



## DARKE COUNTY SHERIFF'S OFFICE

Applications are considered without regard to race, color, religion, sex, national origin, age, disability or any other legally protected status. Those applicants requiring reasonable accommodation to the application process should notify a representative of the Darke County Sheriff's Office.

**Submit Completed Application to :** Darke County Sheriff's Office, Chief Deputy  
5185 County Home Road Greenville, OH 45331

### **Applicant:**

Enclosed you will find the following forms:

1. Darke County Sheriff's Office Application Instructions
2. Darke County Sheriff's Office Disqualifying Criteria
3. Darke County Sheriff's Office Selection Process
4. Darke County Sheriff's Office Employment Application
5. Darke County Sheriff's Office Release and Waiver Form
6. Darke County Sheriff's Office Professional Integrity/ CVSA Questionnaire and release form


To facilitate the employment process, please fill out ALL portions of ALL forms and return to the Darke County Sheriff's Office.

If you list information on a separate sheet of paper, please print your name and social security number on each page submitted.

Please keep in mind that an incomplete application is grounds for disqualification from the employment process.

Thank you for your interest in the Darke County Sheriff's Office.

Sincerely,

  
Toby L. Spencer  
Sheriff

**THE DARKE COUNTY SHERIFF'S OFFICE IS AN EQUAL OPPORTUNITY EMPLOYER**



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5185 County Home Road Greenville, OH 45331

**Applicant:**


### PLEASE READ CAREFULLY AND FOLLOW THESE INSTRUCTIONS

When filling out the attached forms, special consideration should be given to the following areas:

1. All addresses must be complete, including full street address, city, state and zip code.
2. All telephone numbers must include area code.
3. **DO NOT** list Darke County Sheriff's Office employees as references.
4. **ALL** questions are to be answered, if a question is not applicable, then print "N/A" in the appropriate space. **Do not leave a question unanswered.**
5. All Professional Integrity questions must be answered completely and with details when requested.
6. If you list additional information on separate pieces of paper, you must print your name on each page that you attach.
7. If forms are incomplete or poorly prepared your application may be rejected.
8. Military veterans are requested to provide copies of their military personnel records including a DD-214. These can be obtained by applying online at <https://www.archives.gov/veterans/military-service-records>
9. **DECEPTION OR WILLFUL FALSIFICATION AT ANY STAGE OF THE APPLICATION PROCESS WILL RESULT IN IMMEDIATE TERMINATION FROM THE EMPLOYMENT PROCESS OR EMPLOYMENT, EVEN IF DISCOVERED AT A LATER DATE.**

Thank you for your interest in the Darke County Sheriff's Office.

Sincerely,

  
Toby L. Spencer  
Sheriff



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### **Disqualifying Criteria**

The Darke County Sheriff's Office has an obligation to the citizens it serves to employ persons of integrity and a high standard of professionalism. The Sheriff's Office seeks candidates that will maintain and instill public confidence in the Office of Sheriff. The Darke County Sheriff's Office may conduct investigations into your background including present and past employment, education, personal reference, conduct and criminal history. The Darke County Sheriff's Office may utilize a truth verification test to confirm an applicant's honesty and integrity during the application process. Applicants are not eligible for employment consideration unless they meet these high standards. Certain events may be grounds for disqualification and are described herein. This not to be construed as an inclusive list of reasons for disqualification or rejection.

#### **Disqualifying Criminal Conduct**

- **Felonies:** All applicants who have been convicted of or pleaded guilty or no contest to a felony in this state or in a state other than this state, or under the law of the United States, that, if committed in this state, would be a felony under the laws of this state, will be disqualified.
- **Misdemeanors:** All applicants who have been convicted of a misdemeanor offense in court within five (5) years of the date of application may be disqualified. All applicants convicted of two (2) or more misdemeanors will be disqualified.
- **Drugs (including marijuana):** Any use of any prohibited substance or abuse of a controlled substance may be grounds for rejection. All applicants who have been convicted in court of the possession and/or sale of narcotics, dangerous drugs or hallucinogens or any other controlled substance or drug of abuse or an attempt, conspiracy or solicitation to commit such a criminal act, will be disqualified. All applicants who have used marijuana in the last three years will be disqualified.
- **Sex Offenses and Acts of Violence:** All applicants who have been convicted in court of a sex offense as defined in Chapter 2907 of the Ohio Revised Code, or an offense of causing or threatening bodily harm as defined in Chapter 2903 of the Ohio Revised Code, or an attempt, conspiracy or solicitation to commit such a criminal act, will be disqualified.
- **Guns, Concealed Weapons and Dangerous Ordinance:** Any applicants who have been convicted in any federal, state or municipal court of violating any gun control ordinance, carrying any concealed weapon, or possession of any dangerous ordinance, will be disqualified. Any attempt to violate any law, statute, or regulation to the above may be grounds for rejection.

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- Any applicant who is currently a member of any organization that advocates crime or the violent overthrow of the United States government will be disqualified.

