

#### **Mission Statement**

"The goal of the St. Bernard Parish Sheriff's Office is to become the finest law enforcement organization in the State of Louisiana. To accomplish this goal, we must be selective in hiring, diligent in training, and thoughtful in supervision."

The St. Bernard Parish Sheriff's Office requires that you complete this form completely and accurately. Among other things, this application is used to fulfill our obligations to the citizens of St. Bernard Parish by selecting only those individuals who meet the legal qualifications for the job for which they are applying. All of the information you provide will be verified. Deliberate misstatements or omissions will disqualify the applicant. Remember, it is your responsibility to ensure the accuracy of the application.

Part of the application process includes an oral interview, getting fingerprinted, completing a background check, successful completion of a polygraph examination and some positions require a typing and spelling test and/or physical agility test. (See page 2 for requirements)

In order to be considered for employment, certain requirements must be met. To be hired, applicants must be at least 21 years old, have a high school or equivalent diploma, and must reside in St. Bernard Parish. Other factors which influence the employment process are previous work experience, previous law enforcement experience, educational background, driving record, no history of felony convictions and a responsible credit history.

Upon completion of the application, <u>YOU</u> MUST MAKE A COPY of the following documents:

- 1. Birth Certificate or Naturalization Certificate for naturalized citizens.
- 2. High school diploma or transcripts or G.E.D.
- 3. College diploma and transcripts plus any other educational certificates.
- 4. Form DD-214 for each period of military service and discharge certificate.
- 5. Valid driver's license or identification card with proper address.
- 6. Social Security Card

For high school diplomas and transcripts, Louisiana graduates may contact the Louisiana Department of Education at 1-877-453-2721 or at <u>www.doe.state.la.us</u>.

#### You are responsible for making copies

You should bring the application, in person, and all pertinent copies to the 2<sup>nd</sup> floor of the Sheriff's Office at #2 Courthouse Square, Chalmette, Louisiana 70043. There is no place to make copies, so **be sure you have made** <u>all copies before returning</u>.

Thank you for your interest in employment with the St. Bernard Parish Sheriff's Office.

James Pohlmann Sheriff

Age	Sit-ups	Push-ups	Sit and Reach (Straight Leg)	1.5 Mile Run
20-29	40	33	17 ½ in.	11:58
30-39	36	27	16 ½ in.	12:25
40-49	31	21	15 ¼ in.	13:05
50-59	26	15	14 ½ in.	14:33
60 +	20	15	13 ½ in.	16:19

Cooper Standards Physical Agility Test (Females)

Age	Sit-ups	Push-ups	Sit and Reach	1.5 Mile Run
20-29	35	18	20 in.	14:15
30-39	27	14	19 in.	15:14
40-49	22	11	18 in.	16:13
50-59	17		17 ¾ in.	18:05
60 +	8		16 3/8 in.	20:08

You must bring the following when you report for the physical agility test:

1. Photo I.D.

2. Appropriate running attire (i.e., T-shirt, shorts or sweats, white socks, running shoes)

Appropriate ru
Bottled water

4. Towel

Some positions do not require the above test(s).

Communications Division Requirements:

Must be able to type at least 35 wpm and achieve at least 80 percent on a spelling test.

	ST. BERNARD PARISH SHERIF P O. Box 168 CHALMETTE, LOUISIA APPLICATION FOR EMPLC	NA	
This	application will be kept on file for T		
DATE: NOTE: All applicants shall mee 1. Have attained the ag 2. Have graduated from	et the following qualifications: ge of 21, and reside in St. Bernard n an accredited high school, or pos ate of Louisiana, and complete nec	Parish. sess a high school equ	
POSITION APPLYING FOR: Patrol Deput Correctional Dispatcher	-	□ Other 	
	INSTRUCTIONS		
Application must be printed legib will not be considered.	ly in ink. All questions must be and	swered. Applications w	hich are not complete
	PERSONAL HISTOR	Y	
1. Full Name:			
Last Name	First Name	Ν	Aiddle Name
2. Other: List all other nam	es you have used: (Maiden, forme	er name(s), alias(s) Nick	knames (s))
3. Mother's Maiden Name			
4. Social Security #	Driver's Lic. #	/State	/Class
5. Residential Address Number	r/Street City	State	Zip Code
Number 6. Mailing Address			
Number 6. Mailing Address Number	- 	State	Zip Code
Number 6. Mailing Address Number 7. User name(s)/Name(s) used f	r/Street City	State yspace, etc.)	Zip Code
6. Mailing Address	r/Street City for social media sites (facebook, m	State yspace, etc.)	Zip Code

