

Office of the Sheriff
Labette County
718 5th Street
Oswego, KS 67356



Darren R. Eichinger
Sheriff
Clifford W. Davis
Undersheriff

LABETTE COUNTY SHERIFF'S OFFICE

APPLICATION FOR EMPLOYMENT

Position applying for:

Sheriff's Deputy
Corrections Officer
Civilian Support Staff

For Office Use:

Date Received: _____

Interview (Y/N): _____

Interview Date: _____

Labette County Sheriff's Office

Personal History Statement

IMPORTANT INSTRUCTIONS

It is Labette County's policy to investigate the criminal history record and driving record history on final candidates for all County positions (including contract and volunteer positions). This release form will not be considered part of your volunteer/employment application and will be filed separately.

The information that you provide in this questionnaire will be used in determining your suitability for a position with Labette County Sheriff's Office. As you complete this form, please keep the following in mind:

- All statements are subject to verification and any negative information will be evaluated fairly. Applicants will be disqualified for intentionally altering/misrepresenting the facts or omitting an incident that would not have otherwise disqualified them.
- Provide complete and accurate information. If you omit or try to conceal any pertinent information you will be disqualified. If you are unsure if something is pertinent, include it in the appropriate section of this document.
- Account for all periods in your background. You will be asked to provide a work history, and you are required to account for all time periods in-between jobs.
- List all arrest and convictions even if you received a pardon or had your record expunged. Again, if you are unsure if something is pertinent, include it in the appropriate section of this document. A felony conviction is an automatic disqualification. A felony arrest, misdemeanor arrest, misdemeanor conviction is not, in and of itself, an absolute bar to employment, and other factors will be taken into consideration when making a final hiring decision.
- Be sure to provide complete and legible information about items requested. Your Personal History Statement will be evaluated for completeness and legibility. In instances where information requested is incomplete or illegible, applicants may be disqualified. This document will only be accepted in its original form.
- Digital signatures will not be accepted. All signature must be a 'wet' original signature, and notarized if applicable.
- This document will be strictly confidential, and it is the exclusive property of the Labette County Sheriff's Office. By signing this document, you acknowledge that you will not receive and are not entitled to know the contents of the confidential reports received. You further understand that these reports are privileged.
- Any information, derogatory or otherwise, may be shared with other law enforcement agencies conducting background investigations.

Labette County Sheriff's Office

Personal History Statement

Understanding and Acknowledgement

WHEN SUBMITTING YOUR COMPLETED PACKET, YOU MUST INCLUDE THE REQUIRED COPIES OF THE FOLLOWING DOCUMENTS.

- Social Security Card
- Valid Driver's License
- High School Transcripts, Diploma or GED
- Certified College Transcripts
- Military Discharge; DD214 (Must show type of discharge)

I certify that I have read the above information and understand that I am required to provide accurate and complete information. Furthermore, I understand that providing false or misleading information could result in my disqualification from the hiring process, or termination from employment and can be reported to the Kansas Commission on Peace Officers' Standards and Training.

I hereby authorize Labette County to conduct a criminal record investigation and driving record investigation using the information I have provided. I release Labette County, its officers, employees, successors and assigns from any liability that may result from the conduct of such investigation, in order to facilitate such an investigation. I am willing to provide the necessary information.

Signature: _____

Date: _____

Full Name:

LABETTE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

Labette County Sheriff's Office

Personal History Statement

Personal information

<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>
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Other names used: (including maiden)

<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>

Contact information:

<i>Home Phone</i>	<i>Cell Phone</i>	<i>Business Phone</i>
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Identifying information:

<i>Date of Birth</i>	<i>Social Security Number</i>	<i>Driver's License Number / State</i>
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Have you held ever had a driver's license in another state? If yes, provide that information.

<i>Driver's License Number / State</i>	<i>Driver's License Number / State</i>	<i>Driver's License Number / State</i>
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List all emails, social media accounts, websites, or other electronic platforms you maintain. If list and not used, place 'N/A'; if used and not listed, use the space provided to provide the information.

