



APPLICATION FOR EMPLOYMENT

Macon County Sheriff's Office



Position applied for:



PERSONAL INFORMATION

Full Name: _____ **Date:** _____
First Middle Last

Address: _____
Street Address Apt/Suite

City State Zip Code

Email: _____

Phone: _____

Date of Birth: _____

MILITARY SERVICE

Are you a Veteran? ☐ YES ☐ NO **Branch:** _____

From: _____ **To:** _____ **Type of Discharge:** _____

Are you a member of active reserves? ☐ YES ☐ NO

Describe all Military Occupations: _____

Highest Rank Achieved? _____ **Rank at Discharge:** _____

EMPLOYMENT ELIGIBILITY

Have you ever been arrested or convicted of a crime? ☐ YES ☐ NO

If yes when and where: _____

Are you a citizen or legal resident of the United States? ☐ YES ☐ NO



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EDUCATION

High School: _____ City/State: _____

From: _____ To: _____ Graduate? ☐ YES ☐ NO Diploma? ☐ YES ☐ NO

College: _____ City/State: _____

From: _____ To: _____ Graduate? ☐ YES ☐ NO Degree: _____

Other: _____ City/State: _____

From: _____ To: _____ Degree/Certification: _____

Other: _____ City/State: _____

From: _____ To: _____ Degree/Certification: _____

What is your typing speed in words per minute? _____ Are you proficient in the use of the following computer programs?

Word ☐ YES ☐ NO

Excel ☐ YES ☐ NO

PowerPoint ☐ YES ☐ NO

CURRENT AND PREVIOUS EMPLOYMENT

EMPLOYER 1: _____

Company / Individual

Dates of Employment From: _____ To: _____

Email: _____ Phone: _____

Address: _____

Street Address

Apt/Suite

City

State

Zip

Starting pay: \$ _____ Ending Pay \$ _____ ☐ Hour ☐ Salary

Job Title: _____ Responsibilities: _____

Supervisor name: _____

Reason for leaving: _____



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Macon County Sheriff's Office



EMPLOYER 2: _____

Company / Individual

Dates of Employment From: _____ **To:** _____

Email: _____ **Phone:** _____

Address: _____

Street Address

Apt/Suite

City

State

Zip

Starting pay: \$ _____ **Ending Pay** \$ _____ ☐ Hour ☐ Salary

Job Title: _____ **Responsibilities:** _____

Supervisor name: _____

Reason for leaving: _____

EMPLOYER 3: _____

Company / Individual

Dates of Employment From: _____ **To:** _____

Email: _____ **Phone:** _____

Address: _____

Street Address

Apt/Suite

City

State

Zip

Starting pay: \$ _____ **Ending Pay** \$ _____ ☐ Hour ☐ Salary

Job Title: _____ **Responsibilities:** _____

Supervisor name: _____

Reason for leaving: _____

Submit to MCSO

CONSENT AND RELEASE FOR BACKGROUND INVESTIGATION

WITHOUT THE EXECUTION OF THIS CONSENT AND RELEASE FOR BACKGROUND INVESTIGATION, THE MACON COUNTY SHERIFF'S OFFICE IS PROHIBITED BY SECTION 6.5 (A) OF THE ILLINOIS POLICE TRAINING ACT FROM MAKING YOU ANY FINAL OFFER OF EMPLOYMENT AS A **FULL-TIME DEPUTY SHERIFF** WITH THE MACON COUNTY SHERIFF'S OFFICE.

Acknowledgment of Consent

I, _____, acknowledge that I am seeking employment in a safety-sensitive field and that establishing my employment eligibility requires a thorough investigation into my background and character.

Furthermore, I acknowledge and agree that as a condition of being considered for employment with the Macon County Sheriff's Office, or for maintaining my continued employment with the employer, it is required that I consent to a complete and thorough investigation of my background to determine whether I am a suitable candidate for the position of **Full-time Deputy Sheriff** with the Macon County Sheriff's Office.

Mandatory Background Investigation

I authorize the employer to conduct a background investigation of me, which shall include, but shall not be limited to, a:

- (1) a review of my complete employment history;
- (2) a review of my complete criminal history;
- (3) a review of driving records;
- (4) a background check with the Department of Children and Family Services;
- (5) interviews with my personal references;
- (6) a review of all internal investigation files from any previous employers;
- (7) a verification of academic credentials and licenses;
- (8) a review of my military service history, if any; and
- (9) a review of the Illinois Law Enforcement Training Standards Board's records and officer misconduct database.

Credit Check

I hereby consent to the employer obtaining and reviewing any credit and consumer reports, as permitted under the federal Fair Credit Reporting Act and local or state credit privacy laws, if applicable. I understand that the Fair Credit Reporting Act, 15 U.S.C. 1681, et seq., authorizes me to request a copy of any consumer credit report from the consumer reporting agency that compiled the report.

