

Ben Roeber
Sheriff



Dale W Rogers
Chief Deputy

Authorization to Release Information

Name of Applicant: _____
Please print your full name

Date of Birth: _____ SSN# _____

As an applicant for a position with the Boise County Sheriff's Department I am required to furnish information for use in determining my qualifications and suitability. I realize that this agency will not release the information provided to them to any person, including myself. The information submitted to this agency is confidential and will be used only for investigating my suitability for law enforcement employment.

Toward this end, I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature. I hereby authorize all my previous employers, physicians, and professionals who may have examined or treated me, friends, acquaintances, credit reporting services, public agencies, and all others, to furnish to the Boise County Sheriff's Department any and all information they may have concerning me.

I hereby release you, your organization, or others, from liability or damage, which may result from furnishing the information requested. I further authorized that a photocopy of this form shall be for all intents and purposes, as valid as the original. I authorize you to retain a copy for your files.

This release is valid for any information supplied within one (1) year of the date of my signature.

Signature of Applicant: _____ Date: _____

Subscribed and Sworn to before me this _____ day of _____, 20____.

Notary Public in and for said County of _____.

State of _____

Notary Public

PERSONAL HISTORY STATEMENT

REQUIRED DOCUMENTS

Attach copies, **unless originals are requested**, of the following documents to this questionnaire. Failure to submit these documents in a timely manner will delay your consideration for employment. Some of these documents may not be applicable to you. Please indicate those that are attached with a check mark in the space provided.

- 1. Signed and notarized waivers. **(4)**
- 2. High school diploma or GED certificate. (Original or transcripts **MUST** be received by us in an **officially sealed envelope from the school**).
- 3. Transcripts from colleges or universities. (Original **MUST** be received by us in an **officially sealed envelope from the school**).
- 4. Military discharge papers. (**MUST** include discharge status – Long Form).
- 5. Citizenship or naturalization papers.
- 6. Certified copy of your birth certificate. (NO PHOTO COPIES)
- 7. All marriage licenses and divorce decrees.
- 8. Name change documents.
- 9. Peace Officer Standards and Training certificate of graduation from a Police academy.
- 10. Tax Information Authorization – IRS Form 8821 (included) **Section #7 Sign/Date only**

OPTIONAL DOCUMENTS

- 1. Copies of other certificates, awards or commendations you would like considered.

- 2. A full-face photograph of yourself, no smaller than 2.5" x 2.5". This photo must have been taken within the last three months. This is not required, but it is of assistance in identifying you during interviews conducted during the background investigation.

Attach
Photo
Here

**Boise County Sheriffs' Department
P.O. Box 189
Idaho City, ID 83631**

POSITION APPLIED FOR:

PATROL DEPUTY	<input type="checkbox"/>	Full-Time – or	<input type="checkbox"/>	Reserve
DETENTION DEPUTY	<input type="checkbox"/>	Full-Time – or	<input type="checkbox"/>	Part-Time
DISPATCH	<input type="checkbox"/>	Full-Time – or	<input type="checkbox"/>	Part-Time
ADMINISTRATIVE	<input type="checkbox"/>	Full-Time – or	<input type="checkbox"/>	Part-Time
OTHER: _____	<input type="checkbox"/>	Full-Time – or	<input type="checkbox"/>	Part-Time

APPLICANT PERSONAL HISTORY STATEMENT

INSTRUCTIONS TO THE APPLICANT:

The information you provide in this Personal History Statement will be used to assist in determining your suitability for employment with the Boise County Sheriff's Department. An extensive background investigation will be conducted into your personal history prior to any hiring. Your background will be submitted to a Hiring Review Board. If the Board makes a favorable recommendation, you will be given a conditional offer of employment. This initial offer is conditional upon your successful completion of a physical agility test (you must pass or have passed this test within forty-five days prior to the academy start date), a polygraph examination, a medical examination, a drug screening test, and other tests required by this agency. Based on the results of this final testing and further review by the Hiring Review Board, you may then be offered a position.

