

# ROCK COUNTY SHERIFF'S OFFICE

## Personal History Questionnaire

### Instructions

The information you provide in this personal history questionnaire will be used in the investigation into your background to assist in determining your suitability for a position with the Rock County Sheriff's Office. Please fill out the questionnaire completely and accurately. It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of circumstances and facts surrounding its occurrence and its degree of relevance to the job. For example, being fired from a job or having an arrest record is not in itself grounds for disqualification. During the investigation, the investigator will inquire into the facts surrounding such an occurrence. An evaluation will then be made of the relevance of these facts to the requirements of the job.

Keep in mind that:

1. All statements are subject to verification;
2. Deliberate inaccuracies, omissions, or incomplete statements will bar or remove you from employment;
3. All time periods in your background must be accounted for;
4. The completion of this form is mandatory for all applicants, and in accordance with Wisconsin Administrative Code Rules of Law Enforcement Standards Board, Chapter LES2.

## Required Documents

Please submit all of the applicable documents listed below with this questionnaire.

- ( ) Driver's License (copy)
- ( ) Military DD214 Form
- ( ) Birth Certificate (original or copy)
- ( ) High School Diploma or GED equivalent (original or copy)
- ( ) Naturalization Papers (original or copy)
- ( ) Evidence of Draft Registration
- ( ) College transcripts (60 college credits minimum for Deputies, original or certified copies)
- ( ) Certification as a law enforcement officer by Training & Standards, if applicable (Deputy Sheriff only)
- ( ) Certification as a jail officer by Training and Standards, if applicable (Correctional Officer only)

**ROCK COUNTY SHERIFF'S OFFICE**  
**Personal History Questionnaire**

Position Applied For \_\_\_\_\_

Application Date \_\_\_\_\_

**INSTRUCTIONS:** This record will be strictly confidential, and the exclusive property of the Sheriff's Office. All information will be used as a basis for a detailed investigation of your background, and must be accurately and completely reported. There must be no blanks! If the question does not apply to you, write in "DNA". If additional space is needed, use the back of the page or attach additional sheets, prefacing the information with the number of the question to which it pertains.

THIS QUESTIONNAIRE MUST BE TYPED OR PRINTED (in ink)

**Personal Information**

1. Your legal name \_\_\_\_\_  
Last First Middle
2. List all other names you have used or been known by (aliases, maiden, nicknames, etc.). If change was made by court order, attach copy.  
\_\_\_\_\_
3. Date of Birth \_\_\_\_\_  
Place of Birth \_\_\_\_\_  
City County State/Country
4. Physical Description:  
Sex \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eye \_\_\_\_\_
5. Citizenship \_\_\_\_\_
6. Social Security # \_\_\_\_\_
7. Driver's License # \_\_\_\_\_
8. Residence Address \_\_\_\_\_  
Number Street  
\_\_\_\_\_  
City State Zip  
Phone Numbers \_\_\_\_\_  
Residence and/or Cell E-Mail Address

9. Marital Status: Never Married \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_  
Separated \_\_\_\_\_ Widowed \_\_\_\_\_

Name of Spouse \_\_\_\_\_  
Last (Maiden if female) First Middle

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Marriage \_\_\_\_\_

City & State Marriage Performed \_\_\_\_\_

Spouse's Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Business Address \_\_\_\_\_ Phone \_\_\_\_\_

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### Employment & Experience

1. Beginning with your most current employment, list all jobs including part-time, temporary and voluntary positions you have held in the past 10 years. If you have had intervening periods of military service or unemployment, list those periods in sequence in the spaced provided.

Dates \_\_\_\_\_ Employer \_\_\_\_\_  
Mo./Yr. to Mo./Yr.