### **Disqualifying Traffic Offenses**

- All applicants who have been convicted in any court of competent jurisdiction of any of the following offenses will be disqualified: driving while impaired by drugs or alcohol on more than one occasion, or vehicular homicide.
- All applicants who have been convicted in the last five (5) years in any court of competent jurisdiction of any of the following offenses will be disqualified: driving while impaired by drugs or alcohol, leaving the scene, reckless driving, or revocation or suspension of driving privileges on two (2) or more occasions.
- Any applicant currently under suspension or revocation of driving privileges will be disqualified. Any applicant with (6) or more points on their current record may be disqualified. No applicant will be eligible for appointment as a sworn employee unless that person possesses a valid Ohio driver's license.

### **Disqualifying Employment-Related Conduct**

- All applicants who within five (5) years of the date of application have been discharged from previous employment for insubordination, serious misconduct on the job, unexcused absenteeism or tardiness, may be disqualified. All applicants who within the past five (5) years have been suspended, reprimanded, or disciplined for insubordination, misconduct on the job, unexcused absenteeism, tardiness, inefficiency, or neglect of duty on two (2) or more occasions, will be disqualified.
- Pilferage or thefts of cash, goods, or services from a place of employment may be cause for disqualification.

### **Miscellaneous Disqualifying Conduct**

- All applicants who have failed to obey or honor any judgments entered by a court of record, including, but not limited to, alimony or support payments, or have failed to pay any fine imposed by a court of record, may be disqualified.
- All applicants who have been other than honorably discharged from the United States military service for reasons that are job related may be disqualified.
- All applicants who have made any intentional false alarm to any police agency will be disqualified.
- All applicants who admit a current pattern of alcohol, drug abuse or illegal gambling within the past twenty-four (24) months will be disqualified (i.e., conduct that is predictable, repetitive or continuing activity).

- All applicants who have made false statements regarding any material matter during the selection process or have omitted any requested material information on the questionnaire, or who have cheated during any portion of the selection process will be disqualified.
- Any applicant who has paid or accepted a bribe or favor to cover or hide any criminal offense, or acted in any manner to prevent discovery and/or apprehension of any criminal by any duly constituted law enforcement agency, or was involved in any plan or attempt to accomplish any of the above, will be disqualified.
- All applicants who admit during the selection process to committing any of these offenses listed above may be disqualified as though they had been convicted.



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### Employment Process

The selection process for the Darke County Sheriff's Office has the following steps. The entire selection process may take several months.

- 1. Submission of an Application or Application Packet**
- 2. Pre-Background Investigation Interview**  
This is an interview done to assist the background investigator in gathering information that pertains to the applicant's background investigation.
- 3. Oral Interview**  
The interview board will consist of at least two Darke County Sheriff's Office employees.
- 4. A Computer Voice Stress Examination (CVSA)**  
The CVSA is only an investigative aid, which will be used together with other information to support decisions relevant to employment status. The questions will be gathered from answers you provided on your application and during your background interview.
- 5. A Thorough Background Investigation**  
A background investigation of each applicant will be conducted.
- 6. Interview with the Sheriff**  
An appointment with the Sheriff will be scheduled. The Sheriff will conduct an interview of the applicant.
- 7. A Psychological Examination**  
This is a psychological examination designed to assess the emotional stability and psychological fitness of each applicant. This will be conducted after a conditional offer of employment, but prior to actual appointment to probationary status.
- 8. A Medical Examination**  
A medical examination of each applicant will be conducted after a conditional offer of employment, but prior to actual appointment to probationary status.
- 9. An Offer of Employment**  
You will be notified by the Sheriff or his designee on an offer of employment and a start date.



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APPLICATION FOR EMPLOYMENT

PLEASE TYPE OR PRINT RESPONSES TO ALL OF THE QUESTIONS CONTAINED ON THE ENTIRE APPLICATION

Position(s) applied for (check each box that applies): Date of Application:

- Road Patrol Corrections Dispatch Administrative/ Clerk Reserve/ Auxiliary Deputy

Name Last First Middle

Address Street City State zip

Telephone # Cell E-mail

Social Security # Driver's License #

Are you an Adult? Yes No

Have you submitted an application here before? Yes No

If yes, give date(s) and position(s)

Have you ever been employed by Darke County? Yes No

If yes, give date(s) and position(s)

Are you related to anyone employed by the Darke County Sheriff's Office? Yes No

Are you legally eligible for employment in the United States? Yes No

Are you a resident of Ohio? Yes No

If not, are you willing to become a resident upon employment? Yes No

Date available for work

- Are you available to work: Full Time Part Time Shift Work Temporary Weekends Holidays

Can you travel if the job requires it? Yes No

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Will you work overtime if required?  Yes  No

If no, please explain \_\_\_\_\_

Do you possess a valid driver's license?  Yes  No

Have you obtained an Ohio Peace Officer Certification?  Yes  No

If yes, date the certification was issued \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No

If yes, please explain \_\_\_\_\_

\_\_\_\_\_  
(The employer will only consider specific crimes related to the qualifications for positions applied for.)

