

BLAINE COUNTY SHERIFF'S DEPARTMENT

Hailey, Idaho



Gene D. Ramsey, Sheriff

1650 Aviation Drive
Hailey, Idaho 83333

(208) 788-5536
www.blainesherriff.com

PERSONAL HISTORY QUESTIONNAIRE

To be eligible for employment you must successfully pass a background investigation and meet established standards set by the Blaine County Sheriff's Office and the Idaho Peace Officers Training Academy (POST). The Personal History Questionnaire is required to begin this process. You must complete, sign, notarize and return this form with your Application. Notarization is required on the Personal Inquiry Waiver.

Your answers will be verified through a detailed interview assessment, background investigation, and polygraph examination. Detailed answers to the yes or no questions should only be written on the Comment Page.

It is to your advantage to **BE ABSOLUTELY TRUTHFUL** in answering all questions. Any falsification or omission of information will result in disqualification of your application.

APPLICANT GENERAL INFORMATION

NAME (LAST, FIRST, MIDDLE)		POSITION(S) APPLIED FOR: <input type="checkbox"/> DETENTION <input type="checkbox"/> CENTRAL CONTROL <input type="checkbox"/> PATROL <input type="checkbox"/> OTHER: _____	
MAILING ADDRESS – BOX NO., CITY, STATE, ZIP		SOCIAL SECURITY NO. STATE ISSUED	
PHYSICAL ADDRESS - STREET, CITY, STATE, ZIP		DRIVER'S LICENSE NO. STATE ISSUED	
E-MAIL ADDRESS			
WORK PHONE#	HOME PHONE#	CELL PHONE#	
ARE YOU 21 YEARS OF AGE OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO			
ARE YOU A CITIZEN OF THE UNITED STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO			
DO YOU HAVE A VALID DRIVER'S LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
DO YOU HAVE A HIGH SCHOOL DIPLOMA OR GED <input type="checkbox"/> YES <input type="checkbox"/> NO?			

HIRING STANDARDS AND MINIMUM QUALIFICATIONS

Applicants must:

1. Be a citizen of the United States.
2. Be a high school graduate or have earned a GED certificate.
3. Possess or be able to possess a valid Idaho State driving license.
4. Must meet the following age requirements:
 - a. Commissioned Deputy (Detention or Patrol) 21 years of age
 - b. Central Control: 19 years of age
 - c. Records Clerk or Drivers License Clerk: 18 years of age
5. Have a minimum of 2 years of any combination of responsible work experience, military service, education, or any other productive activity.
6. Not have committed five (5) or more moving traffic offenses within the past 3 years.
7. Not have been convicted of any misdemeanor sex crime, crime of deceit, or drug offense. Any criminal probation must already have been served. General misdemeanor convictions are reviewed on a case-by-case basis however:
 - a. **NO** conviction of any misdemeanor within 2 years of application (includes deferred prosecution and withheld judgments). No current pending misdemeanor case.
 - b. **NO** Civil Protection Orders or No Contact Orders served or issued against the applicant within 2 years of application.
 - c. **NO** D.U.I. convictions in the past 3 years (includes withheld judgments).
 - d. **NO** drivers license suspensions in the past 3 years for violations relating to D.U.I., chemical test refusal or points assessed due to moving traffic violations
 - e. **NO** conviction for willful concealment or petit theft within 5 years of application.
 - f. **NO** convictions for domestic battery, child abuse, stalking or voyeurism.
 - g. **NO** convictions or commission of a felony as an adult; case-by-case review of juvenile felony convictions.
8. Meet the following drug usage policy: **Failure to disclose past drug usage regardless of meeting these standards will automatically disqualify you for employment.**
 - a. **NO** “soft” illegal drug use in the **past 3 years** – marijuana or synthetic variations such as “spice”, psilocybin mushrooms, or illegal use of prescription drugs, etc.
 - b. **NO** “hard” illegal drug use in the **past 5 years** - methamphetamines, LSD, cocaine, heroin, etc.
9. Never received a military dismissal, bad conduct discharge, or dishonorable discharge.
10. Not presently planning to file or undergoing action in bankruptcy court in any state (personal or business). Applicants must wait a period of at least 1 year after a bankruptcy before applying for a position, during which they have demonstrated fiscal responsibility.
11. Applicants must be of good moral character and not have engaged in conduct or a pattern of conduct that would jeopardize public trust in the law enforcement profession.

APPLICANT ACKNOWLEDGEMENT

By my signature below, I acknowledge that I have read and understand the standards listed above, and that written and physical testing, background investigation, oral board interviews, psychological screening, and a polygraph examination may be conducted to verify my compliance with all the standards for the position in which I am applying.

SIGNATURE OF APPLICANT _____ **DATE** _____

(Signature Required)

PERSONAL HISTORY

Instructions: Answer the following questions regardless of whether the incident may have been sealed, expunged, or dismissed. If the answer to any of the questions below is YES, explain your answer in detail on the COMMENT PAGE provided on page 6.