Employer's Address \_\_\_\_\_ ( ) \_\_\_\_\_  
No. Street City/State Phone

Title/Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Monthly Salary \_\_\_\_\_ Work Hrs., and Days \_\_\_\_\_

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Volunteer \_\_\_\_\_

Name of two Co-Workers \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

Military Service \_\_\_\_\_ Not Employed \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

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Dates \_\_\_\_\_ Employer \_\_\_\_\_  
Mo./Yr. to Mo./Yr.  
Employer's Address \_\_\_\_\_ ( ) \_\_\_\_\_  
No. Street City/State Phone  
Title/Duties \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Monthly Salary \_\_\_\_\_ Work Hrs., and Days \_\_\_\_\_  
Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Volunteer \_\_\_\_\_  
Name of two Co-Workers \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
Military Service \_\_\_\_\_ Not Employed \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

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Dates \_\_\_\_\_ Employer \_\_\_\_\_  
Mo./Yr. to Mo./Yr.  
Employer's Address \_\_\_\_\_ ( ) \_\_\_\_\_  
No. Street City/State Phone  
Title/Duties \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Monthly Salary \_\_\_\_\_ Work Hrs., and Days \_\_\_\_\_  
Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Volunteer \_\_\_\_\_  
Name of two Co-Workers \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
Military Service \_\_\_\_\_ Not Employed \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

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Dates \_\_\_\_\_ Employer \_\_\_\_\_  
Mo./Yr. to Mo./Yr.  
Employer's Address \_\_\_\_\_ ( ) \_\_\_\_\_  
No. Street City/State Phone  
Title/Duties \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Monthly Salary \_\_\_\_\_ Work Hrs., and Days \_\_\_\_\_  
Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Volunteer \_\_\_\_\_  
Name of two Co-Workers \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
Military Service \_\_\_\_\_ Not Employed \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

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Dates \_\_\_\_\_ Employer \_\_\_\_\_  
           Mo./Yr. to Mo./Yr.

Employer's Address \_\_\_\_\_ ( ) \_\_\_\_\_  
                                   No. Street City/State Phone

Title/Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Monthly Salary \_\_\_\_\_ Work Hrs., and Days \_\_\_\_\_

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Volunteer \_\_\_\_\_

Name of two Co-Workers \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

Military Service \_\_\_\_\_ Not Employed \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

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2. In the last 10 years how many:

Full time jobs have you held? \_\_\_\_\_.

Part time Jobs have you had? \_\_\_\_\_.

3. If you have had no prior employment, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Have you ever had any extended work absences for reasons other than earned vacation? Yes  No  If yes, please explain (include, when, where and why.)

\_\_\_\_\_

\_\_\_\_\_

5. Have you ever been fired or asked to resign from any place of employment? Yes  No  If yes, please explain (include when, where and why). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. When we check with all of your employers, whether they are right or wrong, how many of them may say you were fired? \_\_\_\_\_.

List each Job and explain what happened:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. How many times at a job have you:
- \_\_\_\_\_ a. Been warned about being absent or late?
  - \_\_\_\_\_ b. Been asked to resign?
  - \_\_\_\_\_ c. Quit because you thought you would be fired?
  - \_\_\_\_\_ d. Had personality problems?
  - \_\_\_\_\_ e. Left because of personal problems?
  - \_\_\_\_\_ f. Been treated unfairly by an employer?

Explain the answers that have a number other than zero:

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8. Have you previously applied for employment with the County of Rock?  
 Yes  No

9. List all law enforcement or government agencies you have applied with. (Include Police Reserves or auxiliary units).

Department/Agency	Date	Backgrounded?	Accepted?

(If rejected for unsuitability by any of the above, explain in detail on the back side of this page.)

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### Residence

1. List all previous addresses where you have lived. Start with your present address and list all others in order. During military service, list only off base addresses rather than military quarters.

From \_\_\_\_\_ Address \_\_\_\_\_  
 Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_



From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_

\_\_\_\_\_

From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_  
\_\_\_\_\_

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From \_\_\_\_\_ Address \_\_\_\_\_  
Mo/Yr to Mo/Yr No. Street City/State

With whom did your reside? \_\_\_\_\_

Relationship \_\_\_\_\_

Landlord's name, address, phone \_\_\_\_\_  
\_\_\_\_\_

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### References, Relatives and Acquaintances

1. PERSONAL REFERENCES: List four (4) persons who know you well enough to provide information about you. DO NOT LIST RELATIVES OR FORMER EMPLOYERS.

Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Yrs. Known \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

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Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Yrs. Known \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

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Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Yrs. Known \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

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Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Yrs. Known \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

2. List all other relatives with whom you have resided.

Name \_\_\_\_\_ Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

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Name \_\_\_\_\_ Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

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Name \_\_\_\_\_ Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

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3. List members of law enforcement agencies who know you well enough to provide accurate information about you (include all relatives).