Do you have any commitments (i.e. Second Job, School, Etc.) which might interfere with or adversely affect your employment should we select you for a position?  Yes  No

If yes, please explain \_\_\_\_\_

\*\*\*\*\*

**EMPLOYMENT HISTORY AND WORK EXPERIENCE**

In this section, list ALL employment history and work experience, including military experience, part time employment or volunteer work. Start with your PRESENT employer and work backwards in order of date. Use additional paper if necessary. FAILURE TO INCLUDE ALL EMPLOYMENT MAY BE GROUNDS FOR DISQUALIFICATION.

\*\*\*\*\*

**CURRENT EMPLOYER:** \_\_\_\_\_  
(ENTER "NONE" IF UNEMPLOYED)

**MAY WE CONTACT YOUR CURRENT EMPLOYER PRIOR TO EMPLOYMENT?**

YES \_\_\_\_\_ NO \_\_\_\_\_

**EMPLOYER ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**DATES EMPLOYED:** \_\_\_\_\_ TO \_\_\_\_\_

**JOB TITLE:** \_\_\_\_\_

**SUPERVISOR'S NAME:** \_\_\_\_\_

**BEGINNING SALARY:** \_\_\_\_\_ **PER** \_\_\_\_\_ **CURRENT SALARY:** \_\_\_\_\_ **PER** \_\_\_\_\_

**DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS, ETC.**

\_\_\_\_\_

\_\_\_\_\_

**WHY DO YOU WANT TO LEAVE?** \_\_\_\_\_

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\*\*\*\*\*

PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_  
\_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

\*\*\*\*\*

PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_  
\_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

\*\*\*\*\*

PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

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BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

\*\*\*\*\*  
PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

\*\*\*\*\*  
PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

\*\*\*\*\*  
PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_  
\_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

\*\*\*\*\*

PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_  
\_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

\*\*\*\*\*

PREVIOUS EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

DATES EMPLOYED: \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

SUPERVISOR'S NAME: \_\_\_\_\_

BEGINNING SALARY: \_\_\_\_\_ PER \_\_\_\_\_ CURRENT SALARY: \_\_\_\_\_ PER \_\_\_\_\_

DESCRIBE YOUR DUTIES, RESPONSIBILITIES, EQUIPMENT OPERATED, PROMOTIONS,  
ETC. \_\_\_\_\_  
\_\_\_\_\_

WHY DID YOU LEAVE? \_\_\_\_\_

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**IF YOU NEED TO LIST ANY ADDITIONAL PREVIOUS EMPLOYERS, PLEASE USE A BLANK SHEET OF PAPER TO DO SO**  
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**EDUCATION AND TRAINING**  
**THIS SECTION IS INTENDED TO GIVE THE EMPLOYER INFORMATION ABOUT THE EDUCATION AND TRAINING THAT THE APPLICANT HAS COMPLETED, AND TO DEMONSTRATE THE SKILLS, KNOWLEDGE, AND ABILITIES OF THE APPLICANT TO PERFORM THE JOB DUTIES OF THE POSITION.**  
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**HIGH SCHOOL ATTENDED:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DID YOU GRADUATE?** \_\_\_\_\_ **HIGH SCHOOL EQUIVALENT?** \_\_\_\_\_

**COURSES PERTAINING TO JOB APPLIED FOR:** \_\_\_\_\_

\_\_\_\_\_

**ACTIVITIES, AWARDS, SPORTS, ETC.:** \_\_\_\_\_

\_\_\_\_\_

**COLLEGE OR TRADE SCHOOL ATTENDED:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DATES OF ATTENDANCE:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**DID YOU GRADUATE?** \_\_\_\_\_ **DEGREE:** \_\_\_\_\_

**COURSES PERTAINING TO JOB APPLIED FOR:** \_\_\_\_\_

\_\_\_\_\_

**ACTIVITIES, AWARDS, SPORTS, ETC.:** \_\_\_\_\_

\_\_\_\_\_

**GRADUATE SCHOOL(S) ATTENDED:** \_\_\_\_\_

\_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DATES OF ATTENDANCE:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**DID YOU GRADUATE?** \_\_\_\_\_ **DEGREE:** \_\_\_\_\_

\_\_\_\_\_

**THE DARKE COUNTY SHERIFF'S OFFICE IS AN EQUAL OPPORTUNITY EMPLOYER**

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**PLEASE USE THE FOLLOWING SPACE TO PROVIDE ANY FURTHER INFORMATION ON TRAINING, EDUCATION, SKILLS, ABILITIES, HOBBIES, VOLUNTEER WORK, ETC., THAT YOU POSSESS OR HAVE EXPERIENCED THAT MAY BE HELPFUL IN THE EVALUATION OF YOUR APPLICATION.**  
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**PLEASE LIST THREE (3) REFERENCES WHO ARE NOT RELATED TO YOU THAT YOU HAVE KNOWN AT LEAST ONE (1) YEAR:**

**NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **ADDRESS:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **ADDRESS:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **ADDRESS:** \_\_\_\_\_

\*\*\*\*\*  
**PLEASE READ EACH OF THE FOLLOWING PARAGRAPHS CAREFULLY. INDICATE YOUR UNDERSTANDING OF, AND CONSENT TO, THE CONTENTS AND CONDITIONS OF EACH PARAGRAPH BY PLACING YOUR INITIALS AT THE END OF EACH PARAGRAPH. IF YOU HAVE ANY QUESTIONS REGARDING THESE PARAGRAPHS, CONTACT THE EMPLOYER BEFORE INITIALING THE PARAGRAPH.**  
\*\*\*\*\*

1. I understand and accept that, if I am selected for employment, my employment may be conditioned upon my passing any medical examination that the employer deems necessary to determine whether I can physically perform the essential functions of the position, with reasonable accommodation when necessary. I understand and accept that this may include drug, alcohol or substance abuse testing.

**Initials:** \_\_\_\_\_

2. I understand and accept that if any information required in this application is found to be falsified or intentionally excluded, my application may be disqualified from further consideration. I further understand and accept that if I am employed by the employer, I may be subject to disciplinary action, including termination, if any information required by this application has been falsified or intentionally excluded.  
Initials: \_\_\_\_\_
3. I understand and accept that the employer requires a high degree of integrity and confidentiality of its employees. I also understand and accept that the various law enforcement and informational agencies that exchange information and data with the employer require that the employer's employees do not have a past record of unlawful activities. Therefore, I understand and accept that, depending on the division in which I am applying for employment, it may be necessary for the employer to investigate my background for any criminal or unlawful activity.  
Initials: \_\_\_\_\_
4. If employed, I understand and accept that depending on the division in which I am applying for employment, I may be required to work evening shifts or night shifts, including weekends, holidays, be on call and work mandatory overtime hours.  
Initials: \_\_\_\_\_
5. I hereby authorize the employers, schools and personal references named in this application to provide information regarding me to the employer. I further authorize the release of personnel, academic and other records to the employer.  
Initials: \_\_\_\_\_
6. If you are hired, this application will become part of your official employment record.  
Initials: \_\_\_\_\_
7. I understand and accept that if I am hired it will be my responsibility to read and understand all written policies, directives, and SOPs; and that I will be disciplined for violating them.  
Initials: \_\_\_\_\_
8. I understand that racial, religious, and sexual harassment are prohibited by law, and I understand and accept that I will be fired if I engage in prohibited harassing behavior.  
Initials: \_\_\_\_\_
9. I understand that, as a sworn deputy sheriff, I must maintain my credibility at all costs. As such, I understand and agree that I should, and will, be terminated if I falsify a report or tell a lie during any investigation.  
Initials: \_\_\_\_\_
10. I understand that my job may be safety-sensitive and that I may be sent for a drug or alcohol test at any time.  
Initials: \_\_\_\_\_
11. I understand that all information that comes into my possession is to be regarded as confidential, and that I may not copy any record for my own use without written permission, on pain of termination.  
Initials: \_\_\_\_\_

**\*\*READ CAREFULLY BEFORE SIGNING\*\***

**I SOLEMNLY SWEAR THAT ALL OF THE INFORMATION FURNISHED IN THIS EMPLOYMENT APPLICATION IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE THE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT ANY MISREPRESENTATION OR FALSIFICATION OF THE INFORMATION PROVIDED MAY LEAD TO WITHDRAWAL OF AN EMPLOYMENT OFFER OR TERMINATION FOLLOWING EMPLOYMENT. I ALSO RECOGNIZE THAT MY FUTURE EMPLOYMENT WITH THE EMPLOYER WILL BE JEOPARDIZED IF I ENGAGE IN SUBSTANCE ABUSE, ILLEGAL DRUG USE, OR ALCOHOL ABUSE.**

\_\_\_\_\_  
**(Applicant's Signature)**

\_\_\_\_\_  
**(Date)**

\_\_\_\_\_  
**(Notarized by)**

\_\_\_\_\_  
**(Date)**



DARKE COUNTY SHERIFF'S OFFICE
WAIVER AND AUTHORIZATION FOR RELEASE OF INFORMATION

To Whom It May Concern:

Having made application for employment with the Darke County Sheriff's Office, Greenville, Ohio and desiring it to be informed as to my previous or present record and character, and being fully aware that my entire background is being investigated thoroughly. I authorize any agent of the Darke County Sheriff's Office, bearing this release or a copy of it, within one year of it's date, to obtain any information pertaining to me including but not limited to my employment, attendance, athletic, personal history, military service, medical history, performance report, background investigation, criminal investigation, employment application(s) (past or present, whether hired or not), any attachments to the employment application, training, polygraph, voice stress or psychological examinations, educational transcripts, any and all internal investigation and/or disciplinary investigations, including any materials which have been sealed, expunged or understood to be withheld pursuant to any prior agreement or court proceeding involving disciplinary or credit matters, any and all results from any test conducted, whether oral or written, any and all information from the Social Security Administration.