<i>Social Media:</i>	<i>Handle:</i>	<i>Source:</i>	<i>Email address:</i>
Facebook		Gmail	
Instagram		Yahoo	
Twitter		Outlook	
LinkedIn		icloud	
TikToc		AOL	
Handshake			
BeReal			
SnapChat			
		<i>Websites (provide full url):</i>	

Labette County Sheriff's Office

Personal History Statement

Personal Address History

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Dates lived there: Month/Year</i>	<i>Provide name of neighbor</i>	<i>Neighbor contact information</i>	
to			

Labette County Sheriff's Office

Personal History Statement

Experience and Employment

Beginning with your most current employment, regardless of length, list every self-employment, part-time jobs, full-time jobs, temporary work, volunteer work, and internships, including military service. If you have periods of unemployment, list those periods in sequential order. If you run out of space, use the general information page to list additional employers.

Objections to Contact:

Do you object to our contacting your present and past employer(s) prior to you being employed?
If you have any objections, you must explain in detail as to why:

Employment History:

<i>Date of Employment:</i> From To Month/Year Month/Year to	<i>Name of Employer</i>	<i>Work Phone</i>	<i>Salary / Wage</i>
	<i>Address: (Street, City, State, Zip Code)</i>		
<i>Employment Length:</i>	<i>Work Schedule (Days, Nights, 9-5 etc..)</i>		
<i>Present Employer: (Y / N)</i>	<i>Job Title/Position:</i>	<i>Reason for leaving:</i>	
<i>Describe your current duties:</i>		<i>Type of Employment</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal / Temp <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer / Intern	
<i>Supervisors Name:</i>	<i>Supervisor Phone:</i>	<i>Co-Worker Name:</i>	<i>Co-Worker Phone:</i>

<i>Date of Employment:</i> From To Month/Year Month/Year to	<i>Name of Employer</i>	<i>Work Phone</i>	<i>Salary / Wage</i>
	<i>Address: (Street, City, State, Zip Code)</i>		
<i>Employment Length:</i>	<i>Work Schedule (Days, Nights, 9-5 etc..)</i>		
<i>Present Employer: (Y / N)</i>	<i>Job Title/Position:</i>	<i>Reason for leaving:</i>	
<i>Describe your current duties:</i>		<i>Type of Employment</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal / Temp <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer / Intern	
<i>Supervisors Name:</i>	<i>Supervisor Phone:</i>	<i>Co-Worker Name:</i>	<i>Co-Worker Phone:</i>

Labette County Sheriff's Office

Personal History Statement

<i>Date of Employment:</i> <i>From To</i> <i>Month/Year Month/Year</i> to	<i>Name of Employer</i>	<i>Work Phone</i>	<i>Salary / Wage</i>
	<i>Address: (Street, City, State, Zip Code)</i>		
<i>Employment Length:</i>	<i>Work Schedule (Days, Nights, 9-5 etc..)</i>		
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	<i>Address: (Street, City, State, Zip Code)</i>		
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	<i>Address: (Street, City, State, Zip Code)</i>		
<i>Employment Length:</i>	<i>Work Schedule (Days, Nights, 9-5 etc..)</i>		
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<i>Describe your current duties:</i>		<i>Type of Employment</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal / Temp <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer / Intern	
<i>Supervisors Name:</i>	<i>Supervisor Phone:</i>	<i>Co-Worker Name:</i>	<i>Co-Worker Phone:</i>

Labette County Sheriff's Office

Personal History Statement

Have you ever held employment under another name? Yes NO

If yes, list the names used, the employer, and the dates of employment.

<i>Name used</i>	<i>Employer</i>	<i>From Month/Year</i>	<i>To Month/Year</i>

Have you ever been terminated (fired) or asked to resign from a job or position in lieu of termination? Yes NO

If yes, start with most recent, and list the following information, giving details. If more space is needed, please explain under the general information section at the end of this application.