Name	Department	Work/Home Phone	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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### Education

1. Do you possess a high school diploma? Yes  No

2. Did you ever take the General Education Development (GED) Test?  
Yes  No  If yes, where and when? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. List all high schools, colleges, universities, and trade and business schools attended. Begin with the most recent and continue in sequence.

Name of School \_\_\_\_\_ City & State \_\_\_\_\_  
Dates \_\_\_\_\_ Degree \_\_\_\_\_ Major \_\_\_\_\_  
Mo/Yr to Mo/Yr  
Credits \_\_\_\_\_

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Name of School \_\_\_\_\_ City & State \_\_\_\_\_  
Dates \_\_\_\_\_ to \_\_\_\_\_ Degree \_\_\_\_\_ Major \_\_\_\_\_  
Mo/Yr Mo/Yr  
Credits \_\_\_\_\_

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Name of School \_\_\_\_\_ City & State \_\_\_\_\_  
Dates \_\_\_\_\_ to \_\_\_\_\_ Degree \_\_\_\_\_ Major \_\_\_\_\_  
Mo/Yr Mo/Yr  
Credits \_\_\_\_\_

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Name of School \_\_\_\_\_ City & State \_\_\_\_\_  
Dates \_\_\_\_\_ to \_\_\_\_\_ Degree \_\_\_\_\_ Major \_\_\_\_\_  
Mo/Yr Mo/Yr  
Credits \_\_\_\_\_

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4. Have you ever been suspended from any high school or post-secondary school?  
Yes  No  If yes, please explain (include school, dates and circumstances).

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5. What professional licenses and/or certificates of proficiency do you hold?

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6. What, if any, firearms do you own or possess?

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7. Were you ever required to surrender any firearms to law enforcement or as a result of a court order or injunction? Yes  No

If yes, explain:

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**Military Service**

1. Have you ever served in the Armed Forces, National Guard or Military Reserves?  
Yes  No  If yes, please give the following information:

Branch of Service \_\_\_\_\_ If Guard, which state? \_\_\_\_\_  
Service Number \_\_\_\_\_ Dates of Service \_\_\_\_\_  
Mo/Yr to Mo/Yr

Name, Address and Phone Number of Unit:

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Highest Rank, Rate or Grade Held \_\_\_\_\_  
Type of Release or Discharge \_\_\_\_\_

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Name, Address and Phone Number of Unit:

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Highest Rank, Rate or Grade Held \_\_\_\_\_  
Type of Release or Discharge \_\_\_\_\_

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Name, Address and Phone Number of Unit:

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Highest Rank, Rate or Grade Held \_\_\_\_\_  
Type of Release or Discharge \_\_\_\_\_

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2. Are you currently participating in any military reserve or National Guard Program?  
Yes  No  If yes, provide name, address and phone number of unit: \_\_\_\_\_

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3. Did you experience any violent physical confrontations or encounters while serving in the military service? Yes  No  If yes, please explain.

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4. Have you ever been the subject of any judicial or non-judicial disciplinary action while in the military, National Guard or Military Reserve? Yes  No   
If yes, please give details (include the branch of service, when, where and circumstances).

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5. Are you currently registered for the draft? Yes  No   
If no, please explain.

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6. Have you ever been refused enlistment or acceptance by any branch of the military service, National Guard, or Military Reserves? Yes  No   
If yes, give the branch and service, date and details.

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7. Other than unit citations, list any awards, medals or honors you received:

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8. How many times did you:

- \_\_\_\_\_ a. Receive a disciplinary action? (Captain's Mast, Article 15, Summary punishment)
- \_\_\_\_\_ b. Get taken into custody by Military authorities?
- \_\_\_\_\_ c. Get Court marshaled?
- \_\_\_\_\_ d. Have your rank reduced?

Explain any answers with a number other than zero:

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9. List any unauthorized service equipment you kept when discharged:

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10. List any physical profiles you were ever placed on while in the Service and why:

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**Legal**

1. List all arrests (including juvenile arrests, court referrals and ordinance violations) and/or any convictions.

<b>Date</b>	<b>Police Agency</b>	<b>Charges</b>	<b>Disposition</b>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

2. Have you ever been placed on adult or juvenile probation? Yes  No   
If yes, give details (include when, where and why).