I hereby release you, as custodian of such records, and any employer, education institution, physician, psychologist, psychiatrist, hospital, or other repository of medical records, credit bureau, consumer reporting agency, retail business, military or governmental entity, including it officers, employees or related personnel, both individually and collectively from any and all responsibility and liability for damages, of whatever kind, which may at anytime result to me, my heirs, family, relatives or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

I authorize any agent of the Darke County Sheriff's Office, bearing this release or a copy of it, within one year of its date, to obtain any medical records/ information from my current or former physician(s), current or former employer(s), which pertain to my employment.

This release is executed with full knowledge and understanding that the information is for the official use of the Darke County Sheriff's Office, Greenville, Ohio. Consent is hereby granted for the Darke County Sheriff's Office to furnish this information described above to third parties in the course of fulfilling its official responsibilities, including releasing information beyond the expiration date of this release and waiver.

According to Ohio Revised Code 2151.358 & 2953.32 any law enforcement agency may inspect both juvenile and adult sealed records under these statutes for the purposes of conducting a background investigation of a person being considered for employment as a law enforcement officer or corrections officer. Furthermore, Ohio Revised Code 4113.71 provides for immunity of an employer from civil liability as to job performance information disclosures as long as that information is not false, or used with intent to deliberately mislead, or is made in bad faith or with malicious purpose.

Sign your full name Date

Subscribed and Sworn to me on this \_\_\_ day of \_\_\_ 20\_\_

Print your full name

Notary Public

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# DARKE COUNTY SHERIFF'S OFFICE VOICE STRESS QUESTIONNAIRE

## IMPORTANT INFORMATION FOR YOUR CVSA APPOINTMENT

- 1. Please complete the questionnaire before your CVSA appointment and bring it to your appointment.**
  - 2. Bring a photo ID to the CVSA appointment.**
  - 3. Your CVSA appointment will last 2-3 hours.**
  - 4. If you need to cancel your appointment, please call 937-548-3399 at least 24 hours in advance. Your file will be inactivated if you do not call.**
- 

This portion of the selection process with the Darke County Sheriff's Office will cover your truthfulness and integrity. It is essential that you answer each question truthfully. Withholding information or intentionally lying on this questionnaire or during the examination will result in immediate disqualification from the hiring process. This information will be verified through interviews, background investigations and truth verification testing. If there is any information that has not been previously disclosed during the selection process, now is your opportunity to explain the circumstances of why non-disclosure occurred so that a fair evaluation can be made.

**REMEMBER:** You are applying with a law enforcement agency. Your honesty and integrity on this questionnaire is vital. The answers you give here are for our use in determining your suitability for employment with the Darke County Sheriff's Office.

I, \_\_\_\_\_ do hereby voluntarily, without threat, coercion or promise made to me, submit to a Computer Voice Stress Analyzer examination. I further understand that I am free to leave at any time for any reason. I hereby release, absolve and forever hold harmless the Darke County Sheriff's Office, its servants, agents and anyone acting on its behalf, from any and all claims, demands, or other damages from any matter or act, arising out of the aforesaid examination. I understand that this examination will be video and/or audio recorded. To the best of my knowledge, I have no physical or mental condition that would prevent me from taking this examination.

\_\_\_\_\_  
Signature of Person Being Examined

\_\_\_\_\_  
Signature of Examiner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

02/2017

## INSTRUCTIONS FOR COMPLETING QUESTIONNAIRE

Please complete fully and accurately or your processing may be delayed or stopped.

**Providing false information shall be sufficient cause for rejection. The background investigation and truth verification examination will verify all information provided.**

This information is for statistical and criminal history use.

Please TYPE/PRINT the following requested information.

Please list all persons age 18 and over that live or have lived at your residence in the past 12 months.

NAME (Last, First, Middle)	DOB	SEX	SOC. SEC. #	RELATIONSHIP

## BACKGROUND QUESTIONNAIRE

You may use the back page of the questionnaire to further explain your answers if necessary. If you have questions concerning your background or truth verification testing, write them on the back of the last page.

(Note: This is your opportunity to fully explain your history. Please take full advantage of this and be specific and detailed as possible. If you are not completely honest and up front with your answers, or you are intentionally vague with your responses, the result will be termination from the employment process.)

### UNDETECTED CRIMES

1. Have you ever committed an act that you were not caught doing, but if caught you would have been arrested? Yes  No  (If yes, explain details)
  
2. Have you ever been involved in any of the following? (If yes to any, please include when, where, and value on the back page.)

