

# OFFICE of the SHERIFF TELLER COUNTY

**Sheriff**  
**Kevin M. Dougherty**



**Undersheriff**  
**Marcus J. Woodward**

Thank you for considering employment with the Teller County Sheriff's Office. We are very committed to employing and retaining qualified professionals that will represent our office with the highest of standards.

## **Instructions to the Applicant:**

- The information you provide in this application will be used in the background investigation to determine your suitability for a position with the Teller County Sheriff's Office.
- You must fill out the application completely and accurately.
- Type or legibly print (in black ink) all required information.
- If a question does not apply to you, enter N/A (not applicable) in the space provided for your response.
- If you need more space for your responses, use the reverse side of the page or an additional sheet, and identify the additional information by question number.
- Initial this page to indicate you have read these instructions.
- Submit copies of the below applicable documents along with this application.
  - Birth Certificate
  - Social Security Card
  - Driver's License
  - Automobile Insurance Card
  - Certified Copy of DD214
  - College Degree(s) / Diploma(s) / Transcripts
  - Marriage dissolution(s)
  - Name Change Forms
  - Signed and notarized Authority For Release of Information

## **Accurate and Full Disclosure**

- The completion of this application is mandatory for consideration of employment with the Teller County Sheriff's Office.
- All statements and information is subject to verification.
- This application and documents submitted are considered "Official Written Instruments" and deliberate inaccuracies, incomplete statements or falsifications may bar or remove you from consideration of employment and may be cause for criminal prosecution under the Colorado Revised Statutes.
- You must account for all required time periods in your background.

It is to your advantage to respond openly. All factors in your background will be evaluated in terms of the circumstances and facts surrounding their occurrence, and their degree of relevance to a position with the Teller County Sheriff's Office.

*For example*, being fired from a job or having an arrest record is not in itself grounds for disqualification. During the investigation, the investigator will inquire into the facts surrounding such an occurrence. An evaluation will then be made of the relevance of these facts to the requirement of the Teller County Sheriff's Office.

### **Disclosure of Arrest and Convictions**

As an applicant for a position with the Teller County Sheriff's Office, you are required to disclose any of the following, which occurred on or after your 15<sup>th</sup> birthday (even if the records are sealed):

- All arrest, whether they resulted in a conviction or not.
- All convictions
- All diversion programs, whether completed or not (unless medically related).

Initial this page \_\_\_\_\_

# Office of the Sheriff

**Sheriff**  
Kevin M. Dougherty



**Undersheriff**  
Marcus J. Woodward

## EMPLOYMENT APPLICATION

**Instructions: READ EVERY QUESTION CAREFULLY. Print or type in black ink. Answer every question. If a question does not apply to you, indicate so by making an "N/A" within the appropriate place. Leave no question unanswered.**

**All information is subject to verification. Any misstatement, misrepresentation or omission by you is cause for disqualification from employment consideration. Any falsification discovered after you are employed is cause for dismissal.**

POSITION APPLIED FOR:   \_\_\_ PATROL   \_\_\_ DETENTION   \_\_\_ DISPATCH

## PERSONAL INFORMATION

<b>1. Last Name:</b>	<b>Middle:</b>	<b>First:</b>

<b>2. Other names you have used or been known by (include maiden names &amp; nick names).</b>

<b>3. Home address (list both mailing and street address if different).</b>				
<b>Numbers:</b>	<b>Street:</b>	<b>City:</b>	<b>State:</b>	<b>Zip</b>

<b>4. Phone numbers you can be reached at:</b>			
<b>Home Phone:</b>	<b>Work Phone:</b>	<b>Cell Phone:</b>	<b>Pager:</b>
( )	( )	( )	( )

<b>5. Date of Birth:</b>	<b>6. Social Security Number:</b>	<b>7. Place of Birth: City, State, County</b>

<b>8. Sex:</b>	<b>9. Are you authorized to work in the United States:</b>	<b>10. Height</b>	<b>11. Weight</b>	<b>12. Hair Color</b>
M    F	Yes                      No		Lbs.	