BACKGR	ound in	FORMAT	ION		
1. Date and Place of Birth					
Date City		Stat	(e	Country (If n	ot the U.S.A)
2. Are you a United States citizen?					
If naturalized, please provide: Date			F	Place	
Court			Natur	ralization #	
3. Marital Status 🔲 Married 🗔 Divorced [	🗌 Separa	ted 🔲 Wi	idowed 🔲	Never Marrie	d
4. Height Weight Eye	4. Height Weight Eye Color Hair Color Blood Type				
5. Spouse's name					
6. Former Spouse (s) name					
EDUC	ATION/TI				
		AINING			
1.	1				
High School		Attended	Years	Did You	Type of
Name/Address	IVI	o./Yr	Completed	Graduate	? Diploma
	From	То			
Attach copy of diploma 2.					
College/University	Dates A		Credit	Did You	Type of
Name/Address	Mo.	/Yr	Hours Earned	Graduate?	Degree
	From	То			
Attach copy of diploma					
	5				

3.								
Other Sch	Other Schools (Trade, Vocational, etc) Dates Attended Name/Address Mo./Yr		Credit Hours Earned	Did You Graduate?	Type of Degree			
	From To							
4. Social, frate	rnal and civic organiz	zations of whi	ch I am a m	ember (opt	tional)			
		FIN	ANCIAL / I	EGAL				
	1991 1991 1991 1992 1993 1993 1993 1993	na koo koo na koo koo na koo koo koo koo koo koo koo koo koo	8 100 100 100 100 100 100 100 100 100 10	ora nora men tona tona men nora nora nora inan dora	1992 ISB 2002 ISB 2002 ISB 2002 ISB 2002 ISB 2009 ISB 2009 ISB		2 100 MM 200 MM	
4 4	- Local Sector - 1915 19	o 5						
1. Are you invo	olved in any litigation	? P	lease explai	n:				
				DL				
2. Are there a	ny outstanding judgm	ents against	you?	Pie	ase explain	·		
3. I have had	number of ac	counts charg	ed off due to	o non-paym	nent. Detail	S		
	<u> </u>		<b>D</b>					
4. I 🗀 have	e 🔲 have not decla	red bankrupt	cy. Details					
		F	RESIDEN	CES				
		ood and goes ood and goes goes goes goes goes goes goes go	n bes oon mit oos oon mit oos oon oon oon oon oon oon	991 991 991 991 991 991 991 993 993 991 991	Den den seit den seit den den seit den den den sei		n oon die oon oon die oon oon die oon die oon die oon oon	
						1		
Dates Mo./Yr.	Apt No.	Street Add	Irooo	City		Parish	State	
	Αρι Νο.	Street Add	liess	Спу		Pansn	State	
From To								
			6					
			0					

## EMPLOYMENT RECORD

Employed From:	e must be accounted for. If unemploy Employer's Name	······································	Job Title
Employed To:	Description of Duties		Supervisor's Name
Employer's Address		City, State, Zip	Telephone Number
Reason for Leaving			
Employed From:	Employer's Name		Job Title
Employed To:	Description of Duties		Supervisor's Name
Employer's Address		City, State, Zip	Telephone Number
Reason for Leaving			
Employed From:	Employer's Name		Job Title
Employed To:	Description of Duties		Supervisor's Name
Employer's Address		City, State, Zip	Telephone Number
Reason for Leaving			
Employed From:	Employer's Name		Job Title
Employed To:	Description of Duties		Supervisor's Name
Employer's Address		City, State, Zip	Telephone Number
Reason for Leaving			
	en dismissed or asked to resign or on held? If yes, please e		
	igned or left by mutual agreement		
rtormance?	If yes, please explain:		

# LAW ENFORCEMENT EXPERIENCE AND TRAINING

1. 		Position		Employ	mont Datas
Agency		FOSILION		From	ment Dates To
					_
2. Date of P.O.S.T. Certification	۱	(At	tach Certificate)		
3. Has your P.O.S.T. Certification	on ever been re	evoked, suspended	or relinquished o	or subject to di	scipline?
If yes, please explain:					
4. Other Significant Training an	d Dates				
	_				
	F	REFERENCES			
1 List three reputable stimes	he heve been	علا محشيك المبد بيميد		O NOT list and	otivoo or formor
1. List three reputable citizens w employers.	no nave knowr	i you well during the	e last 5 years. D	<b>UNUT</b> list rei	atives or former
Name	Address		Business		Telephone
2. Relatives are listed below (O			Address	ſ	Employer
Relation	Name		Address		Employer
Father					
Mothor					
Mother					
Brother					
Brother					
Sister					
Sister					
Child					
Child					
		8			
		0			