Consent to Release of Information

I hereby consent to the release of all employment records from my current and former employers, including, but not limited to:

- (1) job applications;
- (2) personnel files including Medical files;
- (3) internal investigations;
- (4) separation agreements;
- (5) pre-employment evaluations;
- (6) tests;
- (7) questionnaires;
- (8) fitness-for-duty examinations; and
- (9) training records
- (10) any other information obtained about me by the entity to whom this Consent is presented.

Consent to Required Interviews and Evaluations

I further agree to participate in a personal interview, testing process, polygraph examination, post-offer psychological evaluation and medical evaluation, or any combination of those examinations or tests, as determined by the Macon County Sheriff's Office.

Confidentiality

All information obtained by the Macon County Sheriff's Office under this background investigation shall be confidential and safeguarded against disclosure to all unauthorized persons as required by law. However, nothing prevents the Macon County Sheriff's Office from using the information obtained to evaluate my suitability for employment.

I specifically consent to the disclosure of information that may be covered by a settlement agreement or other confidentiality provision entered into with my former employers, and I waive any rights to enforce any prior confidentiality agreement against my former employer about this disclosure.

Waiver of Privacy

I waive any right or claim to privacy in such information and consent to the disclosure of information that may be exempt from disclosure by law.

I waive any right I may have to be notified by any individuals and organizations named in my application for employment before the release of any information to the Macon County

Sheriff's Office, including the release of information concerning any disciplinary action taken against me by former employers.

Indemnification

In exchange for this release of all of my personnel information, I, agree to release, discharge, and hold harmless any person, firm, or entity and their employees and agents that disclose information in response to receipt of this consent, from any liability for all claims, liabilities, causes of action, known or unknown, fixed or contingent, that arise from or that are in any manner connected to the disclosure of any personal information as described above. I further release and hold harmless the Macon County Sheriff's Office and the Macon County Sheriff's Office's respective personnel, employees, and agents from any liability resulting from or in connection with, the results of this background investigation concerning my fitness for employment or continued employment at the Macon County Sheriff's Office or the decision to hire me, not to hire me, or retain me in my position.

Signature

I agree to electronically sign this document and certify that I have read, understand, and agree to the terms and conditions set forth in this document and that this is a complete waiver under Section 10 of Employment Record Disclosure Act.

Signature: _____

Printed Name: _____

Date of Birth: _____

Last four SSN: _____

Date: _____



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



Illinois Police Training Act (50 ILCS 705/6.5) requires the Sheriff's Office to conduct a complete and thorough background check. This information will be used to determine your employment status. Knowingly and willfully excluding information requested can result in the rejection of your application.

PERSONAL INFORMATION

Full Name: _____ **Date:** _____
First Middle Last

Address: _____
Street Address Apt/Suite

City State Zip Code

Phone: _____

Date of Birth: _____ **State of Birth:** _____ **County of Birth:** _____

Social Security Number (SSN) _____

Previous names used: _____

List all identifying scars, marks, birthmarks or tattoos you have: _____



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



CREDIT HISTORY

Have you ever been refused credit? ☐ YES ☐ NO

If yes, indicated Names, Dates, Places and Reasons:

Please list below your current creditors who you do not pay off each month:

Name of Creditor	Address	Amount Indebited
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BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



COMPLETE EMPLOYMENT

This section needs to include a complete work history of every employer you have worked for. If you have a gap in your history, please explain in the notes provided at the bottom of this section. If you need additional pages complete on additional application. If you are current or previous Illinois corrections or law enforcement, please include PTB ID on the employer line

