

CAMERON PARISH SHERIFF'S OFFICE HUMAN RESOURCES DEPARTMENT **124 RECREATION LANE POST OFFICE BOX 1250** CAMERON, LOUISIANA 70631

(337) 775-5111 Fax (337) 775-5211

Please provide the items below when returning this application. <u>Items 1 - 4 are mandatory</u> and should be copies not originals.

- COPY OF BIRTH CERTIFICATE
 COPY OF HIGH SCHOOL DIPLOMA OR EQUIVALENCY CERTIFICATE ISSUE BY THE STATE DEPARTMENT OF EDUCATION
- 3. COPY OF YOUR SOCIAL SECRUITY CARD
- 4. COPY OF YOUR DRIVER'S LICENSE WITH PHOTO
- 5. COPY OF TRANSCRIPT OF COLLEGE CREDITS OR DIPLOMA6. COPY OF MILITARY DISCHARGE PAPERS (DD214)
- 7. COPY OF CERTIFICATES FROM ANY ADDITIONAL SCHOOLS



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The selection process outlined below should help you understand what is involved in the selection of new employees for the Cameron Parish Sheriff's Office.

- Completed applications with required attachments must be submitted to Human Resources in person or mail to PO Box 1250 Cameron, LA 70631.
- A thorough background check of every applicant is completed (usually requiring 2-3 weeks).
- As job openings become available, applicants with the best credentials, work experiences, and backgrounds may be selected for testing. Testing includes measurement of pre-employment skills, reading and math skills, and a polygraph.
- After the testing an applicant may be recommended for interview.
- Those not recommended to proceed in the selection process will be notified by formal letter that their application will be considered for future openings unless otherwise directed by the applicants.
- After applicants have been interviewed, tested, polygraphed, and recommended to proceed in the selection process, those applicants for enforcement position will undergo psychological testing before being offered employment.
- Those offered employment will be scheduled for medical exams and drug tests at the Sheriff's Office expense.
- If the medical exams and drug tests are satisfactory, the applicants are processed and become probationary employees.
- All applications are considered active for one calendar year and may be updated by the applicant as desired.
- Applicants may reapply after one year, or may apply for additional positions during the active period of the application.
- Applicants who proceed through the entire selection process must be prepared to allow a minimum of six weeks for completion of the entire process.

CAMERON PARISH SHERIFF'S OFFICE

HUMAN RESOURCES DEPARTMENT

Name: Tast Name (Maiden) First Name Middle Name	Position applyi	ng for:			Full Time	Part Time
Present Address: Street City State Zip Co.						
Street City State Zip Co	Last Nan	ne	(Maiden)	First Name		Middle Name
Home Phone #	Present Addres	SS:Street		City	State	Zip Code
Additional Telephone Number where you may be reached: (Home Phone #		Business Phone #	·		•
Drivers License #					•	
High School Graduate Yes No GED Yes No Post Secondary Education Post Secondary Education Special skills and abilities: I. Employment history: List all jobs held in the past ten (10) years, regardless of length of time employed. Start with ye present employer. Attach additional sheet if necessary. FROM	Additional Tele	ephone Number where y	ou may be reached: ()		
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	REASON FOR	SEPARATION:				
2. Explain in your own handwriting why you want to be employed by the Cameron Parish Sheriff's Office.						
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						-

3. List all rela		mployed by the Cam	eron Parish S				
	FU	JLL NAME		RELATIONSHIP		DEPARTMEN	IT
		ces: <u>List three (3) per on about you.</u>	rsons (not em	ployers or relatives) who know you v	vell enough to gi	ve current or
			1				
NAME		OCCUPATION	ADD:	RESS/ STREET, CI	TY, STATE	HOME PHONE	BUSINESS PHONE
<u> </u>						THONE	THONE
5. Are you tra	ined or	n office machines, cor	mputers, or so	oftware? If yes, plea	ase explain below.		
6 . Have you	ever ar	oplied for a position v	with the Cam	eron Parish Sheriff	s Office? Ye	es No)
•	-	-					
If yes expl	lain						
7. Have you e	ever be	en terminated from a	ny job or pos	ition? Yes	No		
If yes, wh	ich em	ployer:					
-							
8. Have you e	ever rec	ceived a traffic citatio	on or been inv	olved in a traffic ac	ccident?		
					List City - State	Agency	
Yes	N	o If ye	s, explain				
		o If ye					
		o If ye	-				
103		0 II ye.	3, explain				
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•		en arrested or convic					
If yes,	, please	e explain:					
10 List all mi	sdeme:	anor arrests and / or	convictions h	pelow:			
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DATE		CHARGE(S):			ING OR ARRESTI	NG	PENALTY
				ע	EPARTMENT		
11 . Have you	ever h	ad charges expunged	d from your re	ecord?	Yes N	lo	
If wes evr	lain:						
If yes, explain:							
12 . Have you	ever b	een convicted of the	crime of dom	estic violence?	Yes	No	
If ves. exp	olain:						
, ,							
•	_	personal or religious	beliefs that v	vould prevent you	from taking a hum	nan life if it becar	ne necessary in
the line of	auty?						
Yes _		No					
		erved in any branch		States Armed Force	es or other militar	y organization?	
	NO	ORGANIZA		ENLISTMENT	DISCHARGE	TYPE	RANK
				DATE	DATE		