<b>13. Eye Color</b>	<b>14. Scars, tattoos, or other distinguishing marks:</b>

**RELATIVES & REFERENCES**

**15. Please supply information regarding family members (if someone is deceased, indicate next to their name.**

<b>Father:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Mother:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Brother(s) and Sister(s)</b>	<b>Address</b>	<b>Telephone:</b>
<b>Step-mother:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Step-father:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Step-brother(s) &amp; Step-sister(s)</b>	<b>Address:</b>	<b>Telephone:</b>

**List other relatives you have close personal relationships with (state name & relationship).**

<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>

**16. List those individuals with whom you have resided with during the last 5 years (list no information prior to your 15<sup>th</sup> birthday). Exclude family members**

<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>
<b>Name:</b>	<b>Address:</b>	<b>Telephone:</b>



**21. List only professional licenses or certificates you hold or have held (include CDL, pilot, etc.).**


**EDUCATION CONT.**

**22. Have you ever been suspended or expelled from any high school or post-secondary (including colleges, universities and trade schools)?**  
**If "yes", please explain (include school date and circumstances).**


**RESIDENCE**

**23. List all of your residences during the last 10 years (list no information prior to your 15<sup>th</sup> birthday). Begin with your most current residence.**

Street Address	City, State, & Zip Code	Dates:	Name of landlord
		From: To:	
		From: To:	
		From: To:	
		From: To:	
		From: To:	
		From: To:	

**EXPERIENCE & EMPLOYMENT**

**24. Beginning with your most current employment, list all jobs you have held in the past 10 years. Include part-time, temporary, voluntary, self-employment and military positions. Attach additional sheets if necessary.**

Dates of employment		Name & address of employer	Name of supervisor
From	To		
Month/Year	Month/Year	Duties:	Telephone:
<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time		
<input type="checkbox"/> Voluntary	<input type="checkbox"/> Seasonal		
Salary: \$			
Monthly	Week Hourly		
Reason for leaving:			

**EXPERIENCE & EMPLOYMENT CONTINUED**

Dates of employment		Name & address of employer	Name of supervisor
From	To		
Month/Year	Month/Year		Telephone:
<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	Duties:	
<input type="checkbox"/> Voluntary	<input type="checkbox"/> Seasonal		
Salary: \$			
Monthly	Week	Hourly	
Reason for leaving:			

Dates of employment		Name & address of employer	Name of supervisor
From	To		
Month/Year	Month/Year		Telephone:
<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	Duties:	
<input type="checkbox"/> Voluntary	<input type="checkbox"/> Seasonal		
Salary: \$			
Monthly	Week	Hourly	
Reason for leaving:			

Dates of employment		Name & address of employer	Name of supervisor
From	To		
Month/Year	Month/Year		Telephone:
<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	Duties:	
<input type="checkbox"/> Voluntary	<input type="checkbox"/> Seasonal		
Salary: \$			
Monthly	Week	Hourly	
Reason for leaving:			

Dates of employment		Name & address of employer	Name of supervisor
From	To		
Month/Year	Month/Year		Telephone:
<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	Duties:	
<input type="checkbox"/> Voluntary	<input type="checkbox"/> Seasonal		
Salary: \$			
Monthly	Week	Hourly	
Reason for leaving:			

**MILITARY SERVICE**

<b>27. Have you ever served in the armed forces, National Guard or military reserves?</b> YES ( ) NO ( ) If “yes”, please supply the following information: <b>ATTACH A COPY OF YOUR DD214</b>			
<b>Branch of Service</b>	<b>Service Number</b>	<b>Dates of Service</b> / to /	<b>Type of discharge</b>
<b>28. Are you currently participating in any military reserve or National Guard program?</b> YES ( ) NO ( )			
<b>29. Have you ever been the subject of any judicial or non-judicial disciplinary action while in the military, National Guard or military reserves?</b> YES ( ) NO ( )			
If you marked “yes” please give details (include branch of service, when, where, and the circumstances).			

**FINANCIAL**

<b>30. The management of personal finances is relevant to an individual’s qualifications for a position with a law enforcement agency. Please supply commercial or business references (including banks or firms you have borrowed money from for any purpose). (If you are applying for a dispatch position, disregard this section).</b>				
<b>Name of Firm</b>	<b>Address</b>	<b>Amount Borrowed</b>	<b>Date Opened</b>	<b>Date Closed</b>
<b>31. Have you ever filed for or declared bankruptcy? YES ( ) NO ( )</b>				
<b>32. Have any of your bills ever been turned over to a collection agency? YES ( ) NO ( )</b>				
<b>33. Have you ever had purchased goods repossessed? YES ( ) NO ( )</b> If “yes” please give details (include when, firms involved, and circumstances).				
<b>34. Have your wages ever been garnished? YES ( ) NO ( )</b> If “yes” please give details (include where, when, and why).				