Keep in mind that:

1. The completion of this questionnaire is mandatory, as authorized by Boise County Policy and the regulations of the Idaho Peace Officers Standards and Training (P.O.S.T) Commission.
2. All statements are subject to verification.

3. Deliberate inaccuracies or incomplete statements will bar or remove you from any consideration for employment.
3. All time periods in your background, unless otherwise specified, must be accounted for.

It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of the circumstances surrounding its occurrence, and consideration will be given to the degree of relevance it has to employment with a law enforcement agency. For example, having been fired from a job or having an arrest record may not, in and of itself, disqualify you from consideration for employment. During the investigation, the investigator will inquire into the facts surrounding each occurrence and an evaluation will then be made about the relevance of these facts to the requirements of the position for which you have applied.

Please print your response to this questionnaire in ink. **DO NOT** type on this form, and do not have another person make entries for you. If a question does not apply to you, write "N/A" in the space provided for your answer. **If you need additional space to answer a question, use a blank sheet of paper and attach it to this questionnaire. Remember to identify the additional information by the question number.**

Please read the five (5) waivers at the end of this packet carefully and have your signature notarized before returning them to our office.

The contents of this questionnaire will be considered **confidential** and will be used only for investigating employment suitability with the Boise County Sheriff's Department or another law enforcement agency in possession of a notarized permission waiver signed by you.

There is one exception to the confidentiality of your background investigation. Should it be discovered that you are currently involved in criminal activity, or have committed an undiscovered felony, the law enforcement agency having jurisdiction WILL BE NOTIFIED.

When complete, return this questionnaire along with all attachments, to the Boise County Sheriff's Department, either by mailing it to the address at the top of this

letter, or in person at the main desk, located at 3851 Highway 21, Idaho City, ID 83631.

Any questions you may have regarding the completion of this packet may be addressed by contacting the Background Investigator at 208-392-4411.

I have read and completely understand the above statement.

Signature of Applicant

Date

Do not sign below until the time of your interview with the Investigating Officer.

The previous statement was verbally read to me. I was given the opportunity to ask questions and have them thoroughly explained to me.

Signature of Applicant

Date

Investigating Officer / Background Investigator

Date

Signature of Investigating Officer / Background Investigator

PERSONAL HISTORY STATEMENT

RELATIVES, REFERENCES, ACQUAINTANCES

During the course of the background investigation, persons who know you will be asked to comment upon your suitability for the position for which you have applied. Inquiries will be confined to job-relevant matters.

7. Please supply the appropriate information in the spaces below. If a category is not applicable, write "N/A".

<u>Name</u>	<u>Address where person can be contacted (include City, State, and Zip Code)</u>	<u>Phone number</u>
Father		
Mother		
Father-in-law		
Mother-in-law		
Spouse		
Former Spouse(s)		
Brothers/Sister(s)		
Step-Father		
Step-Mother		
Step-Brother/Sister(s)		
List all offspring. (Please indicate "son" or "daughter" and whether natural, adopted, from another marriage, etc. List current address and phone number as above.)		

RELATIVES, REFERENCES, AQUAINTENCES (Continued):

8. List as personal or professional references 3-5 individuals who have knowledge of you and your qualifications.

NAME/RELATIONSHIP	ADDRESS	TELEPHONE

9. List individuals with whom you have resided within the past 10 years. List no information prior to your 15th birthday. **Exclude family members.**

NAME	ADDRESS	TELEPHONE

RESIDENCE

10. Please list all of your residences during the last 10 years. Begin with your most current residence and proceed backward. If a residence was rented, give the landlord's name, address and telephone number. List no information prior to your 15th birthday.

ADDRESS OF RESIDENCE	DATES (TO/FROM)	REASON FOR LEAVING	LANDLORD INFORMATION

EDUCATION:

11. The Commission on Peace Officer Standards and Training requires a peace officer to possess a high school diploma or its equivalent. Please indicate your current status with regard to this requirement by checking the appropriate spaces.