<i>Dates:</i>	<i>Employer:</i>
<i>Details:</i>	

<i>Dates:</i>	<i>Employer:</i>
<i>Details:</i>	

Have you ever had any extended work absences for any reason other than medical or earned vacation? (Leave of absence, suspensions, layoffs, etc.) Yes NO

If yes, start with most recent, and list the following information, giving details. If more space is needed, please explain under the general information section at the end of this application.

<i>Dates:</i>	<i>Employer:</i>
<i>Details:</i>	

<i>Dates:</i>	<i>Employer:</i>
<i>Details:</i>	

Labette County Sheriff's Office

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Have you ever been **investigated** by your employer or supervisor for improper conduct, illegal activities, sexual harassment, or equal employment violations? Yes NO

If yes, start with most recent, and list the following information, giving details. If more space is needed, please explain under the general information section at the end of this application.

<i>Dates:</i>	<i>Employer:</i>
<i>Details and Results of the Investigation:</i>	

<i>Dates:</i>	<i>Employer:</i>
<i>Details and Results of the Investigation:</i>	

Have you ever been suspended by an employer, or received a formal written reprimand, or verbal, warning, or verbal counseling? Yes NO

<i>Dates:</i>	<i>Employer:</i>
<i>Details and Results of the Investigation:</i>	

<i>Dates:</i>	<i>Employer:</i>
<i>Details and Results of the Investigation:</i>	

<i>Dates:</i>	<i>Employer:</i>
<i>Details and Results of the Investigation:</i>	

Labette County Sheriff's Office

Personal History Statement

Personal and Professional References

Personal References: Include three personal references.

<i>Dates Known:</i> <i>From To</i> <i>Month/Year Month/Year</i> to	<i>Name of Reference</i>	<i>Contact Phone Number</i>
	<i>Address: (Street, City, State, Zip Code)</i>	
<i>Years Known:</i>	<i>Email Address:</i>	

<i>Dates Known:</i> <i>From To</i> <i>Month/Year Month/Year</i> to	<i>Name of Reference</i>	<i>Contact Phone Number</i>
	<i>Address: (Street, City, State, Zip Code)</i>	
<i>Years Known:</i>	<i>Email Address:</i>	

<i>Dates Known:</i> <i>From To</i> <i>Month/Year Month/Year</i> to	<i>Name of Reference</i>	<i>Contact Phone Number</i>
	<i>Address: (Street, City, State, Zip Code)</i>	
<i>Years Known:</i>	<i>Email Address:</i>	

Professional Reference: Include two professional references.

<i>Dates Known:</i> <i>From To</i> <i>Month/Year Month/Year</i> to	<i>Name of Reference</i>	<i>Contact Phone Number</i>
	<i>Address: (Street, City, State, Zip Code)</i>	
<i>Years Known:</i>	<i>Email Address:</i>	

<i>Dates Known:</i> <i>From To</i> <i>Month/Year Month/Year</i> to	<i>Name of Reference</i>	<i>Contact Phone Number</i>
	<i>Address: (Street, City, State, Zip Code)</i>	
<i>Years Known:</i>	<i>Email Address:</i>	

Labette County Sheriff's Office

Personal History Statement

Applications with other Law Enforcement Agencies

Have you ever applied for any other law enforcement agency (city, county, state, or federal agencies)? Yes NO

If you have, or have had, a law enforcement certification, has it ever been censored, suspended, revoked, or any disciplinary action taken against it? Yes NO

If yes, list every agency you have ever applied with. Start with the most recent. Give complete, accurate addresses. All agencies must be listed regardless of the outcome or current status. If more space is needed, print the agency addendum and attach it to this packet.