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3. Have you ever been accused of sexual assault or sexual harassment? Yes  No   
If yes, give details (include when, where and why).

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4. Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution as defined in 42 USC §1997? Yes  No  If yes, give details (include when, where and why).

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5. Have you ever been convicted of engaging in or attempting to engage in sexual activity facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse? Yes  No  If yes, give details (include when, where and why).

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6. Have you ever been civilly or administratively adjudicated to have engaged in the activity described in question (5) above? Yes  No  If yes, give details (include when, where and why).

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7. Have you ever been reported to a law enforcement agency as a missing person or a runaway? Yes  No  If yes, give details (include date, law enforcement agency and circumstances).

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8. Have you or any member of your family ever been a member of any extremist or subversive group or organization? Yes  No  If yes, please explain.

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9. Have you ever attended meetings or have been a member of any group, which advocates violent dissent, or the overthrow of the United States Government? Yes  No  If yes, please explain:

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### Motor Vehicle Operation

1. Driver's License Number \_\_\_\_\_ State \_\_\_\_\_

Type (operator, chauffeur, etc.) \_\_\_\_\_ Exp. Date \_\_\_\_\_



2. List other state where you have been licensed to drive:

**State**

**Name Under Which License Was Granted**

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3. Have you ever been refused a driver's license by any state: Yes  No   
If yes, please explain when, where and why:

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4. Has any driver's license issued to you contained any specific limitations, restrictions, or special conditions? Yes  No  If yes, please explain:

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5. Have you ever received a warning notice from the state issuing your driver's license? Yes  No

6. Has your driver's license ever been suspended, revoked, or placed on negligent operations probation? Yes  No  If yes, please give details (include what, where and why).

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7. List all motor vehicles currently owned by or registered to you:

**Year**

**Make**

**Model**

**License Number**

**State**

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8. List all traffic citations you have received within the last five-(5) years. DO NOT INCLUDE PARKING CITATIONS.

Nature of Violations	Location (City)	Approx. Date	Disposition

9. Please give the total number of moving violations you have received as a driver \_\_\_\_\_.

10. Give the details for each motor vehicle accident you have been involved in as a driver.

Date \_\_\_\_\_ Location \_\_\_\_\_

Injury? Yes  No       Police Investigations? Yes  No

Investigating Agency \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

Injury? Yes  No       Police Investigations? Yes  No

Investigating Agency \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

Injury? Yes  No       Police Investigations? Yes  No

Investigating Agency \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

Injury? Yes  No       Police Investigations? Yes  No

Investigating Agency \_\_\_\_\_

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**General Information**

1. List all organizations, clubs, professional societies, fraternities, labor organizations and sororities of which you are or have been a member.

Name of Organization \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Office Held \_\_\_\_\_

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Name of Organization \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Office Held \_\_\_\_\_

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Name of Organization \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Office Held \_\_\_\_\_

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Name of Organization \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Office Held \_\_\_\_\_

2. List any special awards you have received, special qualifications you may possess, or honors that have been bestowed upon you.

\_\_\_\_\_

\_\_\_\_\_

3. In what sports have you actively participated?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. List all foreign languages you speak, read or understand?

\_\_\_\_\_

\_\_\_\_\_

5. Have you ever applied for a permit to carry a concealed weapon? Yes  No   
If yes, please provide the following information:

Permit Granted? Yes  No  Date \_\_\_\_\_

Law Enforcement Agency \_\_\_\_\_

Purpose \_\_\_\_\_  
\_\_\_\_\_

6. Have you ever been involved in a violent incident such as shooting, knifing, or fight where someone was or could have been seriously injured or killed?  
Yes  No  If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Have you ever been refused a security clearance or bond? Yes  No   
If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Are there any aspects of police work that you would find distasteful? Yes  No   
If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. If it became necessary, in the course of your duties, to take a human life, would you have any reluctance to do so? Yes  No  If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. In your own handwriting, state your reasons for wanting to become an employee of the Rock County Sheriff's Office? DO NOT TYPE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Prior Law Enforcement Experience Only**

11. List all internal affairs complaints, suspensions or reprimands you have received while employed as a law enforcement officer.