_____ I possess a high school diploma.

_____ I passed the G.E.D. (General Educational Development) test.

_____ I possess the following college degrees (please include the name of the college and year attained):

12. List all the schools you have attended, beginning with high school. During the background investigation, persons who have known you in a learning environment may be contacted. A review of your school records may be made in conjunction with those contacts.

NAME OF SCHOOL	LOCATION CITY AND STATE	DATES OF ATTENDANCE	TEACHER OR REFERENCE

13. Have you ever been suspended or expelled from any high school or post-secondary school? (Post-secondary schools include colleges and universities, graduate schools, business and vocation schools and any other formal education beyond the high school level.)

YES _____ NO _____

If "YES", please explain (include school, date and circumstances): _____

EXPERIENCE AND EMPLOYMENT (Continued):

NAME & ADDRESS OF EMPLOYER: _____

Telephone _____

Dates of employment: From: _____ To: _____
Full-time _____ Part-time _____ Voluntary _____ Military Service _____
Title or duties: _____
Name you were known by: _____
Name of supervisor: _____
Names of co-workers: (1) _____
(2) _____
(3) _____
Reason for leaving: _____

UNEMPLOYED FROM _____ TO _____

NAME & ADDRESS OF EMPLOYER: _____

Telephone _____

Dates of employment: From: _____ To: _____
Full-time _____ Part-time _____ Voluntary _____ Military Service _____
Title or duties: _____
Name you were known by: _____
Name of supervisor: _____
Names of co-workers: (1) _____
(2) _____
(3) _____
Reason for leaving: _____

UNEMPLOYED FROM _____ TO _____

NAME & ADDRESS OF EMPLOYER: _____

Telephone _____

Dates of employment: From: _____ To: _____
Full-time _____ Part-time _____ Voluntary _____ Military Service _____
Title or duties: _____
Name you were known by: _____
Name of supervisor: _____
Names of co-workers: (1) _____
(2) _____
(3) _____
Reason for leaving: _____

UNEMPLOYED FROM _____ TO _____

EXPERIENCE AND EMPLOYMENT (Continued):

18. Have you ever applied, successfully or unsuccessfully for another position with any other law enforcement agency? YES _____ NO _____ If "YES", please provide the year, agency, and check off the processes, which you completed, and whether you were disqualified or hired.

Yr	Agency	Written	Physical Agility	Oral Interview	Background	Polygraph	Psych	Medical Exam	Disqualified	Hired

MILITARY SERVICE

19. Have you ever served in the Armed Forces, National Guard or Military Reserves?
 YES _____ NO _____ If "YES", please supply the following information:
 Branch of Service: _____ Service number: _____
 Dates of Service: _____ to _____
 Type of discharge: _____

20. Have you ever registered with the Selective Service? YES _____ NO _____ If "YES", when? _____

21. Have you ever been the subject of any judicial or non-judicial disciplinary action while in the Military, National Guard, or Military Reserves? YES _____ NO _____
 If "YES", please give details to include branch of service, when, where, circumstances, Etc. _____

MILITARY SERVICE (Continued):

22. Past commanding officers or other military acquaintances are potential sources of relevant information pertaining to your background. Please list those individuals who know you well enough to provide accurate information about you.

NAME	ADDRESS	TELEPHONE	MILITARY UNIT	DATES

FINANCIAL

23. The management of personal finances is relevant to an individual's qualifications for a position with a law enforcement agency. Therefore, please fill in the financial statement that follows. The amount of indebtedness, in itself, will not be used in evaluating your qualifications. The behavior exhibited in meeting your financial obligations will be reviewed. A credit-reporting agency will be contacted for a report of your credit history.