<i>Name of Agency:</i>	<i>Date Applied:</i>			
<i>Address of Agency:</i>	<i>Position Applied for:</i>			
<i>Background Investigator's Name</i>	<i>Phone Number</i>			
<i>Use the section below to mark how far in the hiring process you completed with this agency:</i>				
<input type="checkbox"/> Submitted Application Only	<input type="checkbox"/> Took Written Exam	<input type="checkbox"/> Failed Written Exam	<input type="checkbox"/> Performed Oral Interview	<input type="checkbox"/> Failed Oral Interview
<input type="checkbox"/> Placed on Eligibility List	<input type="checkbox"/> Submitted Personal History	<input type="checkbox"/> Background Investigation Conducted	<input type="checkbox"/> Background Investigation Pending	<input type="checkbox"/> Performed a Polygraph
<input type="checkbox"/> Disqualified due to polygraph	<input type="checkbox"/> Was not selected for position	<input type="checkbox"/> Hired / Conditional Job Offer was made	<input type="checkbox"/> Unknown status	<input type="checkbox"/> No Response from agency
<input type="checkbox"/> Withdrew application or declined	<input type="checkbox"/> Other: Explain _____			

<i>Name of Agency:</i>	<i>Date Applied:</i>			
<i>Address of Agency:</i>	<i>Position Applied for:</i>			
<i>Background Investigator's Name</i>	<i>Phone Number</i>			
<i>Use the section below to mark how far in the hiring process you completed with this agency:</i>				
<input type="checkbox"/> Submitted Application Only	<input type="checkbox"/> Took Written Exam	<input type="checkbox"/> Failed Written Exam	<input type="checkbox"/> Performed Oral Interview	<input type="checkbox"/> Failed Oral Interview
<input type="checkbox"/> Placed on Eligibility List	<input type="checkbox"/> Submitted Personal History	<input type="checkbox"/> Background Investigation Conducted	<input type="checkbox"/> Background Investigation Pending	<input type="checkbox"/> Performed a Polygraph
<input type="checkbox"/> Disqualified due to polygraph	<input type="checkbox"/> Was not selected	<input type="checkbox"/> Hired / Conditional Job Offer was made	<input type="checkbox"/> Unknown status	<input type="checkbox"/> No Response from agency
<input type="checkbox"/> Withdrew application or declined	<input type="checkbox"/> Other: Explain _____			

Labette County Sheriff's Office

Personal History Statement

Military Service

Military discharge status is not, in and of itself, an absolute bar to employment, and other factors will be used when making the final hiring decision

Have you registered with Selective Service? Yes NO

Have you ever served in any branch of the United States Armed Forces, National Guard, or Military Reserves? Yes NO

If yes, what is your current status: Active Reserve Inactive Discharged

<i>Branch of Service</i>	<i>Occupation</i>	<i>Unit</i>	<i>Enlistment Date</i>	<i>Discharge Date</i>
<i>Highest Rank</i>	<i>Discharge Rank</i>	<i>CO/ BN/ BDE Commander's Name</i>		<i>Phone Number</i>
<i>Type of Discharge</i>	<i>Separation Code</i>	<i>PSG/ ISG / SGM / CSM's Name</i>		<i>Phone Number</i>

If your discharge was not 'Honorable', please explain:

Were you ever investigated, by any military or non-military agency, for any criminal activity while in the military or National Guard or Reserves? Yes NO

Were you ever reduced in pay grade or been the subject of any judicial or nonjudicial disciplinary action while in the military or National Guard or Reserves? Yes NO

If you answered yes, to either of two proceeding questions, please explain:

<i>Approximate Date:</i>	<i>Investigated for:</i>	<i>Outcome / Disposition</i>

Duty Assignments:

<i>Location:</i>	<i>Primary Duty Assignment</i>	<i>From Month/Year</i>	<i>To Month/Year</i>

Labette County Sheriff's Office

Personal History Statement

Education

During the background investigation, persons who have known you in a learning environment may be contacted. A review of your school records may be made in conjunction with those contacts.

