Application for Employment Civil Service Board Lauderdale County Sheriff's Dept.

We are an Equal Opportunity Employer

The application must be fully completed to be considered. Please complete each section, even if you include a resume. Please print or write clearly.

| Position | | | | | | | |
|-------------------------|--------------|---------------|---------------|-----------------------|---------------------|--------------------------------|--|
| Position Applied F | or | | | Position | Туре | | |
| | | | I | F | Full-Time | Part-Time | |
| Date of Applicatio | n | | | Available Start Date | | | |
| | | | | | | | |
| Personal Info | rmatio | n | | | | | |
| Name | | | | | | | |
| Address | | | City | | State | Zip | |
| Phone Number | | Mobile N | Mobile Number | | Email Address | | |
| Date of Birth | Weight | | Eye Colo | ır | Hair Color | Gender | |
| Social Security Number | | | | Driver License Number | | | |
| Marital Status (Se | lect One) | , <u> </u> | , | | | | |
| | Single | | ivorced | <u>V</u> | Nidowed | Separated | |
| Do you have any dep | endent chi | ildren? If so | ၁, how mar | ny? | | | |
| Are you a resident of | Lauderdal | e County? | | | | | |
| Are you related to anyo | one employ | ed by Laude | erdale Coun | ity? If so, wh | nat is their name a | and department? | |
| Have you ever been Ar | rested, Plac | ed under Bo | ond, Charge | ed or Cited fo | or Violations of a | ny Law? If so, please explain. | |
| Do you have any specia | al training? | If so, please | explain. | | | | |

| W | or | L | ist | | r |
|----|----|----------|--------------|---|------|
| vv | U | | \mathbf{D} | U | LIA' |

Please read carefully. In the areas below, please list all of your work experience, beginning with your most recent job. It is very important that you provide accurate information about each employer, your job duties, and accurate dates of employment. We will not consider job experience that does not contain the required information. If more space is needed, please attach extra copies to your application.

| Name of Employer | Dates Employed (MM/YY) | Ending Pay |
|---------------------|------------------------|------------|
| · · · | From: / To: / | |
| Address | Job Duties | |
| Phone Number | | |
| Supervisor | Other Notes | |
| Job Title | | |
| Reason for Leaving | | |
| Name of Employer | Dates Employed (MM/YY) | Ending Pay |
| ruanic or aniproye. | From: / To: / | |
| Address | Job Duties | • |
| Phone Number | 1 | |
| Supervisor | Other Notes | |
| Job Title | | |
| Reason for Leaving | | |
| Name of Employer | Dates Employed (MM/YY) | Ending Pay |
| . , | From: / To: / | , |
| Address | Job Duties | |
| Phone Number | | |
| Supervisor | Other Notes | |
| Job Title | | |
| Reason for Leaving | | |

| dditional | Information | | | | |
|--------------|-------------------------------------|--------------------|---------------------|-----------|----------|
| | | | | Yes | No |
| • | l in the Armed Forces of | | | | |
| anch | Date of Discharge Type of Discharge | | charge | | |
| | | | | | |
| | | | | | |
| you have a D | isability Rating from the | Service or any Oth | ner Source? | | |
| ting | | | | | • |
| | | | | | |
| | | | | | |
| ducation | | | | | |
| School | School N | 200 | Voors Attended | Major | /N/liner |
| School | SCHOOLN | ame | Years Attended | lviajor, | /Minor |
| High School | | | | | |
| | | | | | |
| 0.11 | | | | | |
| College | | | | | |
| | | | | | |
| | | | | | |
| pplicant C | omments | | | | |
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| part of this | application you are als | o required to at | tach the following | • | |
| | 4.0 ()// 5 | | · | | |
| | 1. Copy of Voters Re | _ | | | |
| | 2. At Least Three (3) |) Letters of Reco | mmendation from | people v | vho w |
| | certify as to your ch | aracter and mor | als | | |
| | 3. A Copy of your G | ED Certificate, if | used in Lieu of a D | iploma | |
| | 4. College Transcrip | ts if Applicable | | | |
| | 5. If you are not APO | OST Certified, yo | u will need a copy | of your A | ACT |
| | WorkKeys. | . • | . , | - | |

