



Mesa County Sheriff's Office
 215 Rice Street
 P.O. Box 20,000
 Grand Junction, CO 81502-5021



MESA COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

Complete every section. If a question does not apply to you, put N/A. If you need additional space to respond to any section, attach a sheet of paper with the written information. You are responsible for obtaining correct and complete addresses.
All information is subject to verification. Any deliberate misstatements, misrepresentation or omissions by you is cause for disqualification for employment consideration.
Applicants may be disqualified from employment consideration if application is not fully completed according to instructions!

PRINT IN INK - DO NOT TYPE

POSITION(S) APPLIED FOR:		DATE:	
NAME: LAST	FIRST	MIDDLE	HOME PHONE:
PRESENT MAILING ADDRESS:		SOCIAL SECURITY NUMBER	U.S. CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO
DATE OF BIRTH:	Colorado Resident? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE AVAILABLE FOR WORK:	ALIAS(ES), NICKNAMES, OTHER NAME CHANGES
Are you able to perform the essential functions of the position for which you have applied? <input type="checkbox"/> YES <input type="checkbox"/> NO	May we contact your present employer concerning your work performance? <input type="checkbox"/> YES <input type="checkbox"/> NO		Have you ever worked for Mesa County before? If so, list positions held and dates of employment in the area provided below.
One or more of the following conditions may be required to work at the Mesa County Sheriff's Office. Your inability to satisfy these work schedules may limit further consideration of your application. Please indicate whether you are able to perform:	a) Shift Work? (Other than 8 a.m. to 5 p.m., e.g.) <input type="checkbox"/> YES <input type="checkbox"/> NO b) Overtime Work or Holidays? <input type="checkbox"/> YES <input type="checkbox"/> NO c) Rotational Work Schedule? <input type="checkbox"/> YES <input type="checkbox"/> NO d) A Work Schedule that includes Saturday and/or Sunday? <input type="checkbox"/> YES <input type="checkbox"/> NO		Minimum Salary Acceptable: \$ _____ per _____

Space for detailed Answers: _____

Referred By: _____

The information requested henceforth is used for determining your qualifications and suitability for a position with this agency.

RESIDENCES

List all residences in the **last ten (10) years**, beginning with your present address.

From: Mo/Yr	Street address:		If rental, Landlord Name:
To: Present	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:
From: Mo/Yr	Street Address:		If rental, Landlord Name:
To: Mo/Yr	City/State/Zip	County	Landlord Address/Phone Number:

WORK EXPERIENCE

Begin with your most recent job and list your work history through the **last ten (10) years**; including part-time, temporary, or seasonal employment, and any military service. Identify part time jobs with "PT", temporary jobs with "TEMP", and describe any gaps in employment.

If work history does not extend through ten years, clearly identify first employer as "FIRST JOB" in applicable Employer Name field. If applicable, clarify any breaks in employment due to school, unemployment, etc.

From Mo/Yr	Name of Present Employer	Job Title	Name of Supervisor
To Mo/Yr Present	Employer Address, City, State, Zip	Description of your duties:	
Salary	Employer Telephone Number	Why would you leave?	
Were you ever discharged, asked to resign, furloughed, or put on inactive status for cause, or subjected to disciplinary action while with this organization? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please state circumstances: _____ _____			
Did you resign (quit) after being informed your employer intended to discharge (fire) you for any reason? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:			
From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address, City, State, Zip	Description of your duties:	
Salary	Employer Telephone Number	Why did you leave?	
Were you ever discharged, asked to resign, furloughed, or put on inactive status for cause, or subjected to disciplinary action while with this organization? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please state circumstances: _____ _____			
Did you resign (quit) after being informed your employer intended to discharge (fire) you for any reason? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:			
From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address, City, State, Zip	Description of your duties:	
Salary	Employer Telephone Number	Why did you leave?	
Were you ever discharged, asked to resign, furloughed, or put on inactive status for cause, or subjected to disciplinary action while with this organization? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please state circumstances: _____ _____			
Did you resign (quit) after being informed your employer intended to discharge (fire) you for any reason? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:			

WORK EXPERIENCE – CONTINUED

From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address, City, State, Zip	Description of your duties:	
Salary	Employer Telephone Number	Why did you leave?	
<p>Were you ever discharged, asked to resign, furloughed, or put on inactive status for cause, or subjected to disciplinary action while with this organization? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please state circumstances: _____</p> <p>_____</p> <p>Did you resign (quit) after being informed your employer intended to discharge (fire) you for any reason? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:</p>			
From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address, City, State, Zip	Description of your duties:	
Salary	Employer Telephone Number	Why did you leave?	
<p>Were you ever discharged, asked to resign, furloughed, or put on inactive status for cause, or subjected to disciplinary action while with this organization? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please state circumstances: _____</p> <p>_____</p> <p>Did you resign (quit) after being informed your employer intended to discharge (fire) you for any reason? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:</p>			
From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address, City, State, Zip	Description of your duties:	
Salary	Employer Telephone Number	Why did you leave?	
<p>Were you ever discharged, asked to resign, furloughed, or put on inactive status for cause, or subjected to disciplinary action while with this organization? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please state circumstances: _____</p> <p>_____</p> <p>Did you resign (quit) after being informed your employer intended to discharge (fire) you for any reason? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:</p>			

EDUCATION/SKILLS

Circle highest school grade completed: 9 10 11 12 13 14 15 16 17 18 19 20

List all high schools attended. (If GED, give number, location, and date.)
If considered for employment, a copy of diploma or GED will be required.