Levels of Education completed:

- High School Diploma or GED
 Associate's degree
 Master's Degree
 Some College Education
 Bachelor's Degree
 Doctorate Degree

<i>High School:</i>	<i>City / State</i>	<i>Graduate</i>	<i>From Month/Year</i>	<i>To Month/Year</i>

<i>University</i>	<i>Major</i>	<i>Total Credits</i>	<i>Degree Earned</i>	<i>From Month/Year</i>	<i>To Month/Year</i>

Have you ever attended a trade, vocational, or business school? Yes NO

<i>Trade School</i>	<i>Course</i>	<i>Total Credits</i>	<i>Degree Earned</i>	<i>From Month/Year</i>	<i>To Month/Year</i>

Do you possess other training, schooling or certifications which are applicable to the position in which are you are applying for? Yes NO

<i>Certification</i>	<i>Date</i>	<i>Certification</i>	<i>Date</i>

Labette County Sheriff's Office

Personal History Statement

Criminal History

A felony conviction or domestic violence conviction is an automatic disqualification.

A felony arrest, misdemeanor arrest, misdemeanor conviction is not, in and of itself, an absolute bar to employment, and other factors will be taken into consideration when making a final hiring decision.

Either as an adult or a juvenile, have you ever been arrested or charged or indicted with a criminal act? Yes NO

Include charges that were dismissed, dropped, reduced, deferred from prosecution or expunged with a criminal act. If yes, provide the following information.

<i>Name of Law Enforcement Agency:</i>	<i>Date arrested or charged:</i>
<i>Original Criminal Offense(s) / Arrest Charge(s):</i>	<i>Misdemeanor or Felony:</i>
<i>Disposition of the arrest, charge or conviction:</i>	
<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Diversion <input type="checkbox"/> Dismissed <input type="checkbox"/> Plea to lesser offense	

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<i>Original Criminal Offense(s) / Arrest Charge(s):</i>	<i>Misdemeanor or Felony:</i>
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<i>Disposition of the arrest, charge or conviction:</i>	
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<i>Original Criminal Offense(s) / Arrest Charge(s):</i>	<i>Misdemeanor or Felony:</i>
<i>Disposition of the arrest, charge or conviction:</i>	
<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Diversion <input type="checkbox"/> Dismissed <input type="checkbox"/> Plea to lesser offense	

Labette County Sheriff's Office

Personal History Statement

Illegal Drugs/Narcotics and Prescriptions Usage

Complete with respect to any use you have had with the following illegal drugs or narcotics. Mark the appropriate box, even if NEVER USED.

Drug/Narcotic	Date First Used	Date Last Used	Max Times Used	Never Used
Marijuana				
Hashish				
PCP				
Angel Dust				
KHAT				
Peyote				
Mescaline				
Mushrooms				
Heroin				
Cocaine				
Quaaludes				
Uppers				
Downers				
Tranquilizers				
Amphetamines				
Ecstasy (XTC)				
Preludin				
Speed				
Inhalants				
Methamphetamine				
Opium				
Steroids				
LSD				
Methadone				

List any type of illegal drug, narcotic, or other substance(s) you have used, to include prescription drugs not prescribed for you (Hydrocodone, oxytocin, etc.)

Have you ever manufactured, bought, sold, distributed or given away any type of illegal drug or narcotic? Yes NO

Have you ever manufactured, bought, sold, distributed or given away any prescription drug prescribed to you or someone else without an authorized prescription? Yes NO