A. Switching price tags	Yes <input type="checkbox"/>	No <input type="checkbox"/>
B. Car Theft	Yes <input type="checkbox"/>	No <input type="checkbox"/>
C. Theft of car parts	Yes <input type="checkbox"/>	No <input type="checkbox"/>
D. Robbery	Yes <input type="checkbox"/>	No <input type="checkbox"/>
E. Burglary (home/business)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
F. Embezzlement	Yes <input type="checkbox"/>	No <input type="checkbox"/>
G. Concealed Weapon	Yes <input type="checkbox"/>	No <input type="checkbox"/>
H. Fires you started	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I. Con Games	Yes <input type="checkbox"/>	No <input type="checkbox"/>
J. Leaving the scene of an accident	Yes <input type="checkbox"/>	No <input type="checkbox"/>
K. Counterfeiting	Yes <input type="checkbox"/>	No <input type="checkbox"/>
L. Fire Bombing	Yes <input type="checkbox"/>	No <input type="checkbox"/>
M. Mugging	Yes <input type="checkbox"/>	No <input type="checkbox"/>
N. Assault	Yes <input type="checkbox"/>	No <input type="checkbox"/>
O. Buy, Sell or Possess Stolen Property	Yes <input type="checkbox"/>	No <input type="checkbox"/>
P. Using Stolen Credit Cards	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Q. Failure to Pay Alimony or Child Support	Yes <input type="checkbox"/>	No <input type="checkbox"/>
R. Illegally obtaining public assistance, workers Compensation or unemployment by fraud	Yes <input type="checkbox"/>	No <input type="checkbox"/>
  
3. Have you ever filed an insurance claim that was not accurate (over estimating losses)?  
Yes  No  (If yes, explain details)
  
4. Has law enforcement ever been called because of your involvement in something?  
Yes  No  (If yes, explain details)
  
5. Were you ever in a fight in which a weapon was used?  
Yes  No  (If yes, explain details)
  
6. Have you ever injured or caused the death of another person?  
Yes  No  (If yes, explain details)

7. Have you ever physically abused a spouse, girlfriend, boyfriend, or child?  
Yes  No  (If yes, explain details)
8. Have you ever intentionally damaged property belonging to another person?  
Yes  No  (If yes, explain details)
9. Have you ever filed a false police report?  
Yes  No  (If yes, explain details)
10. What is the most serious thing you have ever done in your life?
11. Have you ever participated in a riot or disturbance?  
Yes  No  (If yes, explain details)
12. Since you have been an adult (18 years old), have you ever had any sexual involvement with someone under 18 years old? Yes  No  If yes, how old were they?  
How old were you? How long ago? (Explain detail)
13. Have you ever sexually assaulted anyone?  
Yes  No  (If yes, explain details)
14. Have you ever engaged in prostitution or used the services of a prostitute?  
Yes  No  (If yes, explain details)
15. Have you ever been accused of any misconduct?  
Yes  No  (If yes, explain details)

16. Have you ever been questioned by a law enforcement agency as a suspect in an investigation? (Do not include situations in which you were a victim or witness of a crime.)  
Yes  No  (If yes, explain details)
17. Other than what has already been covered, have you been involved in anything for which you could have been arrested? Yes  No  (If yes, explain details)
18. Have you ever belonged to, or associated with anyone belonging to any organization, past or present, that would place the integrity of the Sheriff's Office in question (e.g., KKK, Nazi organization, gang member, organized crime)? Yes  No  (If yes, explain details)
19. Do you now or have you ever had regular associations with persons whom you knew or should have known, were under criminal investigation, or had a reputation in the community or with law enforcement agencies for involvement in criminal behavior?  
Yes  No  (If yes, explain details)
20. Have you ever committed any computer related crimes?  
Yes  No  (If yes, explain details)
21. Have you ever viewed child pornography or participated in an act of child pornography?  
Yes  No  (If yes, explain details)
22. Have you ever had sex with a relative other than your spouse?  
Yes  No  (If yes, explain details)
23. Have you ever disseminated (sent/forwarded) sexually oriented material to a juvenile? (This includes in person, by texting, e-mail or other communication devices)  
Yes  No  (If yes, explain details)

## MILITARY

1. Have you ever served in any military organization?  
Yes  No  If yes, what branch?
  
2. What type of discharge did you receive? Honorable  Dishonorable  Honorable conditions   
Other
  
3. Dates of active duty:
  
4. Have you ever received a court martial, been tried on charges, or were you the subject of a summary court, deck court, Captain's Mast, company punishment, or any other type of disciplinary action while a member of the armed forces?  
Yes  No  (If yes, explain details)
  
5. Are there any incidents concerning your military career that could possibly affect this examination? Yes  No  (If yes, explain details)

## ARREST RECORD

1. Have you ever been arrested, charged, or detained by a law enforcement agency, including military apprehensions? (Include any arrests in which charges were dropped, reduced, found not guilty, or in which the records were sealed or expunged. Pursuant to the Ohio Revised Code, a law enforcement agency does have access to sealed and expunged records, both adult and juvenile, during a background investigation for the purposes of considering a person for employment. You must disclose records even when sealed or expunged. Failure to do so could result in termination of the application process. A Notice to Appear is considered an arrest and must also be listed.)  
Yes  No   
(If yes, explain details. Include the charge, arresting agency, date and final disposition of the case.)
  
2. Have you ever served probation, parole, community control, or community service?  
Yes  No  (If yes, explain details)
  
3. What fines have you been required to pay, and were they paid on time? (other than traffic)

4. Have you ever been fingerprinted by a law enforcement agency?  
Yes  No  (If yes, provide agency, date and the reason why you were fingerprinted)

### DRUG USAGE

1. How many times in your life have you used marijuana? (Please include approximate dates and how many times weekly, monthly)
2. When was the last time that you used marijuana?
3. Have you used any of the following? (If yes, include total number of times and the date last used.)
- |  |                           |
|--|---------------------------|
| A. _____ Speed                         | L. _____ Steroids         |
| B. _____ Barbiturates (downers)        | M. _____ PCP (Angel Dust) |
| C. _____ Amphetamines (uppers)         | N. _____ Crack            |
| D. _____ Rush                          | O. _____ Cocaine          |
| E. _____ Quaaludes                     | P. _____ Heroin           |
| F. _____ LSD                           | Q. _____ Ecstasy          |
| G. _____ Hash                          | R. _____ Designer Drugs   |
| H. _____ Ice or Methamphetamine        | S. _____ Peyote           |
| I. _____ Mushrooms                     |                           |
| J. _____ Mescaline                     |                           |
| K. _____ Another person's prescription |                           |

Any other illegal substance not listed:

4. Have you ever used inhalants, or any other legal substance to get high? (Paint thinner, aerosol, glue, whippets) Yes  No  (If yes, explain details)
5. Have you ever been involved in the purchase of any illegal drug?  
(Any amount from a joint to a kilo) Yes  No  (If yes, include type of drugs, the amount, the circumstances and the last time)
6. Have you ever been involved in the sale of illegal drugs, either directly or indirectly?  
Yes  No  (If yes, include type of drugs, the amount, the circumstances and the last time)

7. Have you ever benefited from the sale of illegal drugs, to include money, free drugs or sexual favors? (Note if you have received any money from a friend or a family member involved in drug sales indirectly, list here and give details.) Yes  No  (If yes, explain details)
  
8. Have you ever set up a drug deal?  
Yes  No  (If yes, explain details)
  
9. Have you ever been in the company of people using illegal drugs?  
Yes  No  (If yes, explain details and the last time)
  
10. What is the total amount of money you have spent on illegal drugs in your life?
  
11. Have you ever stolen money from a drug dealer?  
Yes  No  (If yes, explain details)
  
12. Have you ever driven a motor vehicle under the influence of illegal drugs?  
Yes  No  (If yes, explain details)
  
13. Have you ever tried to grow or cultivate any illegal drugs? (Include the amount from one seed and up) Yes  No  (If yes, explain details)
  
14. Have you ever manufactured, attempted to manufacture or participated in the manufacture of any illegal drugs? (Include any purchasing or gathering of chemicals or materials to be used for the manufacture of drugs)  
Yes  No  (If yes, include type of drugs, the amount, the circumstances and the last time)
  
15. Explain, in detail any other information relating to illegal drug use or involvement which has not been covered, to include transportation, etc.



**THEFT OF MERCHANDISE**

1. Estimate the total amount of merchandise, tools and equipment that you have taken:

_____ \$50,000	_____ \$5,000	_____ \$500	_____ \$75
_____ \$40,000	_____ \$4,000	_____ \$400	_____ \$50
_____ \$30,000	_____ \$3,000	_____ \$300	_____ \$25
_____ \$20,000	_____ \$2,000	_____ \$200	_____ \$10
_____ \$10,000	_____ \$1,000	_____ \$100	_____ \$5

2. Name the single most expensive item that you have taken?

Item: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_

3. Have you ever taken anything or shoplifted anything from a business? (Include personal and employee theft) Yes  No  (If yes, explain details)

4. Have you ever been with anyone who was stealing merchandise or equipment?

Yes  No  (If yes, explain details)

5. Have you ever taken anything from a current or former employer?

Yes  No  (If yes, explain details)

6. Estimate the amount of cash that you have stolen in your entire life and explain each incident. (Include personal cash thefts from family or friends and cash thefts from employers, along with any other incidents.)

7. Have you ever purchased, pawned, or sold an item you knew or should have known was stolen?

Yes  No  (If yes, explain details)

**EMPLOYMENT HISTORY**

1. Have you ever been terminated or asked to resign from a job?

Yes  No  (If yes, explain details)

2. Have you ever been disciplined by your current or previous employers? (If discipline was by a law enforcement agency, refer to law enforcement experience questions.)  
Yes  No  (If yes, explain details)
  
3. Have you ever resigned or been given the opportunity to resign from a job in which you were under investigation for policy violations or misconduct?  
Yes  No  (If yes, explain details)
  
4. Did you list ALL of your jobs for the past ten years on your employment application to include part-time, temporary and volunteer jobs? Yes  No  (If no, explain details)

#### **DRIVING HISTORY**

1. Has your driver's license ever been suspended or revoked?  
Yes  No  (If yes, explain details)
  
2. In what states, other than Ohio, have you had a driver's license? (List all states and include temporary and learning permits.)
  
3. Are all traffic citations that you have ever received listed on your employment application?  
Yes  No  (If no, explain details)
  
4. Have you ever been involved in a traffic accident that was your fault?  
Yes  No  (If yes, explain details)
  
5. Has your auto insurance ever lapsed? Yes  No  (If yes, explain details)
  
6. How many times have you driven a vehicle while under the influence of alcohol, where if stopped, you could have been arrested? \_\_\_\_\_ When was the last time?
  
7. Have you ever been involved in any other acts, involving alcohol, which could be considered criminal? Yes  No  (If yes, explain details)

## FINANCIAL HISTORY

1. Have you ever filed bankruptcy? Yes  No  (If yes, explain details)
  
2. Have you ever had anything repossessed? \_Yes  No  (If yes, explain details)
  
3. Have you ever been involved in any civil actions (past or present)?  
Yes  No  (If yes, explain details)
  
4. Are you currently more than three months behind on any bills?  
Yes  No  (If yes, explain details)
  
5. Are any creditors pursuing you for outstanding debts?  
Yes  No  (If yes, explain details)
  
6. Are there any financial obligations or bills that you have refused to pay or for which you feel you are not responsible? Yes  No  (If yes, explain details)
  
7. Have you ever been or are you currently responsible for any child support payments?  
Yes  No  (If yes, explain details)
  
8. Estimate the amount of debt that you owe, not including house or car payments:
  
9. When did you last write a check that bounced or when you knew that there were no funds to cover the value of the check? How many in a lifetime?  
  
Have you ever written a check using another person's name?  
Yes  No  (If yes, explain details)
  
10. Have you ever used a fraudulent document to obtain money?  
Yes  No  (If yes, explain details)

**ALIASES**

1. List ALL NAMES that you have ever used, to include maiden, nicknames, married and legal name changes, and dates used.

**I certify that the above information provided is true and correct. I have been truthful in my answers to these questions.**

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

## QUESTIONS FOR CURRENT OR FORMER LAW ENFORCEMENT OFFICERS

If you answer “yes” to any of the following questions, please explain and provide details to include where you were employed at the time and the date of the occurrence. Use additional paper or the back of the questionnaire if necessary.

1. Have you ever accepted a cash bribe or gratuity?
2. Have you ever taken (stolen) anything from an investigative site?
3. Have you ever stolen from a prisoner or detainee?
4. Have you ever been investigated for or accused of using excessive force?
5. Have you ever used more force than necessary to subdue another person or have you ever witnessed an excessive force situation?
6. Have you ever struck a handcuffed or restrained prisoner?
7. Have you ever handled evidence in an illegal manner?
8. Have you ever falsified any type of official report?
9. Have you ever used your position as a law enforcement officer for personal gain?
10. Have you ever been the subject of an internal investigation? If yes, list in chronological order, short synopsis and outcome to include discipline received. PLEASE BE SPECIFIC.

11. Do you have any active or pending internal investigations or discipline?
12. As a law enforcement officer, have you ever been disciplined? Please include oral and written reprimands, suspensions, and anything that would have been purged from your personnel file.
13. Have you ever taken anything from a place that was already burglarized? Please give dollar amount and list items.
14. Have you ever taken cash, property or valuables from a dead body?
15. Have you ever taken property, cash or valuables from an intoxicated person?
16. Have you ever lied to a police supervisor?
17. Have you ever told a friend, acquaintance or relative about an investigation involving them?
18. Have you ever provided or been paid to provide confidential information to an unauthorized person?
19. Have you ever removed, destroyed, or altered police records or files?
20. Have you ever disclosed the identity of a confidential informant to an unauthorized person?
21. Have you ever disclosed the identity of an undercover law enforcement officer to an unauthorized person?
22. Have you ever lied under oath? EXPLAIN CIRCUMSTANCES.
23. Since becoming a law enforcement officer, have you ever committed a felony crime?

24. Have you ever used your position as a law enforcement officer to take sexual advantage of someone?
25. As a law enforcement officer, have you ever engaged in a sexual act on duty? EXPLAIN EACH INCIDENT.
26. Have you ever been involved in any shooting incident?
27. Have you ever been the subject of a grand jury investigation?
28. Have you ever been the subject of any civil lawsuits, prior or pending?
29. Have you ever been involved in any on-duty motor vehicle accident? Please list each one and include who was at fault.
30. Since becoming a law enforcement officer, have you used any illegal drugs?
31. Have you ever used alcohol or illegal drugs on duty? (other than sanctioned law enforcement operations.)
32. Explain any circumstances or incidents which you have been involved in as a law enforcement officer that could have a negative impact on you employment with the Darke County Sheriff's Office?