Name of School	Complete Address	Dates Attended		Graduated	
		From	To	No	Yes

Higher Education: List information below and attach transcript for all colleges or universities attended.

Name and Location of College or University	Dates Attended		Credit Hours	Major	Type of Degree	Year Received
	From	To				

Special Qualifications: List relevant skills, training, college courses, and special schools (trade, vocational, business, or military).

Typing Speed _____ wpm

Yes	No		Yes	No	
		10 Key Calculator			CCIC/NCIC Computer Operator
		Personal Computer			Accounting
		Microfilming/Microfiche			Computer Programming
		Word Processing			Other

Are you a State Certified Peace Officer in Colorado? No Yes Certificate Number _____ Date issued _____

Are you a State Certified Peace Officer in any other state? No Yes State _____ Number _____ Date _____

Are you Certifiable? No Yes Name of Academy _____ Date completed _____

Foreign Language: List foreign languages and your level of ability for each by placing an "X" in the proper column.

Language	Reading			Speaking			Understanding			Writing		
	Exc	Good	Fair	Exc	Good	Fair	Exc	Good	Fair	Exc	Good	Fair

MILITARY STATUS

Although not required, please attach a DD214 official copy, if available.

Have you served in the U.S. Armed Forces? No Yes Grade upon discharge

Are you a member of U.S. Reserve? No Yes If yes, complete the following:

Grade and Service Number		Service and Component		
Organization and Station, or Unit and Location		Active	Inactive	Standby

Indicate Reserve obligation, if any:

VOLUNTEER SERVICE

List all volunteer or reserve service.

From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address/State/Zip	Employer Telephone Number	

Briefly describe your duties:

Were you ever discharged, asked to resign, or subjected to disciplinary action while with this organization? No Yes
If yes, please state circumstances:

From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address/State/Zip	Employer Telephone Number	

Briefly describe your duties:

Were you ever discharged, asked to resign, or subjected to disciplinary action while with this organization? No Yes
If yes, please state circumstances:

From Mo/Yr	Name of Employer	Job Title	Name of Supervisor
To Mo/Yr	Employer Address/State/Zip	Employer Telephone Number	

Briefly describe your duties:

Were you ever discharged, asked to resign, or subjected to disciplinary action while with this organization? No Yes
If yes, please state circumstances:

VEHICLE OPERATOR'S LICENSE INFORMATION

Give the following information concerning your vehicle operator's license(s) (Driver's, Chauffeur's, Etc.)

Type	State of Issue	Expiration Date	License Number

Have you ever been denied issuance of a license or have you ever had a license suspended or revoked? No Yes If yes, explain fully: _____

Describe in brief any traffic accidents in which you were involved, giving approximate dates and locations:

Date of Accident (approx)	Location (City/State, etc)	Briefly describe accident

TRAFFIC AND CRIMINAL OFFENSE INFORMATION

Complete the following for each occurrence that you received a summons or ticket, that you were arrested, and/or detained by the police. Include all traffic citations and offenses, criminal offenses, and all military disciplinary actions regardless of formality and punishment. List occurrences as an adult and as a juvenile.

Date	Police/Military Agency	Location (City/State)
Offense/Charge		Disposition
Date	Police/Military Agency	Location (City/State)
Offense/Charge		Disposition
Date	Police/Military Agency	Location (City/State)
Offense/Charge		Disposition
Date	Police/Military Agency	Location (City/State)
Offense/Charge		Disposition

REFERENCES

List three persons who know you well enough to provide current and past information about you. **Do not list relatives or former employers.**

1. Name:	Years Known:
Complete Address: City, State, Zip	Home Phone:
Business Address:	Business Phone:

2. Name:	Years Known:
Complete Address: City, State, Zip	Home Phone:
Business Address:	Business Phone:

3. Name:	Years Known:
Complete Address: City, State, Zip	Home Phone:
Business Address:	Business Phone:

List any friends, relatives, or acquaintances employed by Mesa County Sheriff's Office and their relationship to you.

Do you have an active application on file with any other police agency? Yes No If yes, please list.

Date of Application	Agency	Address	Status, if known

Have you ever been denied employment by any other police agency? Yes No If yes, list agency and reason.

MESA COUNTY SHERIFF'S DEPARTMENT (MCSO)
P.O. Box 20,000
Grand Junction, Colorado 81502-5016

The Mesa County Sheriff's Office is responsible for law enforcement services covering an area of over 3,000 square miles. Most job opportunities fall within two basic career fields: patrol and jail operations. Periodically, openings may occur for the following positions: Administrative Specialist, Booking Technician, Service Technician, or other various administrative positions. Many of our openings are also filled internally with other Mesa County or Sheriff's Office employees.

