

Putnam County Sheriff's Office

421 East Spring Street Cookeville, TN 38501 (931) 528-8484



PRINT IN BLACK INK OR TYPE. These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "NA." **Do not leave questions blank**. Be sure to sign the application when completed. The **Putnam County Sheriff's Office** is an Equal Opportunity Employe and does not discriminate on the basis of race, color national origin, sex, religion, age or disability in employment or the provision of services. Do not misstate or omit material facts since the statements made herein are subject to verification to determine your qualifications for employment. This application becomes public record and is subject to disclosure.

1. PERSONAL DATA

Position A	pplying for											
Last Name	2				Middle Name							
Current A	ddress	Street Name	e & Number ((No PO Boxes)		City		State	e Zip (Code		
Email					List any other names you have ever used (including maiden name)							
Phone ()			☐ Home								
Check One		Married ☐ Sepa		Single	Spouse	's Full Name			e you a US Citiz	en?		
Age		of Birth	Sex	Race	Driver	rs License No.		State				
duty	y station sep	our present address, li arately. PO Boxes ar		d addresses you have had for t able.	he past (10) years, including you	r addresses in t	he mil	itary service. I	nclude each		
Dates M From	IO/YR To	Street Address				City		County		Zip Code		
в а	re you a prev	vious employee of the F	Putnam Coun	ty Sheriff's Office?	☐ Yes		ease list dates on ment: (MO / YY)	f				
C A	re you currei	ntly working at the Puti	nam County S	Sheriff's Office as a regular or tem	porary en	nployee?	☐ Yes ☐	No				

	th disabilities who DO NOT WISH . Public disclosure of this informa				as "no". Information	reported regarding this ques	tion will be kept confidential
A Do you have a	disability?	No of the major		h individual; (2) a			substantially limits one or more as having such an impairment,
If you answered yes t	o the above stated question,	please list your disabili	ty:				
B Are you legally	eligible to work in the United	States?		Yes No			
C Are you related	l by blood or marriage to a pe	erson now employed by	the Putnam Cour	nty Sheriff's De	partment?	☐ Yes ☐ No	If yes, please indicate:
Name:		Relationship:		Dep	partment:		
			2 DEFEDI	NCCC			
List three(3) reference	es (NO relatives, household	members. or former er	2. REFERI		idults. and have kn	own vou well for at least	the last three(3) years.
Name		Street Address	,		City	State	Zip Code
How long known?	Occupation		Hc (ome Phone		Business Phone ()	
Name		Street Address	(,	City	State	Zip Code
How long known?	Occupation			ome Phone		Business Phone	
Name		Street Address	()	City	() State	Zip Code
How long known?	Occupation		Но	ome Phone		Business Phone	
			()		()	
			3. EDUCA	ATION			
·	cking all boxes that apply if yo	<u> </u>		· ·		icate College Degree	Masters Degree
High School Name		Graduated? Yes No	Type of Degre	e or Credit Hou	ırs		
Address			Cit	у		State	Zip Code
	Name(s) and lo	ocation(s) of College	s. Universities o	or vocational	schools attende	d or internships:	
College Name		Graduated?	Type of Degree				
Address		Yes No		in.		Chaha	7in Codo
Address			C	ity		State	Zip Code
College Name		Graduated? Yes No	Type of Degree	or Credit Hour	rs		
Address			C	ity		State	Zip Code
College Name		Graduated?	Type of Degree	or Credit Hou	rs		
Address			C	ity		State	Zip Code
B Have you ever	been suspended, disciplined o	or expelled from any hi	gh school or instit	ution of higher	learning? Ye	s No If YES, expl	ain below.

4. EMPLOYMENT HISTORY										
A Have you ever been dismissed or asked to resign from ANY employment?										
B If you do not want your present employer to be contacted, check the box to the right and on the back page explain why.										
Beginning with your present employer or most recent employer, list ALL of the places you have worked during the last ten (10) year period. Keep in chronological order. List periods of school, military service, each duty station, assigned military unit, unemployment, temporary assignments, volunteer service and part-time employment. List everything during the last ten(10) year period. Omit None! Copy the employment page and continue your information on the copy(s).										
From	Name	Job Title								
MO/YR	Street Address	Supervisor								
То	City Phone () -	Starting Salary								
MO/YR	State Zip Code	Ending Salary								
Describe your duties										
Part Time Full Time	Seasonal Volunteer If part-time, list number of hours worked per week									
Detail Reason for Leaving										
From	Name	Job Title								
MO/YR	Street Address	Supervisor								
То	City Phone () -	Starting Salary								
MO/YR	State Zip Code	Ending Salary								
Describe your duties										
Part Time Full Time	Seasonal Volunteer If part-time, list number of hours worked per week									
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MO/YR	Street Address	Supervisor								
То	City Phone () -	Starting Salary								
MO/YR	State Zip Code	Ending Salary								
Describe your duties										
☐ Part Time ☐ Full Time	☐ Seasonal ☐ Volunteer If part-time, list number of hours worked per week									
Detail Reason for Leaving										
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MO/YR	Street Address	Supervisor								
То	City Phone () -	Starting Salary								
MO/YR	State Zip Code	Ending Salary								
Describe your duties										
☐ Part Time ☐ Full Time	☐ Seasonal ☐ Volunteer If part-time, list number of hours worked per week									
Detail Reason for Leaving										





