

Thank you for your interest in the Rapides Parish Sheriff's Office. However, by submitting your application, this is not an offer of employment. All applications are processed as needed by qualifications for positions available. All information received will be used only for verification purposes and will not be shared with or released to any third party.

Sincerely,

Mark Wood Sheriff

QUALIFICATIONS AND INSTRUCTIONS TO APPLICANT:

- 1. In order to comply with Louisiana law, all applications must meet the following qualifications:
 - All applicants for the office of deputy sheriff, except auxiliary and reserves deputies, process servers, deputized unpaid volunteer, litter watch agents, bailiffs and keepers of property shall meet the following qualifications:
 - 1) Have attained the age of twenty-one (21) (exempt for clerical) and reside within the parish where commissioned. The residency requirement will not be applicable with respect to deputies who are members of the Louisiana Sheriff's Association Narcotics Task Force.
 - 2) Have graduated from an accredited high school or possess a high school equivalency diploma recognized in the state of Louisiana.
 - 3) Qualify for life and liability insurance in the amounts required by the Louisiana Sheriff's Association.
 - 4) Meet the physical requirement set down by the Sheriff's Pension and Relief Fund Board, unless said board, upon the petition by the applicant, specifically grants a waiver thereto.
- 2. You will need to send copies of the following documents upon request:
 - a) Birth certificate
 - b) High school diploma or G.E.D. certificate
 - c) All college transcripts and/or degree(s)
 - d) Current driver's license
 - e) Social security card
 - f) If Applicable, Military DD-214
- 3. If you do not have enough space for your answer to any question, please use the last page of this application to continue your answer.
- 4. When you have completed your application, click the Email button or print and mail to:

Rapides Parish Sheriff's Office Human Resources Rapides Parish Court House, 3rd Floor Alexandria, LA or by mail to: 701 Murray St, Suite 301 Alexandria, LA 71301

Thank you for your cooperation, and for your interest in employment with the Rapides Parish Sheriff's Office. If you have any questions, please contact the Human Resources Department at 318-449-5494

RAPIDES PARISH SHERIFF'S OFFICE

701 MURRAY ST SUITE 301 • ALEXANDRIA, LOUISIANA 71301

PRE-EMPLOYMENT INQUIRY

I, _____, the undersigned, agree and acknowledge that I am an applicant for employment with the Rapides Parish Sheriff's Office.

I hereby authorize a review and full disclosure of all information and records concerning myself to the Rapides Parish Sheriff's Office relative to educational background, employment and pre-employment records including background reports, efficiency ratings, financial information, criminal and traffic arrest or convictions, and any other factors that would be pertinent to my suitability for employment.

I hereby authorize any agency or individual questioned by the Rapides Parish Sheriff's Office about my background to release any and all information deemed pertinent by the Rapides Parish Sheriff's Office. I hereby release the Rapides Parish Sheriff's Office and any other agency or persons from any liability in connection with furnishing such information.

I further understand that I may be required to submit to a physical exam if I am offered employment and hereby authorize review and full disclosure of all information and records concerning myself to the Rapides Parish Sheriff's Office relative to my medical and psychiatric treatments and/ or consultation.

I further understand that all information obtained as a result of this investigation shall be confidential and in the event my application is rejected, that reason for said rejection shall not be revealed.

Applicant Name (print)		
Signature		
DOB	SS#	
Witness		

RAPIDES PARISH SHERIFF'S OFFICE APPLICATION

DRUG TESTING AND PHYSICAL FITNESS EXAMINATION

I,_____, the undersigned, so hereby understand and acknowledge that it is a matter of policy of the Rapides Parish Sheriff's Office that applicants are tested for drug usage, alcohol abuse, and complete physical fitness as a condition of employment.

If I am offered employment with the Rapides Parish Sheriff's Office, I understand and acknowledge that the offer for employment will be contingent upon the results of such examinations being satisfactory to the Rapides Parish Sheriff's Office and I will voluntarily submit to such examinations.

I further understand that random drug tests and/or polygraph examinations for departmental employees may be conducted during employment if hired.

I have no objections to this policy and will voluntarily comply when requested to do so.

WITNESS:

Signature of Applicant

Date

AGREEMENT: (*Please read the following statement carefully.*)

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge and agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

Date

Signature

APPLICATION FOR EMPLOYMENT

LEAVE THIS AREA BLANK

Rapides Parish Sheriff's Office

701 Murray St Suite 301	DateReceived:	
Alexandria, LA 71301	Pass III Test Date:	Score:
Telephone: (318) 473-6700	Nelson Denny Date:	Score:

The Rapides Parish Sheriff's Office does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, ancestry, medical condition, disability or handicap or on the basis of age against persons whose age is between forty and seventy. No questions on this application is intended to secure information to be used for such discrimination. Application shall remain on file for one year from date of receipt.

Position Applying For:

(Corrections,	Uniform,	Investigations,	Clerical, Other)	

1.	NAME:		
	Last	First	Middle
a.	ADDRESS:,		
	Street Address		ate Zip Code
b.			
	Residence Phone Number	Business Phone Number	Social Security Number
C.	Race* Sex	Religion	Blood Type
d.			
	Driver's License State Issu	License Number	Type Expiration Date
e.	Are you a United States Citizen do you hold?		o, what type of Visa
f.	Date of Birth:	Place of Birth:	
	Height: Weight:	Eyes: H	air:
g.	Person to be notified in case of	of emergency:	
	Name:	Phone Nu	mber:
	Address:		

* This information needed to measure compliance with the Office's Affirmative Action Policy and with Equal Opportunity Laws.

