



# APPLICATION FOR EMPLOYMENT CHEBOYGAN COUNTY SHERIFF DEPARTMENT



The County of Cheboygan is an equal opportunity employer and shall consider all qualified applicants for the position applied for without regard to race, color, sex, religion, national origin, age, disability or other protected category.

COMPLETE ALL QUESTIONS HONESTLY AND ACCURATELY. FAILURE TO DO SO WILL RESULT IN REJECTION OF YOUR APPLICATION.

COMPLETE APPLICATION IN OWN HAND WRITING

Position applied for: \_\_\_\_\_ Expected annual salary: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Current Address: \_\_\_\_\_  
Street City State Zip Code

E-Mail Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Telephone: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ SS#: \_\_\_\_\_

Are you a relative by birth or marriage to any County of Cheboygan Elected Official or Employee?

Yes: \_\_\_\_\_ No: \_\_\_\_\_ If yes: \_\_\_\_\_  
Name Relationship

Can you provide documents required to prove you are legally able to work in the U.S.? Yes No

Are you under 21 years of age? Yes No

Will you submit to a drug screen? Yes No

Will you submit to a psychological evaluation? Yes No

Do you currently use illegal drugs? Yes No

Have you used illegal drugs in the past? Yes No

Have you ever previously applied with the Sheriff Department? Yes No

If yes when: \_\_\_\_\_ Position: \_\_\_\_\_

Have you ever been convicted of a felony or a misdemeanor or had a PPO against you? Yes No

If yes, completely describe, including location, date and court: \_\_\_\_\_

Are there any felony charges currently pending? Yes No If yes, explain \_\_\_\_\_  
(A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness and nature of violation, and rehabilitation will be considered)

Have you read and signed the Job Qualifications and Job Description? Yes No

Is it your understanding you have the qualifications and can perform the functions listed in the job description with or without reasonable accommodations? Yes No



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**EMPLOYMENT HISTORY CONTINUED**

Employer:	Date Worked: From and To	Work Performed:
Address:	Telephone Number:	
Job Title:	Hourly rate: Start & Final	
Supervisor		
Reason for Leaving:		

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Address:	Telephone Number:	
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