

Jackson County Sheriff's Office

Employee Release of Information

I hereby authorizeto	obtain information about me from my
former employers, education institutions, credit s	ources, and other listed references.
I hereby authorize my former employers, educ	ational institutions, credit sources, and
other references listed on my employment applic	cation to disclose any information they
may have pertaining to my work performance, co	ooperativeness, ability to get along with
my coworkers and other qualifications for employ	yment to the Jackson County Sheriff's
Office.	
I hereby release, any for	mer employers, educational institutions
credit sources, and other references listed on my	y employment application from any
liability arising from the provision or use of this ir	nformation or any other reasonable and
necessary information to the employment proces	SS.
Signature:	Date:
Name:	
Address:	

Jackson County Sheriff's Office 396 LaFever St. PO Box 565 Walden, Colorado 80480 970-723-4242 An Equal Opportunity Employer

AUTHORIZATION FOR RELEASE OF INFORMATION

Full Legal Name		
Address	S:	SN:
Date of BirthPlace	e of Birth	<u></u>
l,, do her	by authorize a review of	of and full disclosure of all
records or any part thereof, concerning myself, by an	nd to any duly authoriz	ed personnel with the
Jackson County Sheriff's Office, whether the said rec		
including investigative reports that may exist within		
The intent of this authorization is to give my consent		
educational institutions, finical and/or credit institutions		
balances of checking and savings accounts, loans, inc		
agencies (including credit reports and/or ratings), uti		
employment records, including backgrounds reports		
or against me, salary records, real and personal prop		
statements and records wherever filed, records of co	mplaints, arrests, trial	and/or convictions for
alleged or actual violations of the law, including crim		
juvenile, the results of polygraph or CVSA examination		
or against me wherever located, and to include recor	rds and recollections of	f attorneys at law, or of other
counsel whether representing me or another person		
I reiterate and emphasize the intent of the authoriza	tion is to provide comp	plete and free access to the
background and history of my personal life only for t	he specific purpose of	pursuing a background
investigation which may provide pertinent data for th	ne Jackson County She	riff's Office to consider in
determining my suitability for employment by that o	rganization. It is my spe	ecific intent to provide access
to my personal information, however personal or cor	nfidential it may appea	r to be, and the sources of
information specifically identified therein.		
I understand that any information obtained by a pers	onal history backgrour	nd investigation, which is
developed directly or indirectly, in whole or part, upo	on this release authoriz	ation will be considered in
determining my suitability for employment by the Jac	kson County Sheriff's	Office. I understand that all
materials pertaining to this background investigation		
Sheriff's Office and will not be returned to me.		
agree to indemnify and hold harmless the person to	whom this request is	presented and his agents and
employees, from and against all claims, damages, los	ses, and expenses, incl	uding reasonable attorney's
fees, arising out or by confidential information canno		•
A photocopy or facsimile of this release form will be w		eof, even though the said
photocopy does not contain an original writing of my		Ü
Full legal name of applicant		·
Signature of applicant		

Personal

Name Last		Firs	t	Middle	
Other Names	you have beer	n known by			
Address where	e you reside: S	treet			Apt/unit
City		State		Zip	
Contact numb	ers: Home		Work		Cell
Email Address					
Are you 21 yea	ars of age? Y	es	No		
Date of Birth _					
Residence: Ple	ase list all you	ır residences dur	ing the last 10	years starting with the	e most current
From	₁ To	Address			a
Owner/Rent co	ollector name	& phone #			
From	To	Address			1
Owner/Rent co	ollector name	& phone #			
From	,To	Address			
Owner/Rent co	ollector name	& phone #			
From	To	Address			
Owner/Rent co	ollector name	& phone #			
From	To	Address			
Owner/Rent co	ollector name	& phone #			
Please list all ir starting with th			mbers, you hav	ve resided with during	the past 10 years
Name		Relation	onship	Phone#	
Name		Relation	onship	Phone#	
Name		Relation	onship	Phone#	
Name		Relation	onship	Phone#	
Name		Relatio	onship	Phone#	

Family:	
Mother	Phone #
Father	Phone#
Siblings	Phone#
:	Phone #
	Phone #
*	Phone #
	Address Phone #
Name	Address
Occupation	Phone #
Name	Address
Occupation	Phone #
	Address
Occupation	Phone #
Name	Address
Occupation	Phone #

Experience and Employment: Start with current/most recent and work back for the last 10 years. Account of any periods of unemployment

From	To	Name of Company_					
Supervisor		Phone#					
Address: City		State Zip					
Coworker Duties/Assignments							
			Reason for leaving				
		Name of Company_					
Supervisor		Pho	ne#				
Address: City		State	Zip				
			ignments				
			Reason for leaving				
From	To	Name of Company_					
Supervisor		Pho	ne#				
Address: City		State	Zip				
Coworker		Duties/Ass	ignments				
Starting Pay		Final Pay	Reason for leaving				
From	To	Name of Company_					
Supervisor		Pho	ne#				
Address: City		State	Zip				
Coworker		Duties/Ass	ignments				
Starting Pay		Final Pay	Reason for leaving				