CURRENT MONTHLY INCOME		CURRENT MONTHLY EXPENDITURES	
Monthly salary		Mortgage payment(s)	
Spouse's salary		Rent	
Other monthly income		Other monthly payments	
		Estimate monthly cost of living (include utilities, food, gasoline, home & car maintenance, etc.) and any other obligations.	
Total Monthly Income		Total Monthly Expenditures	

FINANCIAL (Continued):

CURRENT ASSETS		CURRENT LIABILITIES	
Savings		Mortgage(s)	
Checking balance		Automobile loan(s)	
Real Estate (appraised or assessed value)		Charge accounts (total)	
Stocks and Bonds		Other liabilities (describe):	
Life Insurance (cash value)			
Automobiles			
Other assets (describe):			
Total Assets		Total Liabilities	

24. Please supply the following information regarding financial institutions that you have accounts or loans with:

Institution (Bank, S&L or Loan Company)	Account Number	Type of Account (checking, savings, loan)

25. Please supply the following information about your charge accounts, contracts, or Other financial liabilities:

Name of Firm	Address	Account Number

FINANCIAL (Continued):

26. Have you ever filed for or declared bankruptcy or filed for the Wage Earner's Plan?
 YES ___ NO ___ If "YES", please give details to include when, where and why.

27. Within the last seven (7) years, have any of your bills ever been turned over to a collection agency? YES _____ NO _____ If "YES", please give details to include when, firms involved and circumstances. _____

28. Within the last seven (7) years, have you ever had purchased goods repossessed? YES _____ NO _____ If "YES", please give details to include when, firms involved, and circumstances. _____

29. Within the last seven (7) years, have your wages ever been garnished? YES _____ NO _____ If "YES", please give details to include when, where and why. _____

30. Have you ever been delinquent on child support, income tax, or other tax payments? YES _____ NO _____ If "YES", please give details to include when, where and why. _____

LEGAL

31. If you have ever been arrested, taken into **physical custody**, been issued a misdemeanor citation (**exclude traffic citations**), or convicted of any crime, please give the following information. (The fact that your record may have been affected by a sealing, an expungement, a release, or a pardon has specific legal implications as to how you answer this question.)

DATE	AGENCY/LOCATION	CHARGE	DISPOSITION

32. As an adult, have you ever been placed on probation by any court? **YES** _____
NO _____ If "YES", please give details to include when, where and why. _____

33. Please list any other crimes you have committed, **REGARDLESS** of whether stopped, arrested, and/or convicted, to include what, when, where, how and why. _____

34. Are you now or have you ever been involved as a defendant in any civil court action? **YES** _____ **NO** _____
If "YES", please give details to include when, where, name of court and circumstances. _____

MOTOR VEHICLE OPERATION

35. Operation of a motor vehicle is an integral part of the position for which you have applied. An investigation of your driving history will be made through a records check. Please supply the following information:

 Driver's License Number State Name as Printed on License

36. Please list other states where you have been licensed to operate a motor vehicle:

State	Name under which license was issued

37. Have you ever been refused a driver's license by any state? YES _____ NO _____
 If "YES", please explain when, where and why. _____

38. Has your driver's license ever been suspended, revoked or placed on negligent operator's probation or restriction? YES _____ NO _____ If "YES", please give details to include when, where and under what circumstances. _____

39. Please list all traffic citations you have received as an adult (after reaching the age of 18). **Exclude parking citations.**

Nature of Violation	Location (City, State)	Approximate date	Disposition

MOTOR VEHICLE OPERATION (Continued):

40. Please list all motor vehicle accidents in which you have been involved as a driver within the past seven (7) years.

Date	Location (City, State)	Investigating Agency	Injury or Non-injury

41. Is there anything you wish to discuss about your driving record which has not already been covered in the preceding sections, please explain. _____

42. Please list all vehicles registered to you and/or your spouse.

Year	Make	Model	License Number	Vehicle ID Number (VIN)

MOTOR VEHICLE OPERATION (Continued):

43. Idaho Law requires that operators and owners of motor vehicles be covered by automobile liability insurance or possess a Certificate of Self-Insurance with the Department of Motor Vehicles. Therefore, please list the current liability insurance coverage that you have on your motor vehicles.

Company	Address	Policy Number	Expiration Date

44. Have you ever been refused auto insurance for any reason, other than failure to pay a premium? YES _____ NO _____ If "YES", please explain, including the company name, date and reason. _____

GENERAL INFORMATION:

45. Are you now, or have you ever been a member of any foreign or domestic organization, association, movement or group of persons that is, or was, totalitarian, fascist, communist, or subversive in nature, or which has adopted or expressed a policy of advocating or approving of the commission of acts of force or violence as a means to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means? YES _____ NO _____ If "YES", identify the organization and explain fully.