DO NOT WRITE EXPLANATION ON THIS PAGE.

1. As a juvenile or as an adult have you ever committed an offense where you could have been/or were arrested? If yes, give date the offense was committed, what the offense was and disposition of charge on the Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Have you ever petitioned any court to seal or expunge a criminal or juvenile record? If yes, explain details on the Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you been arrested or convicted of a misdemeanor within 2 years of this application? (Includes deferred prosecution and withheld judgment) If yes, explain full details on the Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Have you ever had a Civil Protection Order or No Contact Order served or issued against you? If so, when? Provide full details on the Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Have you ever been involved in or arrested for any crime of unlawful sexual conduct, stalking or employing physical or domestic violence of any kind?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Have you ever been the subject of an investigation dealing with the theft of something not belonging to you? If yes, what was taken, what was the value and when did this occur? Answer on Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Have you ever purchased any item(s) that you knew or suspected was stolen? If yes, list item, quantity, value and date of purchase.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Have you ever had a criminal warrant or a traffic warrant issued for your arrest? If yes, give the date the warrant was issued and date cleared.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Do you reside or associate with anyone (family or friends) who is or has been involved in, charged with or convicted of a misdemeanor or felony? If yes, please list details on Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. Have you ever been placed on probation or parole? If yes, when, and where.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11. Have you ever failed a polygraph examination? If yes, when, where, why, and dates. Answer on Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. Have you ever falsified an insurance claim, income tax return or collected unemployment / welfare benefits that you were not entitled to?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13. Have you ever fraudulently misused a credit card or forged a check?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14. Have you ever or are you currently involved in a civil lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15. Has there ever been any situation in which you have been involved which may be incompatible with the discharge of the duties of a certified officer. This would include any activity which may impair your independence of judgment or action in the performance of the duties of a peace officer. If yes, explain.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16. Has your driver's license ever been suspended, revoked, placed on probation or have you ever received a warning notice from the state who issued your license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17. Have you ever been refused a driver's license by any state? If yes, give the state, date and the circumstances on Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No

18. Have you ever possessed any drugs, narcotics or other controlled substances other than those prescribed by a doctor or other licensed medical practitioner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19. Have you ever illegally purchased, sold or otherwise distributed any drugs, narcotics or other controlled substances? Answer on Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
20. Have you ever been involved in the cultivation of marijuana or the manufacturing of any drugs, narcotics or other controlled substances?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
21. Have you ever knowingly stored or transported illegal drugs, narcotics or other controlled substances for yourself or another person?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
22. Have you ever tried, ingested, experimented or used illegal drugs? This includes as a juvenile or even one (1) experimental use. (Note answering yes to this question does not automatically exclude you from employment. Explain what types, how often and date of last occurrence on Comment Page (pp.6).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
23. Do you drink alcohol? If yes, how much and how frequent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
24. Have you ever had a drug or alcohol related accident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
25. Have you ever been convicted or pled guilty to driving while under the influence of alcohol or drugs, or to lesser charges following a D.U. I. arrest? If yes, list the date of the arrest, the law enforcement agency involved, and the final disposition?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
26. Have you or your spouse: Ever defaulted on any loan, debt or obligation in the past five years? Ever had your wages attached or garnished? Ever had any collection or repossession action taken against you? Ever filed a petition for bankruptcy? When? Ever had a check bounce or returned for insufficient funds? If yes to any, please explain circumstances on the Comment Page.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
27. Have you ever been involved in any domestic violence? If yes, explain on pp.6.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
28. Do you have any issues or problems losing your temper or with anger management?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
29. Do you have any issues or problems with honesty, reliability, integrity or moral character?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
30. Have you ever perjured yourself in a court of law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
31. Have you purposely omitted any information from your employment application?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

<p>HAVE YOU EVER BEEN CHARGED WITH A CRIME?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> FELONY</p> <p>CHARGE(S) _____</p> <p>DATE _____ LOCATION _____</p> <p>IF MORE SPACE IS NEEDED USE COMMENT PAGE</p>	<p>HAVE YOU EVER BEEN CONVICTED OF A CRIME?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> FELONY</p> <p>CHARGE(S) _____</p> <p>DATE _____ LOCATION _____</p> <p>IF MORE SPACE IS NEEDED USE COMMENT PAGE</p>
<p>NOTE: A CONVICTION MAY NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT. THE CIRCUMSTANCES AND FACTS SURROUNDING THE OCCURRENCE(S) AND THE DEGREE OF RELEVANCE TO THE JOB YOU ARE APPLYING FOR WILL BE TAKEN INTO CONSIDERATION.</p>	

EMPLOYMENT HISTORY

**If the answer to any of the questions below is YES,
Explain in detail on the COMMENT PAGE provided on page 6.
DO NOT WRITE EXPLANATION ON THIS PAGE.**

1. Have you ever worked for any law enforcement agency in any capacity? If yes, list agency name, dates, job title and status.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are you currently or have you in the past been POST certified? If yes, list the type of certificate, agency name, state, highest level attained and date awarded.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you ever served in the U.S. Military? If yes, list dates, branch of service, type of discharge and highest rank held.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. If you served in military, were you in a combat or military police position?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Has any supervisor ever reprimanded you for being late or absent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Has any supervisor ever reprimanded you for misconduct or not doing your job properly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Have you ever been terminated during the probationary period from any employment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Have you ever been suspended, fired, or asked to resign from any employment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Have you ever quit a job without giving proper notice?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. Have you ever been rejected for employment for any reason by any law enforcement agency? If yes, list which agency and why on the comment page.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11. Would contacting your current employer during the background investigation present a problem for you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. Are you unable to lift one hundred (100) pounds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

LANDLORD / NEIGHBOR REFERENCES

Please provide **physical addresses and contact information** for at least three (3) landlords or neighbors for where you have lived for at least the last five (5) years. If additional space is needed use the Comment Page (pp. 6)

Mr. ___ Ms. ___ Name _____	Years Known _____
Physical Address _____	Relationship _____
City _____ State _____	Work Phone _____ Home Phone _____
Mr. ___ Ms. ___ Name _____	Years Known _____
Physical Address _____	Relationship _____
City _____ State _____	Work Phone _____ Home Phone _____
Mr. ___ Ms. ___ Name _____	Years Known _____
Physical Address _____	Relationship _____
City _____ State _____	Work Phone _____ Home Phone _____

**PERSONAL INQUIRY WAIVER
BLAINE COUNTY SHERIFF'S OFFICE
AUTHORIZATION TO RELEASE INFORMATION**

NOTE: THIS FORM MUST BE SIGNED AND NOTARIZED

To whom it may concern:

I respectfully request and authorize you to furnish the Blaine County Sheriff's Office with any and all information that you may have concerning me, my employment and education records, my reputation, and my financial and credit status. Please include any and all medical, physical, and mental records, including all information of a confidential or privileged nature, and photocopies of same, if possible. Your cooperation in this reply will be used to assist the sheriff's office in determining my qualification and fitness for the position I am seeking with the Blaine County Sheriff's Office.

I hereby release you, your organization, and others from any liability or damage which may result from furnishing the information requested.

SIGNATURE OF APPLICANT _____ **DATE** _____
(Signature Required)

MILITARY RECORDS RELEASE:

I hereby authorize the release of my military service records (Including Medical, Physical, and mental records and reports) To the Blaine County Sheriff's Office.

SIGNATURE OF APPLICANT _____ **DATE** _____
(Signature Required If Applies)

SUBSCRIBED AND SWORN BEFORE ME ON THE _____ DAY OF _____, 20____

(Seal)

Notary Public for the State of _____
Resides in _____
Notary Expires _____
(NOTARIZATION REQUIRED)

A photocopy of this request shall be for all intent and purposes, as valid as the original. The original is on file at the Blaine County Sheriff's Office

Statement of Understanding

By signing this document, I am acknowledging I have answered the above questions honestly and accurately. I understand and acknowledge that any discovered falsification, omission, or misrepresentation may result in disqualification from the Blaine County Sheriff's Office hiring process.

Print Name _____

Signature _____ **Date** _____

Mail or Deliver the Completed Personal History Form to:

**The Blaine County Sheriff's Office
Attention: Holly Carter
1650 Aviation Drive
Hailey, Idaho 83333
Phone: (208) 788-5536**

**Declaration Regarding Domestic Violence Convictions and
18 USC § 922 and the Ability to Carry Firearms/Ammunition**

Name: _____

Agency: _____

Pursuant to the U.S. Supreme Court's 2009 decision in *U.S. v. Hayes*, any misdemeanor conviction involving the use or attempted use of physical force or threatened use of a deadly weapon on a person in any domestic relationship (including a current or former spouse, cohabitant, parent or child) will disqualify the convicted person from possessing a firearm or ammunition pursuant to 18 U.S.C. § 922(g)(9).

Since there is no law enforcement exemption under the federal law, it is essential that you fully disclose any such conviction regardless of the date. The burden and expense of obtaining legal relief (if any) from such federal restrictions is upon you. You must provide certified proof of such relief if obtained.

Have you ever been convicted of a misdemeanor for any use or attempted use of physical force or threatened use of force against any individual with whom you were in a domestic relationship? (i.e. spouse, ex-spouse, cohabitant, parent or child.)

_____ **NO** _____ **YES** _____ **NOT SURE**

Have you obtained any form of legal relief (e.g. judicial finding of factual innocence) from this conviction? If so, provide a certified copy of the relief.

_____ Yes, Date of Relief _____ Issuing Jurisdiction _____

I hereby certify that I have read this form, and to the best of my knowledge, all of the information provided above is true, correct, and complete. I understand that false, misleading, or fraudulent information intentionally provided herein may be the basis for administrative action including termination from employment as well as criminal punishment pursuant to federal law.

PRINT NAME _____

SIGNATURE _____ **DATE** _____