

APPLICATION FOR EMPLOYMENT LAW ENFORCEMENT, JAIL OR SECURE JUVENILE DETENTION OFFICER

NOTICE: All questions must be answered. Incomplete or illegible applications will not be considered. If the space provided is insufficient for complete answers or you wish to furnish additional information, please attach additional pages.

1. PERSONAL INFORMATION							
Name (Last, First, Middle)							
Address (Apartment, Street, P.O. Box)	Home Telephone Number						
Address (Apartment, Otreet, 11.0. Box)				Tiome receptione realises			
	1		Т				
City	State	1	Zip Code	Work Telephone Number			
Email Address	•			Cell Phone Number			
Have you successfully completed the basic trai	ning required for o	certification (i.e. 720-h	our law enforcement ac	eademy)? Yes No			
If yes, what type(s) of basic training have you s	successfully compl	leted? Law Enforcen	nent Jail	Secure Juvenile Detention			
If applicable, include the name of the school w	here vou complete	ed basic training and t	the date that training wa	as completed:			
	🗆						
Are you at least 18 years old? Yes	No 🔛						
Are you a United States citizen? Yes	No 🗌						
Do you have a high school diploma, GED or HSED? Yes No							
Do you have an Accessate Dogree or 60 access	eto dograo lovol ar	adita ar highar from a	n aggradited gallage or i	university? Ves No			
Do you have an Associate Degree or 60 associate degree level credits or higher from an accredited college or university? Yes No							
If No, were you employed as a law enforcemen				oforcement and tribal law			
The college credit requirement as written in Wisconsin Administrative Code § LES 2.01(1)(e), pertains to law enforcement and tribal law enforcement officers first employed on or after February 1, 1993.							
Have you ever been convicted of a follow? Vo	s No	\neg					
Have you ever been convicted of a felony? Ye	S INO	_					
Have you ever been convicted of a misdemeanor crime of domestic violence? Yes No							
Are you prohibited by state or federal law from possessing a firearm? Yes No							
Do you possess a valid Wisconsin driver's license or a valid driver's license from another state? Yes No							
	2.	EDUCATION					
		ates					
Name of School(s)	From (mm/yyyy)	To (mm/yyyy)	Dagras Diplo	ma, or Credits Earned			
. , ,	(шши уууу)	то (ппп/уууу)	Degree, Dipio	ina, or Greatts Earnea			
High School(s)		1					
College(s)		•	•				

3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. To furnish additional employment information, attach sheets of the same size and format as this application.

Name and Address of Employer	Dates of Employment			
Name of Employer:	From (mm/yyyy)	To (mm/yyyy)		
Name of Employer.				
Address:		Annual Salary/Wages:		
	Full-Time Part-Time			
City:	State:	Zip Code:		
oity.	State.	Zip Code.		
Supervisor's Name / Telephone Number:	May we contact the employer / supervisor?			
	Yes No No			
Position and kind of work:	Passan for Lawing:			
rosition and kind of work.	Reason for Leaving:			
	Dates of Em	nlovment		
Name and Address of Employer	From (mm/yyyy)	To (mm/yyyy)		
Name of Employer:	Trom (mm) yyyy)	10 (11111) 7777		
Address:		Annual Salary/Wages:		
	Full-Time Part-Time			
City:	State:	Zip Code:		
oity.	Otate.	Zip Gode.		
Supervisor's Name / Telephone Number:	May we contact the employer / supervisor?			
	Yes No No			
Position and kind of work:	Reason for Leaving:			
1 ostion and kind of work.	neuson for Leaving.			
	Dates of Em	plovment		
Name and Address of Employer	From (mm/yyyy)	To (mm/yyyy)		
Name of Employer:				
• •				
Address:	Full-Time Part-Time	Annual Salary/Wages:		
	Full-Time Part-Time			
City	State:	Zip Code:		
Supervisor's Name / Telephone Number:				
	Yes No No			
Position and kind of work:	Reason for Leaving:			

4. MILITARY SERVICE						
Devil (O.)	From	To	Active Duty or		01110	
Branch of Service	(mm/yyyy)	(mm/yyyy)	Reserve	Highest Grade	Skill Specialty or Primary Duty	
Honorably Discharged from Mi	litary Service?	Yes 🗌	No 🗌	Not Applicable		
			5. REFERENCES	s		
Give three references (not rela	atives, or pres	ent employer;	avoid listing mem	bers of the clergy).		
Name:						
Position/Title/Profession:						
Number of Years Acquainted:	:					
Address:						
City/State/Zip:						
Telephone Number:						
Name:						
Position/Title/Profession:						
Number of Years Acquainted:	:					
Address:						
City/State/Zip:						
Telephone Number:						
Name:						
Position/Title/Profession:						
Number of Years Acquainted:	:					
Address:						
City/State/Zip:						
Telephone Number:						

6. GENERAL

COMPLETE IF INSTRUCTED TO DO SO BY EMPLOYING AGENCY.

Attach no more than one additional page for each answer.

- A. Why have you chosen to apply for this position?
- B. Discuss things you have done which have contributed to your life experience. Be sure to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.
- C. Why do you believe you can relate to and/or work with people of different races, genders, cultures, ages, socio-economic groups, and educational levels?

APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW

Information provided and statements made as part of this application may be grounds for not employing you or for dismissing you after you begin work. All information and statements made are subject to verification.

CERTIFICATION

ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

Applicants Signature	Date Signed
Under the provisions of § 19.36, Wis. Stats., I request that my identity as an without my consent or until required under law.	applicant for this position not be revealed
Applicants Signature	Date Signed

Type <Ctrl - Enter> to add additional pages.