46. Have you ever applied for a permit to carry a concealed firearm or other weapon? YES _____ NO _____ If "YES", was the permit granted? _____
Date issued _____ Name of Law Enforcement Agency _____
Purpose of permit _____

47. Are you willing to work all hours of the day, all days of the week, holidays and overtime when assigned? YES _____ NO _____

48. If the necessity arose in the course of your employment to use deadly force on a human being, would you have any reluctance to do so? YES _____ NO _____

49. Do you have anything in your background that may disqualify you from becoming a Peace Officer in the State of Idaho? YES _____ NO _____ If "YES", please explain. _____

DRUG USE QUESTIONNAIRE:

50. Have you used, tried, experimented or in any way introduced into your body by any means:

Drug	YES	NO	Date First Used	Date Last Used	Used Once
Marijuana					
Hashish, Hashish Oil					
Cocaine					
Crack, Rock, Ice					
Barbiturates, Hypnotics, or "Downers"					
Amphetamines (Cross-tops, White, Bennies, "Uppers")					
Methamphetamines (Speed, Crank)					
LSD or other Hallucinogens					
PCP (Angel Dust, Sherm)					
Heroin or other Opiates					
Steroids					
Pharmaceutical drugs not prescribed for you					

Questionnaire	YES	NO
Is there any other illegal drug, narcotic or controlled substance not listed above that you have introduced into your body?		
Have you introduced into your body a substance which you thought was an illegal drug and then found out that it was not?		
Have you ever injected an illegal drug into your body?		
Have you ever sold any illegal drug?		
Have you ever purchased any drug, narcotic, or controlled substance other than by a doctor's prescription?		
Have you ever participated in the manufacturing, cultivation, or production of any illegal drug, narcotic or controlled substance?		
Have you ever acted as a courier by transporting any illegal drug, narcotic or controlled substance?		
Have you ever acted as a middle man, go-between, or "done a friend a favor" by becoming involved in any illegal drug transaction?		
Have you ever told anyone where to purchase illegal drugs?		
Have you ever temporarily stored or "held" any illegal drug, narcotic or controlled substance?		
Have you ever had illegal drugs in your possession while at work?		
Have you ever bought or sold any illegal drug at work?		
Are any illegal drugs presently in your home or car?		

OPTIONAL INFORMATION

53. List organizations, clubs, professional societies, or other associations of which you are, or have been, a member (please include the name of the group, the city and state, and your present status or position in the group).

54: What are your personal hobbies? (What do you like to do during the times that you are not at work?) Please include any special skills or qualifications that might be useful in the position for which you've applied.

55. List the magazines and newspapers to which you currently subscribe:

56. List any identifying marks, scars, tattoos, burns or birthmarks:

Pre-Employment Investigation Discovery Waiver

As an applicant to the Boise County Sheriff's Department for the position of _____, I recognize that an employing law enforcement agency has a legal, as well as a moral obligation, to take every reasonable effort to ensure that persons employed by them as peace officers, or in other positions, conform to the very highest standards.

Therefore, I release and hold harmless the Boise County Sheriff's Department and their officers, agents, or assigns, now and in the future, from any claim or damages in law of inequity on behalf of myself, my heirs and assigns, for their refusal to make available any and all of the information contained in this pre-employment investigation, including, but not limited to, the identity(ies) of any person(s) and/or organization(s) which may have supplied information in the course of this investigation, as well as the substance of any information supplied.

I hereby waive my right, now and in the future, to examine, review, or otherwise discover the contents of this investigation and all related documents thereto.

Dated this _____ day of _____, 20__.

Signature of Applicant

Subscribed and Sworn to before me the _____ day of _____, 20__.

