration dates on commissions or provisions regarding suspension, dismissal or other disciplinary action with respect to any employee, shall be construed in any matter to restrict, modify or abrogate in any way the Sheriff's right to terminate any employee at will without cause nor should they be construed to constitute in any matter an employment for any specific or fixed period of time or to establish any rights to employment of any kind whatsoever, including but not limited to the right to be dismissed only for cause.

SIGNATURE OF APPLICANT

COMMENTS: _____

EMPLOYMENT RECORD

39. Beginning with my last (or present) job, and working backward, the following is my employment record.

Job title _____ From _____ To _____
Immediate Supervisor _____ His title _____ Phone # _____
Company name _____ City _____
My earnings _____ per month Hours per week _____
Description of my job _____

Reason for leaving or changing employment _____

Job title _____ From _____ To _____
Immediate Supervisor _____ His title _____ Phone # _____
Company name _____ City _____
My earnings _____ per month Hours per work _____
Description of my job _____

Reason for leaving or changing employment _____

Job title _____ From _____ To _____
Immediate Supervisor _____ His title _____ Phone # _____
Company name _____ City _____
My earnings _____ per month Hours per work _____
Description of my job _____

Reason for leaving or changing employment _____

Job title _____ From _____ To _____
Immediate Supervisor _____ His title _____ Phone # _____
Company name _____ City _____
My earnings _____ per month Hours per work _____
Description of my job _____

Reason for leaving or changing employment _____

REFERENCE

List three reputable citizens who have known you well during the last five years. (DO NOT list relatives or former employers.)

40. Name _____ Address _____

EDUCATION - (Continued)

21. High Schools I attended _____
22. Highest grade completed _____ Date graduated _____
23. Colleges I attended _____
24. My major subjects were _____
25. My minor subjects were _____
26. I was Bachelor's graduated with a Master's degree in _____
 was not Doctor's
27. I did did not attend business school and studied the following subjects: _____
28. Other schools I attended: _____
29. Business machines I can operate: Typewriter Duplicator Adding Machine Calculator
 Computer Other _____
30. Professional licenses I hold: _____
31. Disciplinary action against me (including dismissal, scholastic probation, etc.) during my scholastic career: _____

FINANCIAL AND LEGAL

32. I am indebted as follows:
- | | |
|------------|--------------|
| Name _____ | Amount _____ |
| Name _____ | Amount _____ |
| Name _____ | Amount _____ |
33. My credit record Has Has not been considered unsatisfactory in the past, and I Have Have not been refused reasonable credit.
34. I Have Have not declared bankruptcy. Details _____
35. My traffic violations during the past three years:
- | | |
|-----------------|------------|
| Violation _____ | Date _____ |
| Violation _____ | Date _____ |
36. I Have Have not been arrested for any offense, as follows: _____
37. The following members of my immediate family (including in-laws) have been arrested for offenses other than traffic violations:
- | | | |
|------------|--------------------|---------------|
| Name _____ | Relationship _____ | Offense _____ |
|------------|--------------------|---------------|
38. I Have Have not been a defendant in a court action, as follows: _____

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All Lauderdale County deputies and corrections officers must be certified by the Mississippi Standards & Training board. The questions below must be answered in order to receive that certification. Make sure to include a written explanation if you answer "yes" to any of these questions.

Warning: MCA § 97-7-10, "Fraudulent Statements and Representations," provides for severe penalties for misrepresentations or fraudulent statements to a Board. This statute authorizes a fine of up to ten thousand dollars (\$10,000) and a jail sentence of up to five (5) years. Further, the Jail Officers Training Program authorizes the Board in MCA § 45-4-9 (5) (b) to cancel and recall any certificate obtained through misrepresentation of fraud.

A "yes" answer to any of these questions does not automatically bar anyone from obtaining certification. Any of the following questions that are answered "yes" must be explained to the Board. The explanation must be typed or printed in ink on a separate eight and a half (8 ½") by eleven (11") inch sheet of paper, signed and dated by the applicant and include all related court documents. All crimes must be reported, to include alcohol and drug related offenses. The only exceptions to this requirement are traffic offenses where the fine is less than one hundred dollars (\$100.00) and where the applicant has had fewer than four (4) traffic offenses within the preceding twenty-four (24) months. All traffic offenses involving drugs or alcohol must be reported regardless of the fine. Any alternative to sentencing that has been decreed by any political subdivision must be reported including, but not limited to: probation, fines, restitution, or community service.

- | | <u>Circle One</u> |
|---|-------------------|
| 1. Have you ever been a defendant in a court martial, Article 15, Captain's Mast or other non-judicial punishment? | Yes No |
| 2. Has a judgement ever been issued against you? | Yes No |
| 3. Have you ever declared bankruptcy? | Yes No |
| 4. Have you ever been arrested or charged with a crime? | Yes No |
| 5. Have you ever received any alternatives to sentencing such as probation before judgement, pretrial diversion, non-adjudication of guilt or have you ever had an expungement? | Yes No |
| 6. Have you ever been found guilty or pled guilty or no contest to a crime? | Yes No |
| 7. Have you ever been refused a surety bond or turned down for employment that required a surety bond? | Yes No |
| 8. Have you ever been involuntarily terminated from employment <u>or</u> have you ever resigned to prevent immediate termination either while there was an ongoing investigation into your activities or at the conclusion of any such investigation? | Yes No |
| 9. Have you ever been addicted to or hospitalized for the use of alcohol or drugs? | Yes No |
| 10. Have you ever had a certificate, license or privilege removed, revoked, suspended, or voluntarily relinquished the same under state, federal or other laws? | Yes No |

I, the undersigned, do hereby swear and affirm that I am a citizen of the United States, by birth or naturalization, that I have never been convicted of a felony or a misdemeanor involving moral turpitude, that I have a valid high school diploma or its equivalent, that my discharge (if any) from the Armed Forces was under honorable conditions, that I am of good moral character, that I have provided my employer with a full explanation (without any omissions) of each and every "yes" answer to the above questions, one (1) through ten (10) of Part II of the "Application for Certification" form and that these explanations (if any) are attached to this form, that I am at least eighteen (18) years old, that I have read and do hereby confirm that all of the information contained in this application is correct, and that all other information I furnish in conjunction with my application is true and correct.

Witness my signature this, the _____ day of _____, 20__.

Applicant's Signature

Print Applicant's Name