# DRIVING HISTORY

1.					
Traffic C	itation or Ac	ccident / Date			Disposition
	_	CRIM	IINAL HISTORY		
	n gant bina pana pana ana kana pana ana kana pana ana ana ana			na maa inaa maa kana kasa kana kasa kana kana kana ka	
1. Arrest a	nd/or Crimin	al Summons and/or Expunge	ements /	Date	Disposition
_	_	MILI	TARY SERVICE		
	······································	1			
	Yes	] No			
1.	1	1			
From	То	Branch	Draft Class (If draft class is 1-Y,	Rank at time Discharge	21
			state reason)	Bioonarg	Bioonargo
By my signs	tura an thia an	plication, I grant my permission to th	o Chariff of Ct. Darmard, or bia a	locianos, to inton	view my propert or prior
employers,	to make inquirie	es into my criminal history, driving hi	story and credit history, and/or	make whatever in	quiries deemed necessary to
qualifying a	nd or evaluating	ncy(s), etc. in order to verify and or t g my ability to satisfactorily function	in the capacity of a Deputy Shei	riff for the St. Berr	nard Parish Sheriff's Office. By
		eclare and attest that the informatior d that any misrepresentations herein			
application.		nless from any criminal or civil liabilit			
	ound checks.				
Signature/D	ate				
Signature/D	4.0				
			9		

## ST. BERNARD PARISH SHERIFF'S OFFICE

### AUTHORIZATION TO RELEASE INFORMATION AND WAIVER

I voluntarily and knowingly authorize any employee, person, firm, corporation, school, government agency, its officers, employees and agents, to release any and all information concerning my former employment to any prospective employer, its officers, employees and agents, or other person or entity making a written or oral request for such information. I understand that the information disclosed may include but not necessarily be limited to:

- 1. Employment history, including performance evaluations, job descriptions, disciplinary reports, and any other documents contained in my personnel files, including documents that may have been sealed.
- 2. Opinions (whether verbal or written) regarding my suitability for employment possessed by my former employer.
- 3. Educational or scholastic records.
- 4. Financial records and credit information and reports.
- 5. Records maintained by any law enforcement agency, including but not limited to, police reports and other records of arrest, conviction, ordinance violations, juvenile records, or those relating to traffic violations.

I understand that this information is to be used to assist the St. Bernard Parish Sheriff's Office in determining my qualifications and fitness for the position I am seeking with the St. Bernard Parish Sheriff's Office. I authorize the St. Bernard Parish Sheriff's Office to obtain any information falling with the categories listed above, including any information which may be considered confidential or privileged, and authorize the St. Bernard Parish Sheriff's Office in determining my office to photocopy that information if so desired.

I voluntary and knowingly fully release and discharge, absolve, indemnify and hold harmless the St. Bernard Parish Sheriff's Office as well as any former employer, person, firm, corporation, school or government agency, its officers, employees and agents, from any and all claims, liability, demands, causes of action, damages or costs (including attorney fees), present or future, whether known or unknown, anticipated, arising from or incident to the disclosure of any facts concerning my employment and other information described above in numbers 1-5.

I further waive and release any claim whatsoever I might have for any injury occurring while competing in any portion of the examination.

Applicant's name (please print)

Applicant's signature

Date Signed:

Use the following checklist to aid in the final proof of the application. The final instructions list the location where the completed application should be submitted.

	CHECKLIST	YES	NO
1.	Have you filled in <b>ALL</b> applicable blanks?		
2.	Did you check for spelling errors?		
3.	Did you list correct names, <b>complete</b> addresses, and phone numbers for references, past and present employers?		
4.	Did you sign the application?		
5.	Did you sign the "Authorization to Release Information and Waiver"? (Page 10)		
6.	Copies of Birth Cert., SS Card, etc. (see pg 2)		

If the answer to the above questions are "Yes" you have completed your St. Bernard Parish Sheriff's Office Application for Employment. Prior to submitting your application, you may attach a resume or any certificates of achievement that you feel may assist us in your applications review.

All applications must be turned in directly to the 2<sup>nd</sup> floor of the St. Bernard Parish Sheriff's Office Annex located at #2 Courthouse Square, Chalmette, Louisiana, between the hours of 9:00 a.m. – 3:00 p.m., Monday – Friday, excluding holidays.

I look forward to receiving your application, and again, thank you for your interest in becoming an employee of the St. Bernard Parish Sheriff's Office.

James J. Pohlmann Sheriff