BASIC REQUIREMENTS

Minimum Age Requirements: Applicants must be 21 years of age for commissioned positions and 18 years of age for all other civilian positions outside the Jail Facility.

Education and Experience: MCSO job opportunities require a minimum of a high school diploma or GED. Additional courses in law enforcement helpful and a B.S./B.A. or higher is desirable, or any combination of education, training and experience. Experience not required. Some administrative and supervisory positions may require any number of years of experience and a 2 to 4 year degree in a related field.

Certification: Police Officer Standards Training (P.O.S.T.) Certification is mandatory for Patrol Deputies and is desirable for Jail Deputies, Service Technicians, and some administration and/or supervisory positions.

Citizenship: Must be a United States citizen, or, in the case of some administrative positions, legally able to work in the United States; must be able to communicate effectively in written and spoken English. Bilingual skills helpful.

Operator's License: Applicants applying for positions with the Sheriff's Department must possess a valid Colorado driver's license within thirty days from date of hire, maintain a responsible driving record and be adequately insured. **NOTE:** Applicants with twelve (12) points or more of traffic violations within the last three (3) years and/or one (1) DUI or drug related driving conviction in the past three (3) years, will be disqualified from further consideration. (Applies to ESSENTIAL driving positions, e.g., Patrol Deputy Sheriff, Jail Deputy Sheriff, Service Technician, Investigator etc.). Requirements for MARGINAL driving positions are less than twelve (12) points of traffic violations within the last two (2) years and/or one (1) alcohol or drug related driving convictions within the last year.

Residency Requirements: Employees of the Mesa County Sheriff's Office are considered Public Safety employees and are required to live within the County of Mesa.

APPLICATION PROCESS

Initial Screening: All applications will be reviewed for completeness, neatness, and relevant education and/or experience relating to the position.

Testing Process: Depending on the position being considered for, a variety of tests may be administered. These tests generally will include the Adult Basic Learning Examination (ABLE) incorporating reading comprehension, mathematics, spelling, vocabulary, and writing skills; law enforcement knowledge; physical ability test, etc. Applicants will be notified of specific modules, scoring methods, and pass/fail requirements.

Oral Boards: Based on results from all tests completed, successful applicants will be asked to participate in an oral board interview. Board members usually consist of peers, supervisors and other staff members from appropriate division(s).

Background Investigation: Generally the most lengthy portion of the application/pre-employment process, lasting anywhere around four (4) to eight (8) weeks, at minimum. All inquiries are thorough and an attempt will be made to verify everything possible about you and your character. The information you provide to us through your employment application and interviews will be supporting data to conduct this investigation. **NOTE:** A felony conviction will disqualify an applicant from further consideration.

The remaining processes generally include an integrity interview, polygraph examination, psychological exam and interview, and a medical exam. These are used to assess your suitability for a law enforcement career, as well as your physical ability to perform the essential job functions of the position for which you are applying. A "conditional job offer" is made to successful applicants prior to taking a polygraph, psychological, and medical exam, with the intent of providing a position to those who successfully complete the process, pending a vacancy. All conditional and final job offers are made solely by the department's Human Resources Analyst. You should understand, however, **that applicants must be able to perform the essential job functions, with or without accommodation. Some physical limitations may disqualify applicants.** Mesa County Sheriff's Department will comply with the Americans with Disabilities Act and Equal Employment regulations.

PERSONAL INFORMATION QUESTIONNAIRE

Completion of this form is voluntary.
The following information is for government record keeping and reporting purposes.

This form is CONFIDENTIAL and will NOT be included with your application and will have NO bearing upon the process of considering you for employment.

Today's Date: _____

Name: _____

Social Security Number: _____ Birthdate (Month/Day/Year): _____

Job Applying For: _____

GENDER:

- Female
 Male

RACE:

- White - origins in Europe, North Africa or Middle East
 Asian - origins in Far East, Southeast Asia, India or Pacific Islands
 Black - origins in Africa
 Hispanic - origins in Mexico, Puerto Rico, Cuba, Central or South America
 American Indian - origins in North America, to include Alaska
 Other

PHYSICAL CONDITION:

- Not Disabled
 Disabled

VETERAN/U.S. MILITARY STATUS:

- Non-Veteran
 Veteran

ACTIVE NATIONAL GUARD OR RESERVIST:

- Yes
 No

Information on this page will NOT be kept in your applicant file.

Mesa County HR/Personnel
PO Box 20,000
Grand Junction, CO 81502-5021

Please complete your
name and mailing address:



Notice of Job Application Received

**Thank you for your interest in employment with Mesa County.
Your application has been received and will be reviewed. We
will contact you ONLY if you are among the candidates
selected for an interview and/or testing.**

**Mesa County Human Resources/Personnel Dept
PO Box 20,000
Grand Junction, CO 81502-5021**