200 EAST WISCONSIN AVE. GREENSBURG, KANSAS 67054 PHONE 620-723-2182 FAX 620-723-3328



SHERIFF **KENDAL D. LOTHMAN**  UNDERSHERIFF **CLAY T. PARKIN** 

- Which Position are you applying for? ( ) Deputy Sheriff ( ) Communications Officer
  - () Detention Officer () Clerical Staff

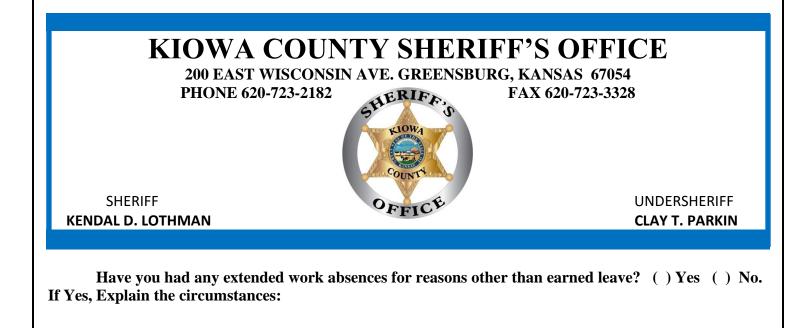
### **Instructions to Applicant**

To receive a permanent position as an employee with this agency, Applicant, at the time of employment, must meet the following criteria in order to qualify for employment.

- Applicant must be at least eighteen years of age to apply for the position of Communications Officer or Detention Officer and at least twenty one years of age to apply for the position of **Deputy Sheriff.**
- Applicant must be a citizen of the United States.
- Applicant must be free of any felony convictions including any felony convictions that have been expunged.
- Applicant should not have any felony behaviors involving the use, production, transportation, or sale of illegal drugs or narcotics.
- If applicant has military experience, discharges must be under honorable conditions.
- Applicant must have a High School diploma or its equivalent. •
- Applicant must currently have or be able to obtain a valid driver's license prior to employment date.
- Applicant may be required to meet certain job related sight and hearing standards required to meet essential job functions.
- As a condition of employment, applicant may be required to pass the following:
  - Physical Agility Test Polygraph
  - Background Investigation
- **Drug screening**
- Psychological Examination
- **Medical Examination**

The completion of this form is a requirement for consideration of employment by this agency.

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	NE 620-723-2182	HERIFF.	FAX 620-723	
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		KIOWA		
		COUNTY		
SHERIFF		C Str	1	UNDERSHERIFF
KENDAL D. LOTHMAN		SFFIC F		CLAY T. PARKIN
	All Statements	s are subiect	to verification.	
Inaccuracies or inc	complete statement	ts may prevent an	onlicant from being	hired by this agency.
maccuracity of my	somplete statement	is may prevent ap	pricarie ir om being	initia by this agency.
	e e	· · · · · · · · · · · · · · · · · · ·		ocial security number is
voluntary. The social secure cords are obtained.	irity number will t	be used for identi	incation purposes to	ensure that proper
I have read and un	derstand the abov	e instructions and	l agree to the terms	and conditions of
completing the application				
Name		Date		
Applicant Signat		Date		
<b>Personal Informati</b>	on:			
Name				
Last	First	Middle		
Address				
Street	City	State	Zip Code	
Date of Birth	S	Social Security Nu	ımber	
Home Phone	(	Cellular Phone		



Have you ever been convicted of a felony or serious misdemeanor including expunged felony or misdemeanor records, or any military jurisdiction in which a crime would be considered a Felony or misdemeanor in the State of Kansas? () Yes () No. If Yes, Explain the circumstances:

Have you ever been fired or pressured to resign an employment position? () Yes () No. If Yes, Explain the circumstances:

Would any problem result if your present employer was contacted during the course of the background investigation? ( ) Yes ( ) No. If Yes, Explain the circumstances:

List any and all skills acquired that may be relevant to the job for which applying for:

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#### **Relatives and References:**

During the course of the background investigation, persons who know you will be asked to comment upon your suitability for the position applied for. Inquires will be confined to job relevant matters. They should have knowledge of your qualifications.

Name	City	State
Phone	Relationship	
Name	City	State
Phone		
Name	City	State
Phone	Relationship	
Name	City	State
Phone		
Name	City	State
Phone		
Name	City	State
Phone		



#### **Education:**

To be certified as a Kansas Law Enforcement Officer, you must have a High School diploma, GED, or its equivalent. Please indicate your current status:

() I possess a High School Diploma

- () I passed the GED test
- () I possess an Associate Degree
- () I possess a Bachelor Degree

() I possess a Post-Graduate Degree Explain\_\_\_\_\_

Please indicate below all the schools you have attended beginning with High School:

Name of School	Location	Dates
Name of School	Location	Dates
Name of School	Location	Dates
ame of School	Location	Dates
Name of School	Location	Dates



#### **Residences:**

List below all the residences in the last ten years, if rented, list the landlords name also:

Street	City	State	Zip code	Dates
Landlord				
Street	City	State	Zip code	Dates
andlord				
Street	City	State	Zip code	Dates
andlord				
Street	City	State	Zip code	Dates
andlord				
Street	City	State	Zip code	Dates
andlord				

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#### **Experience and Employment:**

Beginning with your most current employment:

Dates	Name and Address of Employer	Supervisor
Title or Duties	Reason for Leaving	Rate of Pay
Dates	Name and Address of Employer	Supervisor
Title or Duties	Reason for Leaving	Rate of Pay
Dates	Name and Address of Employer	Supervisor
Title or Duties	Reason for Leaving	Rate of Pay
Dates	Name and Address of Employer	Supervisor
Title or Duties	Reason for Leaving	Rate of Pay



Have your wages ever been garnished? ( ) Yes ( ) No. If Yes, explain the circumstances including when, where, and why.

