

# Clark County Sheriffs' Department

## APPLICATION FOR EMPLOYMENT

(PLEASE PRINT)

Position Applied For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

How did you learn about us?  Advertisement  Friend  Walk-in  Employment Agency  
 Relative  Other \_\_\_\_\_

### PERSONAL HISTORY

Last Name	First Name	Middle Name
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Address:	Number	Street	City	State	Zip Code
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Telephone Number (s)	Date of Birth	Social Security #
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Have you ever filed an application with us before?  Yes  No

If yes give dates \_\_\_\_\_

Have you ever been employed with us before?  Yes  No

If yes give dates \_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your current employer?  Yes  No

On what date would you be available for work? \_\_\_\_\_

Are you available to work?  Full Time  Part Time  Shift Work  Temporary

Are you currently on "lay off" status and subject to recall?  Yes  No

Can you travel if a job requires it?  Yes  No

Do you have an objection to traveling by airplane if the job requires it?  Yes  No

## EDUCATION

	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA/ DEGREE
ELEMENTARY SCHOOL				
HIGH SCHOOL				
UNDERGRADUATE COLLEGE				
GRADUATE PROFESSIONAL				
OTHER (SPECIFY)				

*Indicate any foreign languages you can speak, read and/or write*

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

**Describe any specialized training, apprenticeship, skills and extra-curricular activities.**

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**Describe any job-related training received in the United States Military.**

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## EMPLOYMENT HISTORY

Start with your present or last job. Include any job-related military service assignment and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

<b>EMPLOYER</b>	<b>DATE EMPLOYED</b>	<b>WORK PERFORMED</b>
	From <span style="margin-left: 100px;">To</span>	
<b>ADDRESS</b>	<b>Hourly Rate/Salary</b>	
	Starting <span style="margin-left: 100px;">Final</span>	
<b>TELEPHONE NUMBER(S)</b>		
<b>JOB TITLE</b>	Supervisor	
<b>REASON FOR LEAVING</b>		
<b>EMPLOYER</b>	<b>DATE EMPLOYED</b>	<b>WORK PERFORMED</b>
	From <span style="margin-left: 100px;">To</span>	
<b>ADDRESS</b>	<b>Hourly Rate/Salary</b>	
	Starting <span style="margin-left: 100px;">Final</span>	
<b>TELEPHONE NUMBER(S)</b>		
<b>JOB TITLE</b>	Supervisor	
<b>REASON FOR LEAVING</b>		
<b>EMPLOYER</b>	<b>DATE EMPLOYED</b>	<b>WORK PERFORMED</b>
	From <span style="margin-left: 100px;">To</span>	
<b>ADDRESS</b>	<b>Hourly Rate/Salary</b>	
	Starting <span style="margin-left: 100px;">Final</span>	
<b>TELEPHONE NUMBER(S)</b>		
<b>JOB TITLE</b>	Supervisor	
<b>REASON FOR LEAVING</b>		
<b>EMPLOYER</b>	<b>DATE EMPLOYED</b>	<b>WORK PERFORMED</b>
	From <span style="margin-left: 100px;">To</span>	
<b>ADDRESS</b>	<b>Hourly Rate/Salary</b>	
	Starting <span style="margin-left: 100px;">Final</span>	
<b>TELEPHONE NUMBER(S)</b>		
<b>JOB TITLE</b>	Supervisor	
<b>REASON FOR LEAVING</b>		

*If you need additional space, please continue on a separate sheet of paper.*

## ORGANIZATION MEMBERSHIP

List professional, trade, business or civic activities and offices held.

*You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.*

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## SPECIAL QUALIFICATIONS AND SKILLS

List special job-related skills and qualification acquired from employment or other experience.

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State any additional information you feel may be helpful to us in considering your application.

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## REFERENCES

1. \_\_\_\_\_  
(NAME) (ADDRESS) (PHONE NUMBER)
2. \_\_\_\_\_  
(NAME) (ADDRESS) (PHONE NUMBER)
3. \_\_\_\_\_  
(NAME) (ADDRESS) (PHONE NUMBER)

**NOTE TO APPLICANTS:**

**DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

**Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied?  YES  NO**  
**A description of the activities involved in such a job or occupation is attached.**

**I certify that answers herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.**

**This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.**

**In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the employer.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview:  YES  NO

Remarks: \_\_\_\_\_  
\_\_\_\_\_

INTERVIEWER

DATE

Employed:  YES  NO

Date of Employment \_\_\_\_\_

Job Title: \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_ Department \_\_\_\_\_

By: \_\_\_\_\_  
NAME AND TITLE DATE

NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_