Notary Public in and for the County of _____, State of _____,

Notary Public

CERTIFICATION AND PENALTY

I hereby declare that all statements and information provided to the Boise County Sheriff's Department in this Personal History Statement, as well as any other statements and information provided for my pre-employment background investigation or any other phase of my pre-employment screening, are true and complete to the best of my knowledge and belief. I understand that any mis-statement of material fact, willful omission of material fact, or willful deception, will be cause for disqualification and rejection as a candidate for employment, without appeal. I further understand that these aforementioned mis-statements, omissions, or deceptions are also ground for termination after employment, without notice and without any right of appeal.

Signature of Applicant

Date

Subscribed and Sworn to before me this _____ day of _____, 20__.

Notary Public in and for the said County of _____,

State of _____

Notary Public

CHILD SUPPORT DECLARATION

Please initial the appropriate response. Failure to initial one of the three will result in the denial of your application.

I am not subject to a court order for the support of a child.

I am subject to a court order for the support of one or more children and I am in compliance with the order, or I am in compliance with a plan approved by the District Attorney (or other public agency), enforcing the order for the repayment of the amount owed, pursuant to the order.

I am subject to a court order for the support of one or more children and I am **NOT** in compliance with the order or a plan approved by the District Attorney (or other public agency), enforcing the order for the repayment of the amount owed, pursuant to the order.

Applicant's Name and Social Security Number:

Signature of Applicant

Date

Subscribed and Sworn to before me the _____ day of _____, 20__.

Notary Public in and for said County of _____,

State of _____

Notary Public

FINAL HIRING REVIEW BOARD - TRACKING SHEET

Name of Applicant: _____

Date/Time of Initial Hiring Board: _____

Deputy's present and record of vote for approval:

<u>Voting Deputies Present</u>	<u>Present</u>		<u>Vote</u>		<u>Areas of Concern</u>
	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Non-Voting Deputies Present:	<u>Present</u>	
	<u>Yes</u>	<u>No</u>
Legal Advisor _____	_____	_____
Sergeant _____	_____	_____
Deputy _____	_____	_____
Deputy _____	_____	_____
Deputy _____	_____	_____
Deputy Asst _____	_____	_____

Date notification letter sent: _____ Personal Contact: _____

Hire Date: _____ Referred To: _____

Letter of Understanding

I am applying for a position with the Boise County Sheriff's Department. I understand that there are certain requirements that I must meet before I can be accepted into this position. I understand that I must submit to an extensive background investigation, which consists of the following areas of concern, at a minimum:

- Review of my completed Personal History Statement
- Evaluation of a Johnson/Roberts Personal History Questionnaire
- Thorough criminal background check
- Thorough examination of prior employment
- Examination of my personal credit/financial report

A Hiring Review Board will evaluate the results of this investigation and make a preliminary decision as to my potential suitability for employment. I may at this point receive a conditional offer of employment, which will be followed by completion of some or all of the following tests, depending on the position being sought:

- Polygraph examination
- Drug screening test
- Standard medical examination
- Hearing test

- Physical abilities test

The aforementioned tests will be administered in a manner selected by the Boise County Sheriff's Department. I understand that the results of the tests are the property of the agency to which I have applied, and that I will not receive copies of the reports nor any information contained in them, except as it may relate to a serious condition discovered by the examining physician.

A second Hiring Review Board will evaluate all tests in light of the requirements of the job, along with the previous information and will make a final decision as to my suitability for employment.

I agree to assist in the expedient conclusion of these reviews and examinations. I understand that successful completion of this process does not guarantee employment with the Boise County Sheriff's Department, only that I will be considered for positions as they become available, pursuant to established rules and regulations of the Boise County Sheriff's Department. I have read and understand the content and purpose of this Letter of Understanding. I agree to abide by these requirements as a condition of employment with the Boise County Sheriff's Department.

Signature of Applicant _____

Subscribed and Sworn to before me this _____ day of _____, 20__.

Notary Public in and for said County of _____.

State of _____.