READ CAREFULLY BEFORE SIGNING

| I hereby certify that the answers to the questions on this application are true and correct |
|--|
| to the best of my knowledge and belief. I understand that any misrepresentation on my |
| part to the Civil Service Board forfeits all my rights to employment. I also agree to this |
| application being made a part of my permanent record with the department and with the |
| Civil Service Board and may be used by them for any lawful purpose. I further agree, that |
| if I am employed, I will perform my duties regardless of assignments and duties, when |
| ordered by a superior officer. I also agree if I am employed, to attend schools and training |
| courses when offered or ordered by the department. I understand that I must attend |
| Police Officer School as ordered by the Legislature of the State of Alabama, and I also |
| agree to do so. |
| |

I agree that my signature (electronic or written) on this application is binding and enforceable. I acknowledge and agree that by submitting this signature electronically, I waive all rights to dispute the validity of my signature on this application.

I certify that I have read, fully understand, and accept all terms of this employment application.

| Signature | Date |
|-----------|------|

| Lauderdale County Sheriff's Office Background Investigation Consent | | | | |
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| agents to make an independent employment, education, crimina private organizations) and all pu on my application and/or obtain | , hereby authorize the Lauderdale County Sheriff's Office and/or its investigation of my background, references, character, past all or police records (including those maintained by both public and blic records for the purpose of confirming the information contained ing other information, which may be material to my qualifications as a d, if applicable, during my tenure of my volunteering or employment riff's Office. | | | |
| provides information pursuant t | Sheriff's Office and/or its agents and any person or entity which o this authorization, from any and all liabilities, claims, or lawsuits in ned from any and all of the above referenced sources used. | | | |
| Signed: | Date: | | | |

NOTICE

ACT WORKEYS ASSESSMENT ADOPTED AS BASIC ABILITY TEST (BAT)

** EFFECTIVE JULY 1, 2017 **

In partnership with the Alabama Community College System, the Alabama Peace Officers' Standards and Training Commission (APOSTC) has adopted the ACT WorkKeys Assessment as the official Basic Ability Test (BAT) for all applicants for Law Enforcement Officer and State Correctional Officer employment and certification. This requirement is effective July 1, 2017.

In addition to possession of a valid high school diploma or General Educational Development (GED) certificate, the BAT is required of all applicants, excepting those applicants who have been previously APOSTC certified and who are required to complete the Refresher training for reinstatement of their Certification, or, those applicants possessing an earned Associate's Degree or higher Degree from a College or University accredited by the Southern Association of Colleges and Schools (SACS), or its regional equivalent.

Individuals who do not possess a valid ACT WorkKeys Assessment (BAT) may test at any Alabama Community College within the State. A list of Alabama Community Colleges can be found here. Applicants or their agencies may contact the community college nearest their location for scheduling and other related information.

A fee of \$45, payable to the community college, is required prior to testing. Should an applicant fail any segment of the three segment test, the applicant is allowed to re-take that segment for an additional fee of \$15 per segment.

The ACT WorkKeys Assessment is available nationwide. Subject to the employing agency's approval, out-of-state applicants may take the ACT WorkKeys Assessment (BAT) in their home state provided proper documentation of a valid test result is submitted to both the employing agency and APOSTC.

For complete information relating to the BAT and ACT WorkKeys Assessment requirements please read the entire text of Chapter Two (2) of the Alabama (APOSTC) Administrative Code, as amended. Also review the "Frequently Asked Questions" section of this website under "What is the Basic Ability Test (BAT)?

NOTE: Our nearest community college is Northwest-Shoals. For more information, please contact Rita Thorne, Competency Testing Lab Manager II. Her phone number is 256-331-5482. Her email address is rthorne@nwscc.edu.