

Last Name:

First Name:

Lewis County Sheriff's Office



Reserve Application

Lewis County Sheriff's Office Mission Statement:
Being a committed community partner, providing professional service
to enhance the safety, security, and quality of life in Lewis County.

_____ For Office Use Only _____

Date Received: _____

Test Date: _____

Score: _____



LEWIS COUNTY SHERIFF'S OFFICE CIVIL SERVICE COMMISSION RESERVE APPLICATION REQUIREMENTS

REQUIREMENTS:

- 21 years of age
- No felony convictions
- Valid Washington State driver's license
- United States citizen
- High school diploma or G.E.D. certificate
- Good physical health and condition
- Other agency requirements

APPLICATION PROCESS:

1. Applications are available from the Lewis County Sheriff's Office, Monday through Friday, 8:30 a.m. to 4:30 p.m., and online at <http://lewiscountywa.gov/sheriff>
2. The following **MUST** be included with application packet:
 - a. "Criteria Standards for Disqualification" signed and notarized
 - b. Copy of birth certificate
 - c. Copy of Washington State driver's license
 - d. Copy of Social Security card
 - e. Copy of high school diploma or G.E.D. certificate and transcript
 - f. "Physical Ability Test Waiver of Rights" signed
3. Sign and date back of application packet.

RESERVE APPLICATION:

1. Follow directions and read each question carefully.
2. Answer all questions completely and accurately.
 - a. Include complete addresses (street address, city, state, zip code) and telephone numbers (area code and number)
3. If a question does not apply, write “N/A” in the space provided.
4. If you need more space, use an additional sheet of paper.

NOTE: Failure to follow instructions/incomplete information may delay the background process or eliminate you from further processing. Incomplete application packets will be rejected.

TESTING:

1. A testing date/time will be provided to reserve applicants at a later date.
2. Physical Ability for deputy. See CJTC Physical Ability requirements at www.cjtc.state.wa.us.
3. Structured in-house oral interview.
4. Polygraph examination.
5. Psychological evaluation.
6. Drug screening.
7. Criminal history and background investigation.
8. Reference check.
9. Physical examination.

Send your completed application to:

Mailing Address:

Lewis County Sheriff's Office
Attn: Applications
345 West Main Street
Chehalis, WA 98532
Phone: (360) 748-9286

Website: <http://www.lewiscountywa.gov/sheriff>



Date

CRITERIA STANDARDS FOR DISQUALIFICATION

TO THE RESERVE APPLICANT:

This application will be used for reference by those who will be considering you for participation in the Reserve Program, or for a commission with the Lewis County Sheriff's Office.

An extensive background investigation will be conducted into your personal history, as well as a psychological examination and drug screening.

Applicants will be required to take a polygraph examination to confirm the information in this application and to determine other items of background information.

Automatic and Potential Disqualifiers

Individuals will be automatically disqualified or potentially disqualified from any eligibility lists that have one or more of the following:

1. Felony and criminal activity disqualifiers:
 - Automatic:
 - Any un-vacated felony conviction as an adult (over 18 years of age).
2. Potential:
 - Unlawful sexual misconduct.
 - Convicted of any misdemeanor involving theft, sex offense, moral turpitude, or violence. Any act of domestic violence.
 - Incarceration for any reason.
 - Criminal conduct as an adult.
 - The applicant's association with persons having notoriety for involvement in criminal activity.
 - The commission of any act evidencing unfairness, untruthfulness, cheating, dishonesty, or disrespect for the rights of others.
 - The commission of acts evidencing recklessness or irresponsibility.
 - Use of a prostitute.
 - Adult misdemeanor convictions.
 - Juvenile felony convictions.
 - Knowingly involved in the illegal trafficking (sale, transportation for sale or manufacture) of marijuana or any other narcotic or controlled substance.
 - Ever participated with individuals or groups that were involved in criminal activities.
 - Conviction of any crime under a domestic violence statute.
3. Potential Driving Disqualifiers
 - Multiple traffic infractions (i.e. no liability insurance, no driver's license, or speeding).
 - Knowingly driving without a valid driver's license or without vehicle insurance.
 - Reckless or negligent driving.
 - DUI conviction.
 - Driver's license suspension or revocation.
4. Potential Drug Use Disqualifiers
 - Use of hallucinogenic drugs such as mushrooms, PCP and LSD within three (3) years of application.