<b>Date</b>	<b>Dept/Agency</b>	<b>Nature of Incident</b>	<b>Dept. Action Taken</b>
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12. List all duty connected civil suits you have been or are presently involved in.

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13. List all on-duty motor vehicle accidents you have been involved in as a driver.

<b>Date</b>	<b>Dept/Agency</b>	<b>Injury?</b>	<b>Dept. Action Taken</b>
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14. List all incidents where you have discharged your weapon (other than at the range) while employed as a law enforcement officer.

<b>Date</b>	<b>Dept/Agency</b>	<b>Description of Circumstances</b>
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1. Tell us about yourself.

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2. What events or influences from your childhood shaped who you are today?

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3. How would your friends, co-workers, or parents describe you?

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4. Of everyone you know, who has the most faith in you? Why?

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5. What do you want to do with your life?

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6. What are the last three books you read? (What is appealing about them? What did you learn?)

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7. Who is or was the greatest influence in your life? (Why? How do you try and be like them?)

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8. What accomplishments have given you the most satisfaction in your life?

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9. If you had your life to live over again what would you change?

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10. What motivates you?

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11. What do you like to do the best?

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12. What is your greatest strength?

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13. What is your greatest weakness?

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14. Do you tend to work better alone or on a team?

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15. How do you handle questions and problems that exceed your knowledge or experience?

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16. What creative suggestions or contributions have you ever made at a job?

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17. Have you ever worked for Rock County before?

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18. List any friends of relatives that you know are currently working for Rock County.

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19. What are your expectations or goals as a Deputy/Correctional Officer for Rock County?

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20. What do you perceive Rock County's strengths and weaknesses to be?

Strengths:

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Weaknesses:

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21. What unique skills do you think you can contribute to the Rock County Sheriff's Office?

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22. Have you ever worked with any volunteer organizations? (Where, how long, positions held, responsibilities, references?)

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23. List any other organizations you have applied for: (Accepted, Denied, reason for leaving?)

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24. If accepted for this position do you expect it to be long or short term?

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25. What do you see yourself doing 5 years from now?

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26. How much money would it take to pay off all your outstanding debts? \$\_\_\_\_\_

How much of this represents your:      Mortgage \$\_\_\_\_\_

Car(s)      \$\_\_\_\_\_

27. How many charge cards do you now have with an outstanding balance? \_\_\_\_\_

28. When a credit check is performed, how many debts will it show you are currently behind on? \_\_\_\_\_.

29. In the last 7 years, how many times have you:

- \_\_\_\_\_ a. Defaulted on a loan or bill?
- \_\_\_\_\_ b. Had deductions taken from your pay by the government/courts?
- \_\_\_\_\_ c. Declared Bankruptcy?
- \_\_\_\_\_ d. Been threatened with a lawsuit due to a bad debt?
- \_\_\_\_\_ e. Had to appear in court due to a bad debt?
- \_\_\_\_\_ f. Been refused a loan or credit by a bank, store, and/or credit cards?
- \_\_\_\_\_ g. Had an overdraft on your checking account?

Explain any number other than zero:

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30. Circle the types of Gambling activities you have done in the last 12 months:

BASEBALL PINBALL BASKETBALL DICE FOOTBALL POOL SLOTS

BILLARDS LOTTERY ROULETTE HOCKEY HORSES CARDS

OTHER \_\_\_\_\_

Describe gambling activities circled:

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31. How many gambling debts do you owe right now? \_\_\_\_\_

32. Did you ever: YES NO

- |   |       |       |
|---|-------|-------|
| a. Use money you had set aside to pay a bill to gamble? | _____ | _____ |
| b. Borrow money to gamble with?                         | _____ | _____ |
| c. Get cash from a credit card to gamble?               | _____ | _____ |
| d. Bet with bookies?                                    | _____ | _____ |
| e. Book horses or numbers yourself?                     | _____ | _____ |
| f. Run a betting pool?                                  | _____ | _____ |
| g. Work for a professional gambler/bookmaker?           | _____ | _____ |

Explain any yes answers (question #32):

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33. In the last 7 years, how many times were you:

- \_\_\_ a. Served with a subpoena / summons in a criminal / civil case?
- \_\_\_ b. Questioned by Police as a suspect?
- \_\_\_ c. The buyer of something you thought was stolen?
- \_\_\_ d. Indicted for a violation of the law?
- \_\_\_ e. Sent to jail?
- \_\_\_ f. Picked up or stopped for shoplifting?

