

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 Applying for											
Last Name	•			First Name	Middle Name						
Current A	ddress	Street Name	e & Number ((No PO Boxes)		City		State	Zip	Code	
Email					List a	ny other names you have e	ever used (includ	ling ma	aiden name)		
Phone				Home							
()			☐ Cell							
Check One	e: 🔲 N	Married	rated	☐ Single	Spouse	's Full Name		Are	you a US Citiz	en?	
		Divorced Wide	owed						Yes 🗌 No		
Age	Place	of Birth	Sex	Race	Drive	rs License No.		State	2		
] 								
A Star	rting with vo	our present address, li	st all physica	al addresses you have had for the	he nast (10) years, including you	r addresses in t	he mil	itary service. I	nclude each	
		arately. PO Boxes ar			ne pase (10) years, merading you	uddi esses iii v		2001	norduo cuen	
Dates MO/YR From To Street Address						City	County		State	Zip Code	
	Document										
	Present										
В А	re you a prev	vious employee of the F	utnam Coun	ty Sheriff's Office?	☐ Yes		ease list dates of nent: (MO / YY)	f			
C A	re you curre	ntly working at the Putr	nam County S	Sheriff's Office as a regular or temp	oorary er	nployee?	Yes	No			

Are you related by blood or marriage to a person now employed by the Putnam County Sheriff's Department? Yes No In Name: Relationship: Department: Department: Department:	ş such an impairr		respect to an individual: (1) a physi individual; (2) a record of such imp 1990).		☐ Yes ☐ No	disability?	Do you have a
Are you related by blood or marriage to a person now employed by the Putnam County Sheriff's Department?				your disability:	stated question, please list	o the above st	you answered yes to
Are you related by plood or marriage to a person now employee by the Putnam County Sherits Department? Yes No In In In In In In In I			Yes 🗆 No		ork in the United States?	eligible to wo	Are you legally
### Relationship: Department: Comparison	yes, please dicate:	☐ Yes ☐ No	ty Sheriff's Department?	employed by th	marriage to a person now	l by blood or r	Are you related
st three(3) references (NO relatives, household members, or former employers) who are responsible adults, and have known you well for at least the last ame Street Address			Department:	nship:	Relation		ame:
st three(3) references (NO relatives, household members, or former employers) who are responsible adults, and have known you well for at least the last ame Street Address							
In three(3) references (NO relatives, household members, or former employers) who are responsible adults, and have known you well for at least the last time. Street Address							
Street Address City State Street Address City State			NCES				
Occupation Home Phone Business Phone () () ame Street Address City State Ow long known? Occupation Home Phone Business Phone () () ame Street Address City State Ow long known? Occupation Home Phone Business Phone () () Type of Degree or Credit Hours Name(s) and location(s) of Colleges, Universities or vocational schools attended or internships: Name(s) and location(s) of Colleges, Universities or vocational schools attended or internships: Occupation Home Phone Business Phone () () Type of Degree or Credit Hours Occupation GED Certificate College Degree Manual M	Zip Code					es (NO relativ	
Street Address City State	zip Code	State	City	t Address	Stree		ame
ame Street Address City State ow long known? Occupation Home Phone Business Phone () () ame Street Address City State Ow long known? Occupation Home Phone Business Phone () () 3. EDUCATION Indicate by checking all boxes that apply if you have any of the following: HS Diploma GED Certificate College Degree Migh School Name Graduated? Type of Degree or Credit Hours Name(s) and location(s) of Colleges, Universities or vocational schools attended or internships: Name(s) and location(s) of Colleges, Universities or vocational schools attended or internships: Ollege Name Graduated? Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No Type of Degree or Credit Hours Yes No No No No No No No No		Business Phone	me Phone		n	Occupation	ow long known?
ow long known? Occupation Home Phone Business Phone () () ame Street Address City State Ow long known? Occupation Home Phone Business Phone () () 3. EDUCATION Indicate by checking all boxes that apply if you have any of the following: HS Diploma GED Certificate College Degree Migh School Name Graduated? Type of Degree or Credit Hours Occupation		())				
ame Street Address City State Street Address City State Ow long known? Occupation Home Phone Business Phone ()	Zip Code	State	City	t Address	Stree		ame
Ame Street Address City State State Street Address City State		Business Phone	me Phone		n	Occupation	ow long known?
Occupation Home Phone Business Phone () () 3. EDUCATION Indicate by checking all boxes that apply if you have any of the following:		())				
Same	Zip Code	State	City	t Address	Stree	•	ame
State Stat		Business Phone	me Phone		n	Occupation	ow long known?
Indicate by checking all boxes that apply if you have any of the following:		())				
Igh School Name Graduated? Type of Degree or Credit Hours City State Zip Companies Name(s) and location(s) of Colleges, Universities or vocational schools attended or internships: Ollege Name Graduated? Type of Degree or Credit Hours Address City State Zip City State Zip Ollege Name Graduated? Type of Degree or Credit Hours Ollege Name Graduated? Type of Degree or Credit Hours			TION				
Graduated? Type of Degree or Credit Hours Other State State State State State Other State	lasters Degree	ficate College Degree	*	-		_	
Name(s) and location(s) of Colleges, Universities or vocational schools attended or internships: Graduated?			or Credit Hours		Gradu		gh School Name
Address City State Zip Graduated? Yes No City State Zip Ollege Name Graduated? Yes No Type of Degree or Credit Hours Yes No	Code	State		<u> </u>	l		ldress
Address City State Zip Ollege Name Graduated? Type of Degree or Credit Hours Yes No		ed or internships:	r vocational schools attend) of Colleges,	Name(s) and location(s)	N	
Address City State Zip Ollege Name Graduated? Type of Degree or Credit Hours Yes No			or Credit Hours	uateu:			ollege Name
□ Yes □ No	Code	State	у				Address
□ Yes □ No			or Credit Hours	ated?	Gradu		ollege Name
Address City State Zip							
	Code	State	у				Address
ollege Name Graduated? Type of Degree or Credit Hours Yes No			or Credit Hours				ollege Name
	Code	State	ty	_			Address
Have you ever been suspended, disciplined or expelled from any high school or institution of higher learning?		If VEC avaleia	tion of higher learning?	d from any high	ded disciplined or aver-	hoon sussand	Hayro you over 1
Have you ever been suspended, disciplined or expelled from any high school or institution of higher learning? Yes No If YES, explain below	1W4.	es 🔲 No 🔃 it its, explain	uon or nigher learning?	a iroin any high	ueu, uiscipiinea or expelled	been suspend	nave you ever I