- Being under the influence of and/or unlawful possession of a controlled substance while working in any safety or security sensitive position.
- Knowingly or willingly used any illegal narcotic drug.
- Deriving income through the possession, sale or importation of illegal narcotic drug.

5. Potential Employment Disqualifiers

- Resigning in lieu of termination.
- Fired from any law enforcement agency.
- Significant non-judicial punishment in the military (i.e. Article 15 or Captains Mast).
- Significant history of disciplinary or corrective action, including being late to work and abuse of unscheduled leave.
- Unexplained frequent job turnover.
- Negative personal or professional references.
- Dishonorably discharged from the US Armed Forces.
- Intentional misrepresentation on an employment application.

6. Potential Financial Disqualifiers

- Failure to pay income tax or child support.
- Unresolved credit accounts or items sent to collection agencies.
- Financial or fiscal irresponsibility.

7. Additional Disqualifiers

- Automatic:
 - (1) Prejudice or bigotry towards a class of people.
 - (2) Falsifying official documents or knowingly giving false information.
 - (3) Intentional deception in the selection process for any law enforcement agency.

8. Potential:

- History of behavior demonstrating anger control problems.
- Pattern of fighting (verbal or physical).
- Discriminatory action, including sexual harassment.
- Untreated alcohol or substance abuse.

I understand that I will not receive nor am I entitled to a copy of the report or to know its contents. I understand no documents submitted by me will be returned and no copies of any other reports or documents utilized for or during my application for employment or a commission will be furnished or given to me. I further understand that when administered a single test, I will not be given the reason if not selected.

Where written explanations are required, it is mandatory that information be listed totally and completely.

PLEASE CONFIRM YOU HAVE READ, UNDERSTAND, AND AGREEE TO THE AFOREMENTIONED CONDITIONS AND CRITERIA BY SIGNING BELOW. (MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC)

Signature

Date

Subscribed and sworn to before me on this _____ day of _____, _____

Notary Public

(Seal stamp)

Print Name

My commission expires: _____



**LEWIS COUNTY SHERIFF'S OFFICE
PHYSICAL ABILITY TEST WAIVER OF RIGHTS**

READ CAREFULLY

I have reviewed the fitness ability test standards on the Criminal Justice Training Commission website at: www.cjtc.state.wa.us and understand the test demands a level of performance that is strenuous. I understand the type of physical fitness that will be required of each test. I understand I am advised that I should consult with my personal physician. I feel I have been properly informed as to the risks. I understand I may be asked questions prior to any tests being performed. It is my decision to perform the tests and to participate in the testing process.

I hereby certify that I consider myself capable and safe in exerting the levels of effort necessary to perform the physical ability test.

IN CONSIDERATION of the Lewis County Sheriff's Office granting me the opportunity to participate in the physical ability test as part of the Reserve Deputy examination, I waive, release and forever discharge any and all rights and claims for any and all physical ability test, against Lewis County Sheriff's Office, their agents, employees, officials and the administrators while acting within the scope of their duties. I further hold harmless such persons and organizations from all and any claims and causes of action, costs and expenses which may arise as a result of my activities during the physical ability test, and agree so on behalf of myself, my dependents, my heirs, executors and administrators.

I have read the above and desire to participate in the physical ability test and have agreed to do so.

Signature

Date

Print Name

1. **Position applying for:** _____

2. **Full Name:** _____

a. Any other names used: _____

3. **Legal Address:**

Street City State Zip

Mailing Address:

Street City State Zip

Home Phone: _____ Business Phone: _____ Cell Phone: _____

E-mail address: _____

Please designate the best way for us to contact you: _____

Beginning with the most recent, list residence addresses and dates for the past ten years:

Address History:

Street	City	State	Zip	Date From/To

4. **Date of Birth:** _____ **Social Security #:** _____

5. **Military Status:**

Have you ever served in the Army, Navy, Marine Corps, Air Force, Coast Guard, R.O.T.C., or any Military Reserve unit? Yes No

If so:

Entry Date	Rank/Branch/Organization	Discharge Type	Date

College/University Attended & Location:			
Dates Attended:		# of Quarter/Semester Credits Earned:	
Degree Earned and Year:		Major Course of Study:	

If you have skills or experience gained through hobbies or volunteer work you believe are relevant to the position you are applying, describe below:

COMPUTER EXPERIENCE:

Type	Years of Experience	Type of Equipment/Software/Other
Personal Computer		
Word		(WPM=)
Excel		
CAD		
SUMMIT		
Other		

Languages spoken fluently other than English: _____

9. LIST ALL PERIODS OF EMPLOYMENT AND UNEMPLOYMENT IN THE PAST TEN (10) YEARS, BEGINNING WITH THE PRESENT OR MOST RECENT EMPLOYER. LIST EVERYTHING IN PROPER SEQUENCE. *OMIT NONE*

Employer:			
Address:			
Telephone #:		Your Title:	
Dates Employed:		Salary:	
Immediate Supervisor:			
Reason for Living:			
Specific Duties:			

Employer:			
Address:			
Telephone #:		Your Title:	
Dates Employed:		Salary:	
Immediate Supervisor:			
Reason for Living:			
Specific Duties:			

Employer:			
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Dates Employed:		Salary:	
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Dates Employed:		Salary:	
Immediate Supervisor:			
Reason for Living:			
Specific Duties:			

Employer:			
Address:			
Telephone #:		Your Title:	
Dates Employed:		Salary:	
Immediate Supervisor:			
Reason for Living:			
Specific Duties:			

Use additional sheet if necessary

1.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever had your wages garnished? If yes please explain:
2.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever been a party to a Small Claim or other court action? If yes please explain:
3.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever been involved with any civil court action? If yes please explain:
4.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever had a judgment rendered against you? If yes please explain:
5.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you or your spouse ever been sued or summoned into court? If yes please explain:
6.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever been refused credit? If yes please explain:
7.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever had any property repossessed? If yes please explain:
8.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever been fired, discharged or asked to resign from any position? If yes please explain:
9.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have the police ever been called to your home? If yes please explain:
10.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever committed any criminal violation that has gone undetected? If yes please explain:
11.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have any relatives of you or your spouse ever been convicted of any crime or imprisoned? If yes please explain:
12.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever had any gambling debts? If yes please explain:
13.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever taken money from an employer? If yes please explain:
14.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever had your fingerprints taken for any reason? If yes please explain:
15.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you received any verbal or written reprimands or suspensions for violations of company policy? Include military service. If yes please explain:
16.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Would you have difficulty working with people of a different sex, culture, race, age, religion, nationality, or sexual orientation? If yes please explain:
17.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you been involved in any physical or major verbal confrontations on the job? If yes, please explain:
18.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Would you be able to follow direct orders, even though you may not agree them? If no, please explain:

19.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you been subjected to high stress or emergency situations on the job? If yes, please explain:
20.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever left a place of employment without giving two weeks notice? If yes, please explain:
21.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever operated a motor vehicle while under the influence of alcohol or drugs? If yes, please explain:
22.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever been delinquent on your financial obligations? If yes, please explain:
23.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you ever filed bankruptcy? If yes, please explain:
24.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you had any financial obligations turned over to a collection agency? If yes, please explain:
25.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are you current on your financial obligations? If no, please explain:
26.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you been on court supervision or probation? If yes, please explain:
27.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you had any court proceedings sealed or purged? If yes, please explain:
28.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you been unemployed during the last ten years? If yes, please explain:
29.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Do you pay child support or spousal maintenance? If yes, please explain:
30.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes to question 29, are your support payments current? If no, please explain:

CERTIFICATION

I hereby certify the entries on this statement are true, complete, and correct to the best of my knowledge and belief. These entries are made in good faith. I understand that knowing and willfully making any false statement on this form constitutes a violation of the law, and may be cause to initiate an action to remove my name from consideration for Reserve Deputy.

Signature

Date

Do you have any knowledge or information, in addition to that specifically required in this application, which is or may be relevant, directly or indirectly, to an investigation of your eligibility or fitness for the position you are seeking? This includes, but is not limited to: character traits, temperance, habits, employment, education, subversive activities, family associations, undetected criminal offenses, traffic violations, or residence?

Yes No If yes, provide full information below:

Have you reviewed the Lewis County Sheriff's Office Self-Assessment Checklist located at:

<http://lewiscountywa.gov/sheriff/sheriff-employment>

Yes No

Should the necessity arise, in the course of your duties as a Reserve Deputy Sheriff, to take the life of another human being, would you have any reluctance to do so?

Yes No If yes, please explain: _____