Notary Public

Ben Roeber
Sheriff



Dale W Rogers
Chief Deputy

Authorization to Release Information

Name of Applicant: _____
Please print your full name

Date of Birth: _____ SSN# _____

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Toward this end, I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature. I hereby authorize all my previous employers, physicians, and professionals who may have examined or treated me, friends, acquaintances, credit reporting services, public agencies, and all others, to furnish to the Boise County Sheriff's Department any and all information they may have concerning me.

I hereby release you, your organization, or others, from liability or damage, which may result from furnishing the information requested. I further authorized that a photocopy of this form shall be for all intents and purposes, as valid as the original. I authorize you to retain a copy for your files.

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- ___ 3. Transcripts from colleges or universities. (Original **MUST** be received by us in an **officially sealed envelope from the school**).
- ___ 4. Military discharge papers. (**MUST** include discharge status – Long Form).
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- ___ 8. Name change documents.
- ___ 9. Peace Officer Standards and Training certificate of graduation from a Police academy.
- ___ 10. Tax Information Authorization – IRS Form 8821 (included) **Section #7 Sign/Date only**

OPTIONAL DOCUMENTS

- 1. Copies of other certificates, awards or commendations you would like considered.

- 2. A full-face photograph of yourself, no smaller than 2.5" x 2.5". This photo must have been taken within the last three months. This is not required, but it is of assistance in identifying you during interviews conducted during the background investigation.

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Photo
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Ben Roeber
Sheriff



Dale W Rogers
Chief Deputy

Authorization to Release Information

Name of Applicant: _____
Please print your full name

Date of Birth: _____ SSN# _____

As an applicant for a position with the Boise County Sheriff's Department I am required to furnish information for use in determining my qualifications and suitability. I realize that this agency will not release the information provided to them to any person, including myself. The information submitted to this agency is confidential and will be used only for investigating my suitability for law enforcement employment.

Toward this end, I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature. I hereby authorize all my previous employers, physicians, and professionals who may have examined or treated me, friends, acquaintances, credit reporting services, public agencies, and all others, to furnish to the Boise County Sheriff's Department any and all information they may have concerning me.

I hereby release you, your organization, or others, from liability or damage, which may result from furnishing the information requested. I further authorized that a photocopy of this form shall be for all intents and purposes, as valid as the original. I authorize you to retain a copy for your files.

This release is valid for any information supplied within one (1) year of the date of my signature.

Signature of Applicant: _____ Date: _____

Subscribed and Sworn to before me this _____ day of _____, 20____.

Notary Public in and for said County of _____.

State of _____

Notary Public

**Boise County Sheriffs' Department
P.O. Box 189
Idaho City, ID 83631**

POSITION APPLIED FOR:

PATROL DEPUTY	<input type="checkbox"/> Full-Time – or	<input type="checkbox"/> Reserve
DETENTION DEPUTY	<input type="checkbox"/> Full-Time – or	<input type="checkbox"/> Part-Time
DISPATCH	<input type="checkbox"/> Full-Time – or	<input type="checkbox"/> Part-Time
ADMINISTRATIVE	<input type="checkbox"/> Full-Time – or	<input type="checkbox"/> Part-Time
OTHER: _____	<input type="checkbox"/> Full-Time – or	<input type="checkbox"/> Part-Time

APPLICANT PERSONAL HISTORY STATEMENT

INSTRUCTIONS TO THE APPLICANT:

The information you provide in this Personal History Statement will be used to assist in determining your suitability for employment with the Boise County Sheriff's Department. An extensive background investigation will be conducted into your personal history prior to any hiring. Your background will be submitted to a Hiring Review Board. If the Board makes a favorable recommendation, you will be given a conditional offer of employment. This initial offer is conditional upon your successful completion of a physical agility test (you must pass or have passed this test within forty-five days prior to the academy start date), a polygraph examination, a medical examination, a drug screening test, and other tests required by this agency. Based on the results of this final testing and further review by the Hiring Review Board, you may then be offered a position.

Keep in mind that:

1. The completion of this questionnaire is mandatory, as authorized by Boise County Policy and the regulations of the Idaho Peace Officers Standards and Training (P.O.S.T) Commission.
2. All statements are subject to verification.