EMPLO	OYMEN	т ніѕтс	RY CONTINUED							
From			Name	Job Title						
MO/YR			Street Address			Supervisor				
То			City	Phone ()	-	Starting Salary				
MO/YR			State	Zip Code		Ending Salary				
Describe	your dutie	S								
☐ Part T	Time 🗌	Full Time	Seasonal Volunteer	If part-time, list number of hours w	orked per week					
Detail Rea	ason for Le	eaving								
From			Name			Job Title				
MO/YR			Street Address			Supervisor				
То			City	Phone ()	-	Starting Salary				
MO/YR			State	Zip Code		Ending Salary				
Describe	your dutie	S								
☐ Part 1	Time 🗌	Full Time	Seasonal Volunteer	If part-time, list number of hours w	orked per week					
Detail Rea	ason for Le	eaving								
C Hav	ve you eve	r applied fo	or ANY position with ANY law enforce	ement agency including local, state a	and federal ag	encies?	Yes No			
Dat	te		Position	Law Enforce	ement Agency		Disposition			
D Hav	ve you eve	r attended	a law enforcement academy?	☐ Yes ☐ No	We	ere you certified?	☐ Yes ☐ No			
Nar	me of acad	demv:			Da	te attended:				
		,.								
City	y & State:									
E Has	s your law	enforceme	nt certification ever been suspended	w board?		Yes No				
If Y	/ES , explair	n:								





5. ARREST HISTORY													
	The following questions pertain to your experiences in this country and all other countries as both a juvenile and an adult . Include any military law enforcement contact. If a charge or conviction was judicially expunged do not list it. Explain all "YES" answers in detail.												
				Yes	No				Yes	No			
A Have you ever had any contact with ANY law enforcement official, to include as a victim, witness or reporting party?						G	Have you ever been convicted of a crim	e?					
В		w enforcement erbal or written	official for any reason ever issued warning?			Н	Have you ever been booked into jail?						
С	Have yo		tained by a law enforcement			1	Have you ever received a criminal citati	on?					
D	Have yo	ou ever been ac	cused of a crime?			J	Have any relatives of you or your spous or held in any detention facility, jail or p						
Е	Have yo	ou ever been ch	arged with a crime?			K	Have the police ever been called to you reason?	r home for any					
F	Have yo	ou ever been ar	rested?										
L			yes" to any of the above questions, lis			w and	make certain you have explained it on the	e back page. ALL INCIDENT	rs must	ВЕ			
Secti		NED IN DETAIL	below. If more space is needed, use	tire back	page.								
(A – k	x)	MO/YR	Reason / Charge			Law	Enforcement Agency – City / State	Disposition / Sentence		MO/YR			





6. DRIVERS HISTORY											
A List all valid driver's license you now hold											
Issue Date	Тур	e of License	Expiration Date		State	Lice	ense Number				
B If you h	ave previously	y held a drivers licen	se from ANY state, please	indicate bel	ow:						
Issue Date	Тур	e of License	Expiration Date		State	Lice	ense Number				
C Is your	driver's licens	e currently restricted	ı d, suspended, or revoked?	Ye	es 🗌 No	Reaso	n:				
D			celed, refused, revoked, or the reasons and dates.	suspended?	?	☐ Ye	s 🗌 No	Date of Reinsta	atement		
E	Have you ever been charged with driving under the influence of alcohol or drugs? Yes No Convicted? Yes No										
I F	h and every T I se the back pa		nmons and written warning	g you have e	ver received. Lis	st in ch	nronol ogical orde	r beginning with	the most recent. If you need more		
MO / YR	Charge			Agency/ City or State Disposition / Co			Disposition / Co	onviction	MO / YR		