**35. Have you ever been delinquent on any payments owed to any business, individual or government agency? YES ( ) NO ( )**  
**If "yes" please give details (include where, when, and why).**


**LEGAL**

**36. Have you ever committed any undetected misdemeanor or felony type crimes? YES ( ) NO ( )**  
**If "yes" give the following information (exclude traffic violations):**

Age at time	Crime(s) committed	Explanation of circumstances

**37. If you have ever been arrested or convicted for any crime (excluding traffic citations), please give the following information: (include DUI's, dismissed charges, plea agreements, deferred judgments & sentencing)**

Date	Police Agency	Original Charge(s)	Disposition

**38. Have you ever been placed on court ordered probation as an adult? YES ( ) NO ( )**  
**If "yes" please give details (include when, where, and why).**


**39. Were you ever required to appear before a juvenile court for an act, which would have been a crime if committed by an adult? YES ( ) NO ( )**  
**If "yes" please give details (include when, where, and why).**


**40. Are you now, or have you ever been involved as a plaintiff or defendant in any civil court action? YES ( ) NO ( )**  
**If "yes" please give details (include when, where, and why).**


**MOTOR VEHICLE OPERATION**

<b>41. Driver's License Number:</b>	<b>Expiration Date:</b>		
<b>Please list other states where you have been licensed to operate a motor vehicle:</b>			
<b>42. Have you ever been refused a driver's license by any state? YES ( ) NO ( )</b>			
<b>If "yes" please explain (include when, where and why).</b>			
<b>43. Colorado Law requires operators and owners of motor vehicles to be covered by automobile insurance. Please list the current liability insurance you have with your motor vehicle.</b>			
<b>Company</b>	<b>Address</b>	<b>Policy Number</b>	<b>Expiration Date</b>
<b>44. Please list all traffic citations (exclude parking violation) you have received within the last (3) three years.</b>			
<b>Date</b>	<b>Citing Agency</b>	<b>Nature of Violation</b>	<b>Action Taken</b>
<b>45. Have you ever been involved as a driver in a motor vehicle accident within the last (5) years? YES ( ) NO ( ) If "yes" please give details for each accident.</b>			
<b>Date</b>	<b>Investigating Agency</b>	<b>Circumstances</b>	<b>Injury or Non injury</b>
			<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/> <input type="checkbox"/>
<b>46. Has your driver's license ever been suspended or revoked? YES ( ) NO ( )</b>			
<b>47. If there is anything you would like to comment about your driving record, please give details (include what, when, where, and why).</b>			

<p><b>48. Have you ever been denied automobile insurance for any reason other than failure to pay premium? YES ( ) NO ( ) If “yes” please explain (include company name and address, date and reason).</b></p>
<p><b>49. Are you a past employee of Teller County? YES ( ) NO ( )</b>  <b>If “yes” please explain which department or division you worked in.</b></p>
<p><b>50. Are you willing to undergo a physical examination, drug or alcohol test, and a polygraph test if you are offered a position with the Teller County Sheriff’s Office?</b>  <b>YES ( ) NO ( )</b></p>
<p><b>51. Are you able to perform the essential functions listed on the applicable job description? YES ( ) NO ( )</b></p>

**CANDIDATE**

**I HEREBY CERTIFY THAT ALL THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I ALSO UNDERSTAND THAT ANY FALSIFICATIONS, MISREPRESENTATION, AND / OR OMISSIONS OF INFORMATION MAY BE CAUSE FOR MY REJECTION AS A CANDIDATE FOR A POSITION WITH THE TELLER COUNTY SHERIFF’S OFFICE, OR MAY; TWO BE CAUSE FOR TERMINATION FROM COUNTY GOVERNEMENT IF EMPLOYED BY TELLER COUNTY. I ACKNOWLEDGE THAT THERE IS NOTHING CONTAINED TO CREATE AN EMPLOYMENT OFFER OR A CONTRACT WITH THE COUNTY.**