CURRENT/ RECENT EMPLOYER 1: _____

Company / Individual

Dates of Employment From: _____ **To:** _____

Email: _____ **Phone:** _____

Address: _____

Street Address

Apt/Suite

City

State

Zip

Starting pay: \$ _____ **Ending Pay** \$ _____ ☐ Hour ☐ Salary

Job Title: _____ **Responsibilities:** _____

Supervisor name: _____

Reason for leaving: _____

EMPLOYER 2: _____

Company / Individual

Dates of Employment From: _____ **To:** _____

Email: _____ **Phone:** _____

Address: _____

Street Address

Apt/Suite

City

State

Zip

Starting pay: \$ _____ **Ending Pay** \$ _____ ☐ Hour ☐ Salary



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



Job Title: _____ Responsibilities: _____

Supervisor name: _____

Reason for leaving: _____

EMPLOYER 3: _____

Company / Individual

Dates of Employment From: _____ To: _____

Email: _____ Phone: _____

Address: _____

Street Address

Apt/Suite

City State Zip

Starting pay: \$ _____ Ending Pay \$ _____ ☐ Hour ☐ Salary

Job Title: _____ Responsibilities: _____

Supervisor name: _____

Reason for leaving: _____

EMPLOYER 4: _____

Company / Individual

Dates of Employment From: _____ To: _____

Email: _____ Phone: _____

Address: _____

Street Address

Apt/Suite

City State Zip



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



Starting pay: \$ _____ Ending Pay \$ _____ ☐ Hour ☐ Salary

Job Title: _____ Responsibilities: _____

Supervisor name: _____

Reason for leaving: _____

EMPLOYER 5: _____

Company / Individual

Dates of Employment From: _____ To: _____

Email: _____ Phone: _____

Address: _____

Street Address

Apt/Suite

City

State

Zip

Starting pay: \$ _____ Ending Pay \$ _____ ☐ Hour ☐ Salary

Job Title: _____ Responsibilities: _____

Supervisor name: _____

Reason for leaving: _____

Notes: _____



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



REFERENCES (Personal only and no relatives)

Full Name: _____ **Relationship:** _____
First Last

Address: _____

Email: _____ **Phone:** _____

Full Name: _____ **Relationship:** _____
First Last

Address: _____

Email: _____ **Phone:** _____

Full Name: _____ **Relationship:** _____
First Last

Address: _____

Email: _____ **Phone:** _____

Full Name: _____ **Relationship:** _____
First Last

Address: _____

Email: _____ **Phone:** _____



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



ADDRESS HISTORY

Provide a list of all address you have lived in the past 10 years.

(1.) Current Address: _____

Street Address

Apt/Suite

City

State

Zip

List the names of all adults who reside at the above address with you. _____

(2.) Address: _____

Street Address

Apt/Suite

City

State

Zip

(3.) Address: _____

Street Address

Apt/Suite

City

State

Zip

(4.) Address: _____

Street Address

Apt/Suite

City

State

Zip

(5.) Address: _____

Street Address

Apt/Suite

City

State

Zip



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



SOCIAL MEDIA ACCOUNT DISCLOSED

List all internet or app based social media/networking accounts you have or have had:

- (1.) Social Platform: _____ User name/Screen name: _____
- (2.) Social Platform: _____ User name/Screen name: _____
- (3.) Social Platform: _____ User name/Screen name: _____
- (4.) Social Platform: _____ User name/Screen name: _____
- (5.) Social Platform: _____ User name/Screen name: _____
- (6.) Social Platform: _____ User name/Screen name: _____
- (7.) Social Platform: _____ User name/Screen name: _____

COMMUNITY INVOLVEMENT

Please list all community service or volunteer work you have performed in the past 2 years



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



PREVIOUS LAW ENFORCEMENT APPLICATIONS

Applicants who have previously applied for, or are currently seeking, a law enforcement or corrections position must fully disclose all relevant information in this section.

(1.) Applied Agency: _____

Date of Application: _____ Title of Position: _____

Is the Process still pending? ☐ YES ☐ NO

(2.) Applied Agency: _____

Date of Application: _____ Title of Position: _____

Is the Process still pending? ☐ YES ☐ NO

(3.) Applied Agency: _____

Date of Application: _____ Title of Position: _____

Is the Process still pending? ☐ YES ☐ NO

Have you completed an internship with any law enforcement agency or participated in any ride along programs? Please list the agency and dates.



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



DRIVING AND CRIMINAL HISTORY

Has your driver's license ever been suspended or revoked? ☐ YES ☐ NO

List all traffic citations you have been issued regardless of the outcome of the citation (include date, county, and state) _____

Have you ever been arrested for a crime? ☐ YES ☐ NO

Have you ever had an Order of Protection against you? ☐ YES ☐ NO

If you answered yes to any of the above question provide details (include date, county and state)

PREA QUESTIONNAIRE

1. Have you ever engaged in sexual abuse in a prison, jail, lockup community confinement facility, juvenile facility, or other institution? ☐ YES ☐ NO
2. Have you ever been convicted of engaging or attempting to engage in sexual activity in a community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☐ YES ☐ NO
3. Have you ever been civilly or administratively adjudicated to have engaged in the activity described in #2 of this section? ☐ YES ☐ NO

If you answered yes to any of the above questions explain when and where and details: _____



BACKGROUND INVESTIGATION

Macon County Sheriff's Office

DEPUTY SHERIFF



I hereby certify that there are no willful misrepresentations, omissions, or false statements made by me in this Background Questionnaire; and all of my answers are true and correct to the best of my knowledge and belief. To the best of my knowledge and belief, this Questionnaire is entirely complete as submitted. I also understand that any misrepresentations, omissions, false statements, or failure to entirely complete this Questionnaire will immediately deny me from further consideration for any position with the Macon County Sheriff's Office.

Applicant's Signature

Date