15.	Certain deputies ma and requires total co						ning is extensive, intense, emy?
	Yes N	о	_				
16 .	Are you a United St	ates Citizen?	Yes	No			
	By Birth?	Yes No_		Naturalized?	Yes	No	
17 .	I acknowledge that Sheriff's Office retain	ins the same rig	- •	oe free to terminate	my emplo	oyment at any tim	ne for any reason and the
18.	If your position requ Policy for Physical t	raining for the			,		nust pass the Entry Level
19.	I declare that the int knowledge. I unde application, whether	rstand that if e	mployed, any	falsification, missta	tement, or	omission of fact	in connection with my
		Initial					
20.	Iservice providers, re officers all verbal ar	eferences, and l	law enforceme	nt agencies to relea	se to the C	Cameron Parish Sl	ormer employers, health neriff's Office and it's
	I for the purpose of re	eleasing inform	do he	ereby certify that a j ameron Parish Sher	photocopy iff's Office	of this documente and its administ	t shall serve as an original rative officers.
22.	I completion hereof c					ocument is an app	olication only and that the
23.	TO BE COMPLETE	D BY APPLICA	ANT:				
	e Civil Rights Act of crimination in emplo		0				*
She by inv	eriff's Office. I under the Cameron Parish estigate my previous ncern my eligibility fo	stand that com Sheriff's Office s record and ch	pletion of the . I hereby auth aracter to colle	application process norize the Cameron	requires t Parish Sh	that a personal ba eriff's Office or its	ckground check be made s designated agents to
hea for my	alth, insurance, or em furnishing said info	ployment reco mation. A cop rization to be o	rds, and releas by of this autho ongoing. It is r	ses any person, orga orization shall be co ny intent that the C	nnization o nsidered a ameron P	or corporation fro as effective and va arish Sheriff's Off	vice, physical, hospital, m any charges or claims alid as the original. It is ice be allowed to run employment.
	signature below alsoponsibility to read an					the selection proce	ess and that it is my
	Signatur	re				Date	

Cameron Parish Sheriff's Office is an Equal Opportunity Employer

Note: This application will be retained for one (1) year.

CAMERON PARISH SHERIFF'S OFFICE HUMAN RESOURCES DEPARTMENT 124 RECREATION LANE POST OFFICE BOX 1250 CAMERON, LOUISIANA 70631 (337) 775-5111

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EQUAL EMPLOYMENT OPPORTUNITY REPORTING DATA

The data provided below is collected for the purpose of meeting governmental record keeping and reporting requirements. Providing this data is optional. This data is not considered to be part of the formal application and it is stored separately in a confidential file. This data does not impact employment decisions.

(Last Name)		(First Nam	ne)	(Middle Name)
birthday: _				
Diuth day				
Sex:	Male	Female		
	Hispanic	_	Other	
	Black		American Indian/ Alaskan	Native
Racial/Ethni	c Group White		Asian/Pacific Islander	

CAMERON PARISH SHERIFF'S OFFICE RON JOHNSON, SHERIFF 124 RECREATION LANE PO BOX 1250 CAMERON, LA 70631

Authorization For Release of Information to the Cameron Parish Sheriff's Office

Last Name, First Name, Middle Name	Date of Birth
Address	Telephone
City, State, Zip	Social Security Number

To Whom It May Concern: I am an applicant for a position with the Cameron Parish Sheriff's Office. The Sheriff's Office needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold and maintain the position for which I applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the Cameron Parish Sheriff's Office.

I hereby authorize any representative of the Cameron Parish Sheriff's Office bearing this release to obtain any information in your files pertaining to my employment and or criminal record and I hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Cameron Parish Sheriff's Office, whether said records are of public, private or confidential nature. These records include but are not limited to educational insitutions, credit bureaus and retail establishments, medical and psychological consultations and or treatments, including those of hospitals, clinics, private practitioners, veteran's administration, and all military and psychiatric facilities, public utility companies, and other employers. The intent of the authorization is to give my consent for full and complete disclosure. I reiterate and emphasize that the intent of this authorization is to provide full and free access to background and history of my personal life, for the specific purpose of pursing a background investigation that may provide pertinent data for the Cameron Parish Sheriff's Office to consider in determining my suitability for original and continued employment in the department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and reputation, my military service records, and any information contained in investigatory files, efficiency rating, complaints or grievances filled by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed.

I hereby release you, your organizations, and all others from liability or damages that may result from furnishing the information requested, including any liability or damages pursuant to any state or federal laws. I hereby release you, as the custodian of such records and your organization, including its officers, employees, or related personnel, both individually and collectively from any and all liability for damages of whatever kind, which may at anytime result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct you to release such information upon request of the duly accredited representative of the Cameron Parish Sheriff's Office regardless of any agreement I may have made with you previously to the contrary. The Cameron Parish Sheriff's Office will discontinue processing my application if the information, pursuant to this release, is not disclosed upon their representative's request.

For and in consideration of the Cameron Parish Sheriff's Office acceptance and processing of my application for employment, I agree to hold the Cameron Parish Sheriff's Office, its agents and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employee me with the Cameron Parish Sheriff's Office. I understand that should information of a criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Cameron Parish Sheriff's Office in conjunction with employment procedure. Additionally, I understand that the Louisiana Freedom of Information Act (Louisiana Sunshine Law) provides me the right to request access to and disclosure of records related to my application for employment with the Cameron Parish Sheriff's Office. Hereby waive my right to request acess to or disclosure of information obtained by the Cameron Parish Sheriff's Office during background investigation portion of the application process, including information provided pursuant to this signed Authorization for Release of Information.

A photocopy or FAX copy of this release form will be valid as an original thereof, even though, the said photocopy or FAX copy does not contain an original writing of my signature.

This waver is valid from the date of my signature until my eligibility for original or continues employment is discontinued. Should there be any questions as to the validity of this release, you may contact me at the address listed on this form. I agree to indemnify and hold harmless the person to whom this request is presented and their agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out or by reason of complying with this request.

Applicant Signature:	Date:	
Applicant Name Printed:		
Witness Signature:		
Witness Name Printed:		