7. LIQUOR AND NARCOTICS													
A Have you ever used any prescription drugs not prescribed to you by a do								Yes No If YES, explain on the bac					
B If you have tried, used or ingested ANY of the drugs listed below, chec						neck the "Yes	box; if y	ou have not, ched	ck the "No" b	OX.			
	Include the number of times used and dates.												
		Yes	No	Total # Times Used	Last Use (MO/YR)	Date/s (MO/YR)			Yes	No	Total # Times Used	Last Use (MO/YR	Date/s (MO/YR)
Mar	ijuana						Cocain	e (powder/crack)					
Inha	lants						Heroin						
Ecst	asy						Opium						
Bark	iturates						Injecta	ble /Oral Steroids					
Hasl	nish						Other:						
·	phetamines						(LSD, PC	nogenic Substance P, Mescaline, oms, etc)	es 🔲				
If yo	If you have tried or used any of the drugs listed above or if you have tried or used any other drug without a doctor's prescription, explain on the back page.												
You MUST include dates and number of times used.													
					8	. GANG	AFFLIA	TIONS					
Α	Are you currently activity, to includ criminal activity?	e motorcyc			_	-	-	_	Yes 🗌 No		If YES, explain	on the back p	age.
В	Are you now in a unlawful or unco	-		o alter the for	m of governme	nt of the Unit	ted States	by any	Yes No		If YES, explain	on the back p	age.
					9	9. MILITA	ARY SE	RVICE					
Α	Have you served honorably in the Armed Forces of the United States on active duty for reasons other than training? A Include Army, Navy, Marine Corps, Air Force, Coast Guard, ROTC, or any other military or other semi-military organization. **ONLY Honorable Discharges will be considered for employment												
В	List dates of milit	ary service:	(list each	service perio	d separately)								
МО	/ YR Entered	Branch /	Organizati	on		Discharge	Date	Type of Dischar	ge			Rank	
С	Are you a membe	er of the Mi	litary Rese	erves?				Yes No					
D	Have you receive	d any form	of discipli	nary action fr	om the military	?		Yes No			ain on the back t it is for, when		
Е	E Current Military Status												



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NOTICE TO APPLICANTS

All applicants seeking employment with the Putnam County Sheriff's Office will be required to successfully pass a pre-employment background investigation. The overall purpose of the pre-employment background investigation is to verify that your application and any statements you have made to your prospective employer concerning your qualifications are true. Sheriffs in Tennessee have a legal duty as set forth in the Tennessee Code Annotated T.C.A. § 38-8-106 and in Rule 1110-2-03 of the Tennessee Peace Officers and Standards Training Commission (POST) to verify the qualifications of applicants seeking a position as a law enforcement officer. In some cases, laws may mandate a background investigation before employment, while in other cases it is merely a matter of public policy or procedure before placing someone in a position of public trust. Both state and federal courts have also held that there is an absolute necessity for public employees to be truthful. You must understand that a lack of truthfulness or deception of any type on your part will automatically and irrevocably result in your application being rejected for further consideration.

For some people, there may be one or more incidents or occurrences in their background which they regret or may result in embarrassment. The Putnam County Sheriff's Office will not make inquiries into areas of a person's background that have no legitimate bearing on their qualifications for employment. You should understand that the mere presence of so called "negative" information in your background is not automatically disqualifying. For example, an applicant may have engaged in mischievous and illegal conduct as a juvenile, used illegal drugs, or been involuntarily terminated from employment. These things in and of themselves may not automatically remove that person from consideration for employment, but lying about them will adversely affect your prospects of employment.

A pre-employment background investigation is not intended to be an intimidating experience or an unwarranted invasion into your privacy. Verification of information such as previous employment, education, and criminal history will be part of the background investigation. Applicants may also be required to participate in a medical and psychological evaluation as set forth in the Tennessee Code Annotated T.C.A. § 38-8-106 and in Rule 1110-2-03 of the Tennessee Peace Officers and Standards Training. The background investigation may also include a polygraph examination to verify the truthfulness of information provided in the application at the discretion of the Sheriff. Your background investigator will contact persons who know you, including present and/or former employers, and will examine official documents and records concerning you to ensure that you have been honest in your application and fulfill the legal mandates imposed by the courts and the legislature. The more forthright you have been, the greater the likelihood that your background can be completed in a timely and successful manner.

Pursuant to T.C.A. §10-7-501 et seq, (Tennessee Public Records Act) this application and the information contained within may become public record upon submission and released, in response to a public records act request unless otherwise protected by state or federal law.

I understand that any false statement and/or deliberate misrepresentations, whether by omission or commission, will result in my application being automatically and irrevocably rejected from further consideration. I certify that I have read the above statement and understand its contents.

Applicant Signature	Date	_
Applicant Print Full Legal Name		
Witness (Interviewer) Signature	Date	
Witness (Interviewer) Print Name		