



# DAVISS COUNTY DETENTION CENTER

An Equal Opportunity Employer

## APPLICATION FOR EMPLOYMENT

It is the policy of the Daviess County Detention Center to provide employment, training, compensation, promotion, and other conditions of employment based on qualifications, without regard to race, color, religion, national origin, sex, age, marital or veteran status, the presence of non job-related disability, or any other legally protected status.

**(Print Only)**

\_\_\_\_\_  
Last Name, First Name MI Date of Application

\_\_\_\_\_  
Name go by Maiden Name

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

\_\_\_\_\_  
Telephone number (s) Social Security No.

\_\_\_\_\_  
Cell phone number (s) E-mail address

\_\_\_\_\_  
How did you find out about job openings within our facility?

### JOB INTERESTS

Type of employment seeking (choose one): \_\_\_\_\_ Full time \_\_\_\_\_ Part time

Position seeking (choose one or more): \_\_\_\_\_ Floor Deputy \_\_\_\_\_ Control Room \_\_\_\_\_ Admin/Clerical

Date available for employment: \_\_\_\_\_

Currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

### EDUCATION AND TRAINING

\_\_\_\_\_  
High School \_\_\_\_\_  
College \_\_\_\_\_  
Graduate School \_\_\_\_\_  
Apprentice, business, technical, military or vocational school \_\_\_\_\_

\_\_\_\_\_  
Other training or skills (factory or office machines operated, special courses, military training, etc.) \_\_\_\_\_

\_\_\_\_\_  
Describe any honors received \_\_\_\_\_

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\_\_\_\_\_  
Describe any honors received \_\_\_\_\_

### OTHER JOB-RELATED ACTIVITIES

List professional, trade, business or civic activities and offices held. May exclude membership which would reveal sex, religion, national origin, age, ancestry, or other protected status. \_\_\_\_\_

### SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience. \_\_\_\_\_

### MILITARY

Have you served in the military? Yes \_\_\_\_\_ No \_\_\_\_\_ Branch of service \_\_\_\_\_

Final rank \_\_\_\_\_ Type of discharge \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT**

\_\_\_\_\_  
Last Name, First MI

**EMPLOYMENT HISTORY**

Start with the present or last job and provide a **complete** job history. It is suggested to submit a resume with the application to provide further details. *Explain any gaps in employment in comments section.*

Employer \_\_\_\_\_ Dates worked: From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Starting salary: \$ \_\_\_\_\_ Per \_\_\_\_\_  
Job title \_\_\_\_\_ Final salary: \$ \_\_\_\_\_ Per \_\_\_\_\_  
Supervisor/Dept. \_\_\_\_\_ Phone number \_\_\_\_\_  
Reason for leaving \_\_\_\_\_ May we contact? Yes \_\_\_\_\_ No \_\_\_\_\_

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Reason for leaving \_\_\_\_\_ May we contact? Yes \_\_\_\_\_ No \_\_\_\_\_

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**APPLICATION FOR EMPLOYMENT**

\_\_\_\_\_  
Last Name, First MI

Comments (please explain any gaps in employment) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Give name, *daytime telephone number* and the best time to contact five people who can provide a personal reference. Do not use relatives or previous employers.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Do you know anyone who works at the Daviess County Detention Center? No \_\_\_\_\_ Yes (list names) \_\_\_\_\_  
\_\_\_\_\_

YES    NO

- |       |       |  |
|-------|-------|--|
| _____ | _____ | 1. Are you 21 years of age or older?   |
| _____ | _____ | 2. Do you have a valid driver's license?   |
| _____ | _____ | 3. Do you have a high school or GED diploma?   |
| _____ | _____ | 4. Do you have a Social Security card?   |
| _____ | _____ | 5. Are you legally eligible for employment in the U.S.?  |
| _____ | _____ | 6. Can you provide documentation verifying your eligibility?   |
| _____ | _____ | 7. Are you able to perform the essential duties and responsibilities of the position for which you are applying with or without accommodation? |
| _____ | _____ | 8. Since the age of 18, have you ever been convicted of a felony?  |
| _____ | _____ | 9. If yes, please give dates, charges and an explanation _____   |