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. Yes No										
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										
	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									
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									
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									
Detail Reason for Leaving										





EMPLO	YMENT	HISTORY CONTINUED							
From		Name			Job Title				
MO/YR		Street Address			Supervisor				
То		City	Phone ()	-	Starting Salary				
MO/YR		State	Zip Code		Ending Salary				
Describe yo	our duties	<u>.</u>			•				
Part Ti	ime 🗌 Fu	ıll Time Seasonal Volunteer	If part-time, list number of hours wor	ked per week					
Detail Reas	son for Leav	ing							
From		Name			Job Title				
MO/YR		Street Address			Supervisor				
То		City	Phone ()	-	Starting Salary				
MO/YR		State	Zip Code		Ending Salary				
Describe yo	our duties								
Part Ti	ime 🗌 Fu	ıll Time Seasonal Volunteer	If part-time, list number of hours wor	ked per week					
Detail Reas	son for Leav	ing							
C Have	e you ever a	pplied for ANY position with ANY law enforce	ment agency including local, state an	d federal agenci	es?	☐ Yes ☐ No			
Date	e	Position	Law Enforcen	ment Agency		Disposition			
D Have	e you ever a	ttended a law enforcement academy?	☐ Yes ☐ No	Were y	ou certified?	☐ Yes ☐ No			
Nam	ne of acaden	nv [,]		Date at	tended:				
, , ,	ie of dedder								
City	& State:								
E Has y	your law en	forcement certification ever been suspended	board?		☐ Yes ☐ No				
If YES	S, explain:								





	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	G Have you ever been convicted of a crime?					
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			ı	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 arı	rested?									
L	If you h	ave answered "	yes" to any of the above questions, lis	t the incid	dent belo	w and	make certain you have explained it on the	e back page. ALL INCIDENT	'S MUST	ВЕ		
Secti		NED IN DETAIL I	BELOW. If more space is needed, use	the back	page.	I						
(A – K	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		Type of License	Expiration Date		State	License Number						
B If you h	nave prev	riously held a drivers licen	se from ANY state, please	indicate bel	ow:	1						
Issue Date		Type of License	Expiration Date		State	Lice	ense Number					
C Is your	driver's l	license currently restricted	d, suspended, or revoked?	Ye	s 🗌 No	Reaso	n:					
D	Have you ever had a driver's license, canceled, refused, revoked, or suspended? If YES, explain in detail on the back page the reasons and dates. Date of Reinstatement											
E	Have you ever been charged with driving under the influence of alcohol or drugs? Yes No Convicted? Yes No If YES, explain on the back page.											
F		ery TRAFFIC citation, sum ack page.	nmons and written warning	g you have e	ver received. Lis	st in ch	nronol ogical orde	r beginning with t	the most recent. If you need m	ore		
MO / YR	Charge	е		Agency/ Ci	ty or State		Disposition / Co	onviction	MO / YR			





	7. LIQUOR AND NARCOTICS												
А	Have you ever us	ed any pres	scription d	rugs not pres	cribed to you by	a doctor?			Yes No	0	If YES, explain	on the back p	oage.
В	If you have tried,	used or ing	gested AN	Y of the drugs	listed below, ch	neck the "Yes	" box; if y	ou have not, che	eck the "No"	box.			
	Include the num	ber of time	s used and	d 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	ılants						Heroin						
Ecst	asy						Opium						
Bark	piturates						Injecta	ble /Oral Steroid	ls \Box				
Hasl	hish						Other:						
	ohetamines ed, meth, etc)						(LSD, PC	nogenic Substan P, Mescaline, oms, etc)	ces 🔲				
	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 date	es and num	ber of tim	es used.		CANC	A F F 1 1 A	TIONS					
						. GANG							
А	Are you currently activity, to includ criminal activity?	e motorcyc			_	-	-	_	Yes No	0	If YES, explain	on the back p	oage.
В	Are you now in a unlawful or unco	-		o alter the for	m of governme	nt of the Uni	ted States	by any	Yes No	0	If YES, explain	on the back p	oage.
					9	9. MILITA	ARY SE	RVICE					
А	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	ion		Discharge	Date	Type of Discha	rge			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, wher		
Е	E Current Military Status												



Putnam County Sheriff's Office

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



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		