Labette County Sheriff's Office

Personal History Statement

Financial / Legal Matter

- Have you ever been a party in a civil lawsuit (e.g. small claims action, dissolutions, child custody, paternity support etc.) Yes NO
- Have you settled any civil suit in which you, your insurance company or anyone else on your behalf was required to make payment to another party? Yes NO
- Have you or spouse/partner ever been referred to child protective service agency? Yes NO
- Have you ever been the subject of an emergency protective order or restraining order? Yes NO
- Have you ever fraudulently received welfare, unemployment compensation, workers compensations or other state or federal assistance? Yes NO
- Have you ever been required to repay any welfare payments, unemployment compensation, workers compensations or other state or federal assistance Yes NO
- Have you ever filed for or declared bankruptcy (Chapter 7, 11 or 13)? Yes NO
- Have any of your bills ever been turned over to a collection agency? Yes NO
- Have you ever had any purchased goods repossessed? Yes NO
- Have your wages ever been garnished? Yes NO
- Have you ever been delinquent on income or other tax payments? Yes NO
- Have you ever failed to file income tax or cheated/lie on an income tax form? Yes NO
- Have you ever had an employment bond refused? Yes NO
- Have you defaulted on (failed to pay) a loan? Yes NO
- Have you ever failed to make or been late on a court-ordered payment Yes NO
- Have you ever written three or more bad checks in a one-year period? Yes NO

Office of the Sheriff
 Labette County
 718 5th Street
 Oswego, KS 67356



Darren R. Eichinger
 Sheriff
 Clifford W. Davis
 Undersheriff

**AUTHORITY TO RELEASE INFORMATION
 LAW ENFORCEMENT SUITABILITY BACKGROUND REQUEST**

Voluntary consent is granted and I hereby authorize any Law Enforcement Officer or other authorized representative of the Labette County Sheriff's Office bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to application for employment, employment history, military history, tenant history or educational records including, but not limited to, transcripts, academic achievement, attendance, athletic, personal history and disciplinary records. This release also allows you to release law enforcement or criminal records or any information from a law enforcement agency. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Labette County Sheriff's Office.

I hereby release you as the custodian of such records and any school, college, university, or other educational institution, law enforcement agency, consumer reporting agency, military organization or retail business establishment including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family or associates, because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below.

<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>	
<i>Date of Birth</i>	<i>Social Security Number</i>	<i>Driver's License Number / State</i>	
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Home Phone</i>	<i>Cell Phone</i>	<i>Business Phone</i>	

State of _____)
)
 County of _____)

Subscribed and sworn to, or affirmed before me,

On this _____ day of _____ of this year, _____

 Signature of Applicant

 Signature of Notary

Office of the Sheriff
 Labette County
 718 5th Street
 Oswego, KS 67356



Darren R. Eichinger
 Sheriff
 Clifford W. Davis
 Undersheriff

**AUTHORITY TO RELEASE INFORMATION
 PRISON RAPE ELIMINATION ACT SUITABILITY SCREENING**

In accordance with the Prison Rape Elimination Act (PREA) Standard 115.17 prohibits this agency from hiring, promoting, or contracting with anyone (that will have direct contact with inmates) who has engaged in, been convicted of, or been civilly or administratively adjudicated for engaging in sexual abuse in confinement settings. The standard requires the agency to conduct criminal background checks, conduct a check of the state's child abuse registry, and make its best efforts to contact prior institutional employers to obtain this information. Information obtained through this investigation will be used to determine my suitability for employment. It is the policy of the Labette County Sheriff's Office which operates and maintains administrative, operational and physical control of the Labette County Jail to make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual assault/abuse, or any resignation during a pending investigation of an allegation of sexual assault/ abuse.

The applicant below has applied for employment with the Labette County Sheriff's Office. In accordance with PREA Standard 115.17, we are conducting a background check to determine if applicant has had any employment history of engaging in sexual assault, abuse, harassment, either criminally or administratively with your facility. Please provide any, and all records, if the above applicant has any such history or not.

<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>	
<i>Date of Birth</i>	<i>Social Security Number</i>	<i>Driver's License Number / State</i>	
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Home Phone</i>	<i>Cell Phone</i>	<i>Business Phone</i>	

State of _____)
)
 County of _____)

Subscribed and sworn to, or affirmed before me,
 On this _____ day of _____ of this year, _____.

 Signature of Applicant

 Signature of Notary