From	To	Name of Company					
Supervisor		Phone#					
Address: City		State	Zip				
Coworker		Duties/Assig	nments				
Starting Pay		Final Pay	Reason for leaving				
From	To	Name of Company					
Supervisor		Phone	e#				
Address: City		State	Zip				
Coworker		Duties/Assig	nments				
Starting Pay		Final Pay	Reason for leaving				
From	To	Name of Company					
Supervisor		Phon	e#				
Address: City_		State	Zip				
Coworker		Duties/Assig	nments				
Starting Pay		Final Pay	Reason for leaving				
From	To	Name of Company					
Supervisor		Phon	e#				
			Zip				
			gnments				
Starting Pay		Final Pay	Reason for leaving				

Have you ever been fired from an emplo	yer? Yes No If yes, explain:	
Have you ever been asked to resign, or reresigned while under investigation? Yes		
Have you ever been disciplined at work? suspension, reduction in pay or demotion		
Have you ever stolen cash form an emplo	oyer? Yes No If yes, explain:	
Have you stolen over \$100.00 in propert	y from an employer? Yes No If y	res explain:
Have you ever taken anything, including without permission? Yes No If yes, d		n(s) taken:
Have you ever slept on the job without p		
Education		
List names and address (City/State) of Sc	hools	
High School/G.E.D	Years Attended Gr	aduate/Diploma (circle one)
CityState		
High School/G.E.D	Years Attended Gr	aduate/Diploma (circle one)
CityState		
College/University	Major/Minor	
Years Attended Graduated/Diplom	na (circle one) City	State
College/University	Major/Minor	
Years Attended Graduated/Diplom	na (circle one) City	State

Financial
Have you ever been delinquent on any tax payments? Yes No If yes, explain when, where and why:
Have you ever knowingly or purposefully written any "bad" checks? Yes No If yes, explain when, where, and why:
Have you ever filed for or declared bankruptcy? Yes No If yes, explain and include when, where and the circumstance:
Have you ever had purchased good repossessed? Yes No
Have you ever failed to file an income tax return? Yes No If yes, explain when where and why:
Have your wages ever been garnished? Yes No If yes, explain when, where, and why:
Have you ever falsified your credit to get money or goods? Yes No If yes, explain when, where, why:

Legal	
Have you ever been arrested or convicted of any crime in this state or any other as adult? Yes No If yes, list all offenses on additional sheets in this format:	a juvenile or an
Approximate Date Agency Charge(s) Explain circumstances	Case Sealed
Are you currently or have you previously been a party to a civil action? Yes No I where, and why:	f yes, explain when,
Have you ever committed a criminal act so serious, that if known, you could be char Yes No If yes, explain:	rged with a felony?
Have you ever committed an offense so serious that if known, it would prevent you this agency? Yes No If yes, explain when, where, and why:	
Have you ever had a complaint made against you by a customer, child, parent, citize coworker? Yes No If yes, explain when, where, and why:	
Have you ever been the subject of a restraining or protection order? Yes No	
Have you ever been contacted by a law enforcement agency, other than for traffic	charges? Ves No
	charges: 1es 140
If yes, list all contacts on additional sheets using this format Approximate Date Agency Reason for Contact	
Approximate Date Agency Reason for Contact Have you ever used company materials (tools, supplies, equipment, facilities, etc.) to the second	
Have you ever purposefully damaged or destroyed company, public or private propyes, explain when, where, and why:	

Have you ever ac Yes No If yes, o					:							
Have you ever ta yes, explain what											No	 If
Have you ever co who was involved Have you ever da	d and p	rovide (details c	of the in	cident or	additio	nal shee	et.				
Have you ever us								If yes,	explain w	hen,	wher	e,
Please Review at				wing to	the best	of your	knowle	dge. Fail	ure to co	mplet	e ead	:h
Have you ever co	mmitte	ed any o	offenses	include	d but no	t limited	d to:					
Harassment \	⁄es	No										
Theft over \$1000	0.00	Yes	No									
Violation of a Res	strainin	ıg Ordei	-	Yes	No							
Indecent Exposu	re	Yes	No									
Arson Yes	No											
Disorderly Condu	ıct	Yes	No									
Theft under \$100	00.00	Yes	No									
Possession, Use	or Sale	of Mari	juana o	r its Der	ivatives	Yes	No					
Assault with a De	eadly W	/eapon	Yes	No								
Burglary	Yes	No										

Criminal Misch	ief unde	r \$1000.	00	Yes	No	
Auto theft/joyr	iding	Yes	No			
Robbery	Yes	No				
Trespassing	Yes	No				
Child Abuse	Yes	No				
Criminal Misch	ief over	\$500.00	Yes	No		
Forgery/Fraud	Yes	No				
Sexual Assault	Yes	No				
		_			ner than Marijuana or its d n, LSD, PCP, anabolic stero	lerivatives (i.e. barbiturates, ids) Yes No
Drug Use						
					arbiturates, amphetamine	s, or anabolic steroids? Yes No
-						Yes No If yes, explain:
In the past 5 ye		•	d, distril	outed, o	r shared illegal drugs? Ye	es No
Current DL Nur	nber	_			State of Issue	Expiration Date
Name under w	hich DL v	vas gran	ted			
List all other sta	ates whe	re you h	nave bee	n licens	ed:	
State of issue_			DL Nun	nber		
State of issue_			DL Nun	nber		
State of issue_			DL Nun	nber		
	_		_			

List all traffic citations you have received in the past 7 years on a separate sheet, providing these four facts for each violation: Original Violation, Location, Plea, Approximate Date