Explain any answers with a number other than zero:

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34. In your entire life, what is the most serious crime you did that you were smart enough to get away with?

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While no employer desires to hire an applicant that has a history of major thefts, they recognize that almost everyone has stolen something here or there over the course of their life. It is extremely important you answer each question truthfully.

35. If you had to pay for everything you have ever shoplifted would it be:

- Over \$100  
 Under \$100

Explain (answer #35):

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36. If you had to pay for everything you have ever shoplifted, what is the most you would owe? \$ \_\_\_\_\_

37. When and what was the last thing? \_\_\_\_\_

38. If you had to pay for everything you have taken from all your jobs would it be:

- Over \$100  
 Under \$100

Explain:

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39. If you had to repay cash you have stolen from all your jobs, what would you owe in:

Past year \$ \_\_\_\_\_ Past 5 years \$ \_\_\_\_\_ Your lifetime \$ \_\_\_\_\_

40. What is the most cash you have ever taken from a job in one day? \$ \_\_\_\_\_

41. What is the most property (merchandise/food/supplies/equipment/etc.) you have stolen from a job in one day? \$ \_\_\_\_\_

42. If you had to pay for non-cash thefts taken from all your jobs, what would you owe in:

Past year \$ \_\_\_\_\_ Past 5 years \$ \_\_\_\_\_ Your lifetime \$ \_\_\_\_\_

43. What do you think should happen to an employee caught stealing?

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a. Would you give them a second chance? Explain:

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44. How much cash would an employee have to be caught stealing before you think they should be prosecuted?

\_\_\_ \$ 1 \_\_\_ \$ 5 \_\_\_ \$ 10 \_\_\_ \$ 25 \_\_\_ \$ 50 \_\_\_ \$ 100 \_\_\_ \$ 500

45. How much merchandise would an employee have to be caught stealing before you think they should be prosecuted?

\_\_\_ \$ 1 \_\_\_ \$ 5 \_\_\_ \$ 10 \_\_\_ \$ 25 \_\_\_ \$ 50 \_\_\_ \$ 100 \_\_\_ \$ 500

Explain your choices for 44 and 45:

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46. Out of 100 employees, how many do you think steal from their jobs? \_\_\_\_\_

47. How many times have you actually seen a co-worker stealing, or been told by a co-worker that they were stealing? \_\_\_\_\_

If you have, what did you do?

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48. If you were to observe a co-worker stealing would you report them? \_\_\_\_\_

49. How many times have you reported a co-worker for stealing? \_\_\_\_\_
50. How many times have you:
- \_\_\_ a. Been questioned on a job for something missing?
  - \_\_\_ b. Been asked to leave a job because something was missing?
  - \_\_\_ c. Felt you had a good reason to steal from a job?
  - \_\_\_ d. Had another employee show you how to steal from a job?
  - \_\_\_ e. Been falsely accused of a theft you did not commit?

### Alcohol and Drugs

51. Statistics show that close to 90% of the American population has experimented with some type of illegal drug during their lifetime. Document every illegal drug you have ever experimented with or used casually, even if it was only one time.

	<u>Year First Used</u>	<u>Month/Year Last Used</u>	<u>Total Times Used</u>
Marijuana (grass, pot)	_____	_____	_____
Hashish/Hash Oil	_____	_____	_____
Cocaine	_____	_____	_____
PCP (angel dust, crystal rocket fuel, KJ)	_____	_____	_____
Amphetamines/Methamphetamine (uppers, speed, crank)	_____	_____	_____
Barbiturates (downers, reds)	_____	_____	_____
Hallucinogens (LSD, STP, DMT, MDA, DET, Synthetic THC)	_____	_____	_____
Psilocybin (magic mushrooms)	_____	_____	_____
Heroin	_____	_____	_____
Morphine, Demerol	_____	_____	_____
Mescaline / Peyote	_____	_____	_____
Thai Sticks (opiated grass)	_____	_____	_____
Amyl Nitrite (poppers)	_____	_____	_____
Quaaludes (ludes)	_____	_____	_____

List any drugs not mentioned:

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52. In your own words, describe your use of intoxicating liquors.