**I FULLY RECOGNIZE THAT THE FIRST SIX MONTHS OF EMPLOYMENT WITH THE TELLER COUNTY SHERIFF’S OFFICE IS CONSIDERED AN INTRODUCTORY PERIOD AND THAT THE ELECTED SHERIFF MAY TERMINATE THE SERVICES OF AN INTRODUCTORY EMPLOYEE, WITHOUT CAUSE, IF IT IS DETERMINED THAT A NEW EMPLOYEE IS NOT SUITED TO THE POSTION AND ITS OVERALL RESPONSIBILITIES.**

**BY SIGNING MY NAME BELOW, I AM AUTHORIZING TELLER COUNTY TO VERIFY ANY INVORMATION I HAVE PROVIDED ON THIS EMPLOYMENT APPLICATION, INCLUDING AUTHORIZING COLLEGES AND OTHER EDUCATIONAL INSTITUTIONS TO RELEASE TRANSCRIPTS TO THE TELLER COUNTY HUMAN RESOURCES DEPARTMENT AND OR THE TELLER COUNTY SHERIFF’S OFFICE UPON RECEIPT OF A COPY OF THIS SIGNED DOCUMENT.**

\_\_\_\_\_  
**SIGNATURE OF CANDIDATE**

\_\_\_\_\_  
**DATE SIGNED**

MAIL TO:  
 TELLER COUNTY SHERIFF’S OFFICE  
 P.O. BOX 27  
 DIVIDE, CO 80814



**Notices About Pre-employment Credit Reports, Investigative Consumer Reports  
And Background Checks**

In connection with your application for employment with the Teller County Sheriff's Office (the "TCSO"), this will notify you that the TCSO obtains a credit agency consumer report for every applicant for the position you are seeking who receives a job offer to ensure each such applicant's fitness to serve as an employee of the TCSO. Attached to these Notices is a summary of your rights under applicable federal law. If the TCSO uses information from the report in whole or in part in making an adverse decision regarding your application, you will receive a notice about the credit reporting company, confirmation that the credit reporting company is not responsible for any adverse action the TCSO takes and that the credit reporting company is unable to provide you with specific reasons for the action, and a notice about your rights under applicable law to obtain a free copy of your credit report from the credit reporting company within 60 days and your right to dispute the accuracy or completeness of any information in a consumer report.

The TCSO may also use a credit agency to do a reference check, known as an investigative consumer report, as part of the pre-employment screening process. Investigative consumer reports are reports credit agencies prepare about someone's character, general reputation, personal characteristics or mode of living that are obtained through personal interviews with such people as neighbors, friends and associates and reviewing records and public records, including but not limited to employment records, background reports, efficiency ratings, complaints, grievances, real and personal property records, criminal records and court records. This information may be obtained by contacting your previous employers and/or references you or others provide us. You have the right under the federal Fair Credit Reporting Act (FCRA) to request the additional information from any investigative consumer report, including: (1) a complete and accurate disclosure of the nature and scope of the investigation, and (2) the Federal Trade Commission's summary of consumer rights under the FCRA.

The TCSO will also use the authorization you provide as part of your application to check criminal records and driving records.

If you are hired, this authorization shall remain on file and shall serve as an ongoing authorization for the TCSO to procure background and credit information at any time during your employment.

**Authorization to Obtain Credit Reports and Investigative Consumer Reports  
And to Check Criminal Records and Driving Records**

I have read the Notices above and have received a copy of the summary of my rights under the federal Fair Credit Reporting Act. By my signature, I authorize the TCSO to obtain consumer credit reports and investigative consumer reports about me and to check criminal records and driving records as part of the pre-employment background investigation and at any time during my employment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name (please print): \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Soc. Sec. No.: \_\_\_\_\_

Any other last names: \_\_\_\_\_

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer-reporting agency" (CRA). Most CRA's are credit bureaus that gather and sell information about you -- such as if you pay your bills on time or have filed bankruptcy -- to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA at 15 U.S.C. §§1681-1681u. The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national Car's -- to which it has provided the data -- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the Car's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old, ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to people

with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

- **Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- **You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING	PLEASE CONTACT
CRA's, creditors and others not listed below	Federal Trade Commission Consumer Response Center- FCRA Washington, DC 20580 * 202-326-3761
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 * 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 * 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington D.C. 20552* 800- 842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 * 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 * 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 * 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator-GIPSA Washington, DC 20250 * 202-720-7051