**PREA QUESTIONS 115.17**

YES    NO

- |       |       |  |
|-------|-------|--|
| _____ | _____ | 1. Have you engaged in sexual abuse in any previous employment?  |
| _____ | _____ | 2. Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? |
| _____ | _____ | 3. Have you been civilly or administratively adjudicated to have engaged in the activity listed above?   |
| _____ | _____ | 4. Have you had any incident of sexual harassment?   |
| _____ | _____ | 5. I understand that I have a continuing affirmative duty to disclose any such misconduct.   |

I understand that any false information made by me on this application or any supplement document will be sufficient grounds for immediate discharge if I am employed.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## DAVIESS COUNTY DETENTION CENTER

**APPLICANT'S STATEMENT**

1. I agree to submit to and satisfactory pass a post-offer, pre-employment drug screen by a qualified party of the detention center's choosing, a post-offer physical, to submit to reexamination when required, and to authorize the release of any medical information to the Daviess County Detention Center. I also agree to submit to random drug testing on a mandatory basis.
2. I understand, if accepted for employment, that this application does not constitute an employment contract, expressed or implied. An individual's employment and compensation can be terminated at any time at the option of either the Daviess County Detention Center or the employee.
3. I authorize all persons, schools, current employer, previous employers and organizations named in this application (and accompanying resume, if any) to provide the Daviess County Detention Center with any relevant information that may be required to arrive at an employment decision. I authorize the detention center to conduct an NCIC background check and investigate my driving record, criminal history and any other pertinent information as is necessary to arrive at an employment decision, in accordance with applicable detention center policy, procedure and law. I agree to cooperate in such investigations and release those parties supplying such information to the detention center from all liability or responsibility with respect to information supplied. I authorize the detention center to contact any and all personal and previous employment references I provide. I understand that I must provide a doctor's statement indicating that I am physically fit to perform the duties of a deputy jailer. I understand that all employees are subject to a six-month probationary period. I understand that I must submit a copy of a high school or GED diploma. I agree with the Daviess County Detention Center to accept the provisions of the Workers' Compensation Laws.
4. I agree to abide by the policies, procedures and directives of the employer. I acknowledge that such policies, procedures and directives may be changed, interpreted, withdrawn, or added to by the employer at any time, at the employer's sole option and without any prior notice to me.
5. I understand that any false answers or statements made by me on this application, statement, or any supplement in connection with the above mentioned investigations, will be sufficient grounds for immediate discontinuation of consideration for employment, and immediate discharge, if I am employed.

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Applicant's signature

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Date

*Applications will be kept on file for six months*

DAVIESS COUNTY DETENTION CENTER

**EMPLOYMENT INFORMATION – FULL TIME**

***Pre-Employment  
Conditions***

***All applicants must:***

Be at least 21 years old  
Have valid driver's license  
High school or GED diploma  
Social security card  
Pass drug screen  
Pass physical  
Personal and employment reference checks  
Criminal background check  
Driving record check

***Hazardous Floor Deputy Applicants must also:***

Agree to Taser impact  
Agree to Pepper Spray exposure  
Be able to work all shifts  
Able to pass weapons training

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***Employment  
Benefits / Training***

Health ins. - 85% premium paid by dept  
Dental ins. - Paid by employee at group rate  
Retirement – Hazardous / Non-hazardous available  
Retirement – 401 K Available  
Uniforms provided  
80 hours orientation training  
24 hours annual training  
Field Training Program  
Shift assignment will be subject to facility needs  
\$1.00 shift differential for 2<sup>nd</sup> and 3<sup>rd</sup> shifts

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***Salary***

Hazardous – Floor/ Pod Deputy	\$31,200 yearly / \$15.00 per hour
Non-Hazardous – Admin / Control Room	\$24,960 yearly / \$12.00 per hour

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I have read and understand the information listed on this document.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date