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53. When was the last time you have driven an automobile after consuming alcohol?

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54. When was the last time you have driven an automobile after consuming too much alcohol?

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55. Have you ever used any medications that were prescribed to another? \_\_\_\_\_  
If yes explain:

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56. What is the largest amount of illegal drugs you have ever purchased? What did you pay?

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57. What and when was your last purchase of illegal drugs?

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58. What were the most illegal drugs you have ever sold, and what did it sell for?

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59. When was the last time you sold an illegal drug?

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60. Are you currently using any illegal drugs while working? \_\_\_\_\_  
If yes explain:

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61. Have you ever cultivated or manufactured an illegal drug? \_\_\_\_\_  
If yes explain:

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62. Rock County is made up of a wide variety of racial/ethnic backgrounds. How should these diverse backgrounds affect the manner in which the Sheriff's Office interacts with the community?

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63. In your own words, define diversity and why it is important in Law Enforcement?

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64. Please summarize your experiences working with people from diverse racial/ethnic backgrounds.

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65. What is your opinion on an affirmative action hiring process in law enforcement?

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66. Define racial profiling and explain how racial profiling either aids or hinders law enforcement efforts?

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67. Is there anything else you would like us to know about you that we haven't covered?

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## DECLARATION OF APPLICATION

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions. I am fully aware that any such misrepresentations, omissions or falsifications will be grounds for immediate rejection or termination of employment.

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

Signature of Witness \_\_\_\_\_ Date \_\_\_\_\_

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**DO NOT WRITE BELOW THIS LINE**

Background Investigator \_\_\_\_\_



**ROCK COUNTY SHERIFF'S OFFICE**

**AUTHORIZATION FOR RELEASE OF INFORMATION**

*(For Official Use Only, not to be released to unauthorized persons)*

I hereby empower an employee of the Rock County Sheriff's Office, or other authorized representative bearing this release to, within one year of its date, obtain information and records pertaining to be from any or all of the following sources:

1. Municipal, State or Federal Law Enforcement Agencies;
2. Selective Service System;
3. Any banking institution;
4. Any place of business (for purpose of obtaining credit or employment date);
5. Credit rating bureaus or institutions maintaining individual credit rating files;
6. Any present or previous employer, to include but not limited to all disciplinary records, performance evaluations, sick leave records and any other matters contained in my employment file;
7. Any school, college, university or other educational institution;
8. Any person the Sheriff's Office chooses to interview concerning my reputation;
9. Residential history including information from past and present landlords and or mortgage/property management company records;
10. Social networking websites

This release authorizes disclosure of any and all records, documents or information contained in my employment file as defined by Wis. Stat. § 165.85(2)(ap), including but not limited to performance reviews, files related to job performance, internal affairs investigative files, administrative files, previous personnel applications, personnel-related claims, disciplinary actions, and all substantiated complaints and commendations.

This release is executed to authorize the Rock County Sheriff's Office, as a prospective employer, to obtain the above information and make copies of that information if it so desires. It is understood that said information shall be used only in consideration of my employment and shall not be further disseminated for any purpose. I hereby authorize the Rock County Sheriff's Office to investigate all statements contained in my application. I waive any and all liability whatsoever pursuant to Wis. Stat. § 165.85(4)(em), release, hold harmless, and indemnify Rock County and the Rock County Sheriff's Office, as well as any law enforcement agency, tribal law enforcement agency, jail, juvenile detention facility, or government agency, from any and all liability, costs, or damages, related to the use and disclosure of any records or information contained in my employment file disclosed to the Rock County Sheriff's Office pursuant to this release.

A photocopy reproduction of this request shall be for all intents and purposes as valid as the original.

Date: \_\_\_/\_\_\_/\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Birthdate: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Social Security Number: \_\_\_/\_\_\_/\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_