List all relatives employed by the Rapides Parish Sheriffs Office: h. Full Name **Relationship D**epartment Married: _____ Single: ____ Divorced: _ Widowed: _____ i. 2 Spouse's Name: First Middle or Maiden Last Date of Birth: Social Security Number: Place of Employment:______Business Phone:_____ Number of Years Employed: **APPLICANT'S CHILDREN:** *List names, addresses and dates of birth.* 3. 4. **CHARACTER REFERENCES:** *List three persons (not employers or relatives) who* know you well enough to give current or former information about you. Name:_____ Home Phone: Complete Address: Business Phone: _____ Occupations: Home Phone: _____ Name: ______ Complete Address: _____ Occupations:_____ Business Phone: Name:_____ Home Phone: Complete Address: _____ Occupations: Business Phone:

5. **EMPLOYMENT HISTORY** List all positions held regardless of length of employment beginning with your present place of employment and going back for the past five (5) years. If additional space is needed, use separate sheet of paper.

Job Title:
Phone:
Salary:
Reason for Leaving: [] VOLUNTARY
[] INVOLUNTARY
Job Title:
Phone:
Salary:
Reason for Leaving: [] VOLUNTARY
[] INVOLUNTARY
Job Title:
Phone:
Salary:
Reason for Leaving:[] VOLUNTARY
[] INVOLUNTARY
JobTitle:
Phone:
Salary:
Reason for Leaving:[] VOLUNTARY
[] INVOLUNTARY
Job Title:
Phone:
Salary:
Reason for Leaving:[] VOLUNTARY
[] INVOLUNTARY

EMPLOYMENT HISTORY continued:

			sed that you <i>(if yes, pl</i>	-		-	ended, or
-		-	anded, demo ase state de	-	nded or	dismissed?	
Have	/ou ever res	signed from	employment	? [] Yes	[] No	(if yes, plea	se state de

6. **EDUCATION:** List your educational training including high school, college, business and technical schools.

		Graduate []Yes []	No	
School Name	<u>Address</u>	From	<u>To</u>	
Have you ever app	lied for a position	on with the Rapides Parish	Sheriff's	Office?
If yes, please explain	below:		[] Yes	[] No
Have you ever applie	ed for a position v	with another law enforceme	nt or gove	rnment
agency? If yes, pleas	se explain below:		[] Yes	[] No
Name of Departmo	ent or Agency		Date	Applied
		ction pending against you?		
Have you ever had a	ny civil or crimin	al action filed against you?	[] Yes	[] No
Have you or your sp	oouse ever bee	n refused credit?	[] Yes	[] No
Have you or your s	pouse ever filed	d bankruptcy?	[] Yes	[] No
Have you or your spo	ouse ever been h	nandled through checks and	forgery d	livision?
			[] Yes	[] No
Have you ever bee	n divorced?		[] Yes	[] No
Have you or your spou	ıse ever had a garı	nishment against your wages?	[] Yes	[] No

7.

8.

· 9.	CREDIT REFERENCES	Please list three (3) credit establishments below.
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	Credit Estab	lishment	Address			Amount
10.	Have you ev	ver received a trai	fic citation or been	involved in a traf		
	lf yes, pleas	e explain below ir	ocluding dates:		[] Yes	[] No
11.	of and how	long ago are impo	ony arrests below. ortant. Give all fact	s so that a decisic	-	e made.
	Date:	Charge	Detaining/ Arrest	ing Department		Penalty
12.	-	er been involved i e explain below in	n a police investigat cluding dates:		spect or [] Yes	witness? []No
13.		-	ffice, do you anticip If yes, please explain be	=		n your []No

14.	Have you ever been refused an automobile insurance	policy? [] Yes	[] No
15.	Have you ever served in the U.S. Armed Forces? If yes what branch?		[] No
	Date of duty: Fromto Rank at Separation:	_	
	If you received other than an honorable or medical discharge:		
	Service Awards/Decorations:		
	Briefly describe your duties:		
16.	Are you presently a member of the National Guard?	[] Yes	[] No
17.	Are you now a registered voter in Rapides Parish?	[] Yes	[] No
	Ward Precinct Voting Place		
18.	List your previous addresses beginning with your most	t recent:	
	Previous Address Telephone #	From	То

19. List your immediate family below:

Father Add	ress	Age	Occupation
Mother	Address	Age	Occupation
Brother or Sister	Address	Age	Occupation
Brother or Sister	Address	Age	Occupation
Brother or Sister	Address	Age	Occupation
Brother or Sister	Address	Age	Occupation

If additional space is needed, please use separate sheet.

- 20. This job requires punctuality and good attendance and may require shift work. Is there any reason why you could not fulfill this requirement? [] Yes [] No
- 21. We are looking for a permanent employee and will make an investment in training. Is there any reason why you would not expect to stay with the department?[] Yes[] No
- 22. Do you understand that in your first six (6) months of employment you are on probation which is a period of selection; that during this time your supervisor will evaluate your performance and abilities; that you must complete it successfully; that you may be discharged at any time; that you must submit yourself to office policy and strict discipline and that you may not have any other employment without approval of the sheriff or his designee? [] Yes [] No
- 23. Do you understand that if this application is for a uniform division (Line or Corrections) you must be at least 21 years of age, and must successfully complete P.O.S.T. certification? [] Yes [] No

24. Why do you think you are qualified for employment by the Rapides Parish Sheriffs Office?

25. List all employees you know in the Rapides Parish Sheriff's Office, Alexandria Police Department, Pineville Police Department and Louisiana State Police.

26. Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, special skills articles/books published, activities, accomplishments, etc. If you are applying for a clerical position, please give you typing speed, shorthand skills, computer skills etc. (You may exclude all information indicative of age, race, religion, color, national origin, disability or handicap).

27. Please list all of your memberships in business, civic or fraternal organizations.

Page for further explanation (if needed):				