Have you ever been delinquent on income or other tax payments?( ) Yes ( ) No. If Yes, explain the circumstances including when, where, and why.

Are you or have you ever been involved as a Plaintiff or Defendant in any Civil Court Action? () Yes () No. If Yes, explain the circumstances including when, where, why, including the name and location of court.

#### Legal:

If you have ever been arrested or convicted of any crime, (excluding traffic citations), If so give the following information: \*\*\*\* The fact that your record may have been affected by sealing, expungement, a release, or a pardon, has specific legal implications as to how one should answer this question.\*\*\* Seek legal advice before answering this section.

Date	Police Agency	Circumstances
Date	Police Agency	Circumstances
Date	Police Agency	Circumstance

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#### **Motor Vehicle Operation:**

Since positions with agency require that you drive a motor vehicle, an investigation of your driving history and status must be made. In the space below list any and all other states you had or currently have a driver's license through:

Driver's License Number

Driver's License Number

State

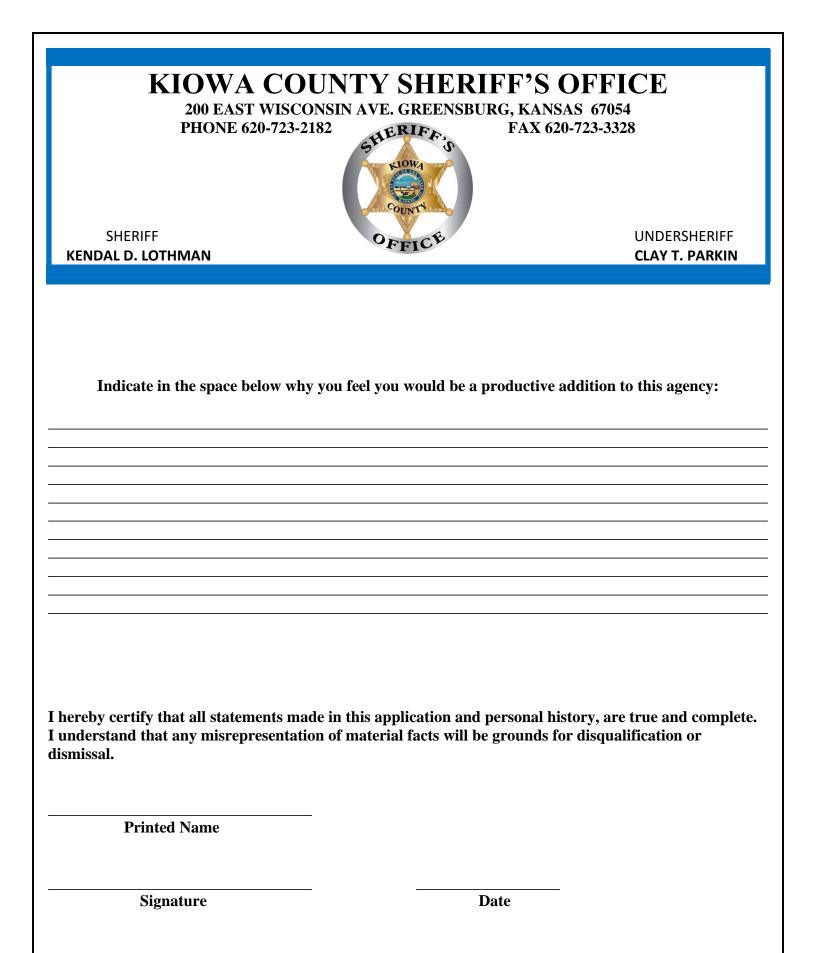
State

Name issued under

Name issued under

List any and all traffic citations you have received in the last five years:

Violation	Location	Date
Violation	Location	Date



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#### CONSENT TO RELEASE INFORMATION

The undersigned, being an applicant for a position with the Kiowa County Sheriff's Office, does here by consent to the release by you, your organization, or others of any and all moral, educational, physical, mental, business, financial, criminal and work performance information pertaining to the undersigned to the Kiowa County Sheriff's Office of the State of Kansas. Furthermore, this release shall include all records of disciplinary actions and / or internal investigations pertaining to past or present employment and employment performance to include performance evaluations. The applicant does further consent that all agencies, businesses, organizations and individuals contacted are herby released from any and all responsibility and / or liability to furnishing said information to the Kiowa County Sheriff's Office of the State of Kansas and the individual acting on behalf of the Kiowa County Sheriff's Office, State of Kansas. The applicant further agrees that a photocopy of this document shall have and carry the same consent purposes as the original document.

This Consent to Release Information shall expire sixty (60) days from the date indicated below.

Date	Signature of Applicant
State of Kansas	) ) SS:
County of Kiowa	)
Subscribed and swor	rn to before me, this day of, 20
Seal	Notary Public
My Commission Exp	pires: