Application for Employment

Name		
Mailing Address		
City	_State	Zip
Telephone # (Primary)		
(Secondary)		
Email Address		



Madison County Sheriff's Office

145 E. Main Rexburg, Idaho 83440 Ph# (208) 356-5426 Fax# (208) 356-7640

We are an Equal Opportunity Employer

Ron Ball - Sheriff

Thank you for your interest in employment with the Madison County Sheriff's Office. Applicants may be required to submit to a written exam, oral interview, polygraph, psychological, and medical testing, including drug screening, vision and hearing examinations, and will be subject to a thorough background investigation.

Also, for patrol and detention certified positions an Idaho Peace Officer Standards & Training (P.O.S.T.) physical agility test will be required. (Physical agility test requirements are on the last page of this application.)

In order to be considered for employment with the Madison County Sheriff's Office you must meet the following criteria:

- Twenty-one (21) years of age or older
- Idaho P.O.S.T. certifiable, which requires the following:
 - United States citizenship
 - Valid driver's license
 - No more than five (5) moving traffic violations during the past three (5) years
 - No convictions of DUI or suspended driver's license for the past five (5) years
 - No misdemeanor convictions in the past two (2) years
 - No felony convictions
 - Successfully pass physical agility test (Patrol and Detention positions only)
 - No usage of marijuana within three (3) years
 - No usage of any other illegal drugs within five (5) years

All applications must include the following:

- Employment resume
- Copy of driver's license
- Copy of high school diploma and college degrees
- Copy of 'DD214' (Military discharge form) (if applicable)
- Copy of any law enforcement certificates

Applying for: (Please check all you are interested in)

Patrol Deputy	
Detention Deputy	
Reserve Deputy for Patro	l or _ Detention
911 Dispatcher	
Clerical	
Other	

Authority to Release Information

Name (Last)		(First)	(Middle)	
Date of Birth	 _/	Social Sec	urity # (Last Four Digits)	

Having made an application of employment with the **Madison County Sheriff's Office**, and desiring them to be fully informed as to my previous record and character, I hereby authorize them to conduct a thorough background investigation to gather information which may include historical data regarding my previous residences, schools attended with GPAs and degrees earned, military service and separation, present and past employer including performance history, previous applications to other law enforcement agencies, personal and professional references, credit and financial reports, criminal and traffic history, and any other sources that the **Madison County Sheriff's Office** deems appropriate.

I authorize the release of any information, whether the same is of record or not, and I authorize photostat or digital copies to be released to the **Madison County Sheriff's Office** pursuant to their investigation. A copy of this release shall be as valid as the original document. This information is to be used to assist the **Madison County Sheriff's Office** in determining my qualifications, eligibility, and fitness for the position of a certified Peace Officer in the State of Idaho or a supporting law enforcement or civilian position.

I also understand and agree that all information received by the **Madison County Sheriff's Office** in connection with this application and background investigation is confidential and shall not be disclosed to me. Further, I hereby release you, your organization or others, from any liability or damage which may result from furnishing the information requested.

Applicant's Signature	

Date	/	/
	/	

Witness's Signature _____

Witness's Name (Print) _____

Personal Information

Please complete the following as accurately as possible. All statements are subject to verification. *Incorrect statements may disqualify you from employment, and may prevent your application from being processed.*

Name (Last)	(First)	(Midd	le)
List any other names you have used or been known by (maiden or previous marriages, etc.)			
Current and any past addresses with	hin five (5) years.		
Driver's License #		State	
Do you have relatives or close friend by the Madison County Sheriff's Offi If yes, who	ce?	Yes N	lo
Are you a citizen of the United State Do you agree with wearing a uniform Are you able and willing to work rot Do you have previous experience w Have your employers always treated Were you ever terminated (fired) on If so, explain	m? tation shifts? ith shift work? d you fairly? r forced to resign?	Yes N Yes N Yes N Yes N	No No No No No
Have you ever been denied employr justice agency or rejected for a civil	ment by a criminal	Yes N (Date)	lo //
Have you taken an employment poly the previous six (6) months? If yes, for what agency or company?		Yes N (Date)	
Have you previously submitted an a the Madison County Sheriff's Office? If yes, for what position?	,	Yes N (Date)	lo

Criminal History (Attach additional sheets of paper if needed)

Have you ever been arrested or detained by law enforcement?			Yes No
(Date)	(Charge)	(Agency)	(Disposition)
(Date)	(Charge)	(Agency)	(Disposition)
•	used a marijuana pro was the last time?	oduct?	Yes No
•	used any illegal cont was the last time?	rolled substance?	Yes No
for you by a m	edical doctor?	that was not prescribed	Yes No
Have you ever	sold any amount of i	llegal drugs?	Yes No
Do you consur	ne alcohol?		Yes No
Do you have any relatives or close friends who have criminal felony convictions? Relationship to you For what crime(s) Where were they incarcerated			
Have you ever	had a financial judgn		Yes No
revoked in any		suspended or	Yes No
Have you ever been denied a driver's license in any state? If yes, explain			Yes No
Have you ever been placed on probation? If yes, explain			Yes No
List any traffic	c violations you have i	received.	
(Date)	(Charge)	(Agency)	(Disposition)
(Date)	(Charge)	(Agency)	(Disposition)
(Date)	(Charge)	(Agency)	(Disposition)

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(Date)	(Location)	(Agency)	(Cause of Accident)
(Date)	(Location)	(Agency)	(Cause of Accident)
(Date)	(Location)	(Agency)	(Cause of Accident)

List any motor vehicle accidents that you have been involved in as a driver.

Education

(Attach additional sheets of paper if needed)

High School				
-	(Name)	(Course of Study)	(Years)	(Diploma/Degree)
College				
	(Name)	(Course of Study)	(Years)	(Diploma/Degree)
	(Name)	(Course of Study)	(Years)	(Diploma/Degree)
Other (Specify)				
	(Name)	(Course of Study)	(Years)	(Diploma/Degree)
List any special	training you have rece	eived that would aid you in thi	s position.	
List any hobbies	s, special skills, or abili	ties you have including speak	ing foreign la	anguages.
Do you have co	mputer knowledge?		YesN	lo
•	yes, words per minute	2	YesN	

With proper training and supervision, are you capable of performing in a reasonable manner, **ALL** of the essential job functions required of you as a law enforcement officer, unassisted and without delay? <u>Yes____ No___</u>

Military

Have you ever served in th	e U.S. Armed Forces?	YesNo
-		Location
	Date of Discharge	
If no military, list selective		
	Employment His	<u>tory</u>
Are you currently employe	ed?	YesNo
May we contact your curre	ent employer?	YesNo
Date you would be availab	le for work//	
	p lete all information. Failure to do s ⁷ e will not look up phone numbers or a	
Employer		Telephone
Address		
Supervisor's Name		Telephone
Title or Position	Dates of Employ	rment/to//
Wage / Salary \$ /	Hr. or Yr. (Circle) Reason for leavi	ng
Employer		Telephone
Address		-
		Telephone
Title or Position	Dates of Employ	rment/to/

Employer	Telephone
Address	
Supervisor's Name	Telephone
Title or Position	Dates of Employment/to/
Wage / Salary \$	/ Hr. or Yr. (Circle) Reason for leaving

Wage / Salary \$_____ / Hr. or Yr. (Circle) Reason for leaving ______

		Telephone _				
Title or Position	Dates of Employme / Hr. or Yr. (Circle) Reason for leaving	ent/	_/	to	/	/
Employer		Telephone _				
Address						
Title or Position	Dates of Employme	ent/	_/	to	/	/
Wage / Salary \$	/ Hr. or Yr. (Circle) Reason for leaving					
	Dates of Employme / Hr. or Yr. (Circle) Reason for leaving	-	-		-	-
Employer	_	Telephone _				
Address						
Supervisor's Name		Telephone				
Title or Position	Dates of Employme	ent/	_/	to	/_	/
Wage / Salary \$	/ Hr. or Yr. (Circle) Reason for leaving					

<u>References</u>

List at least five (3) people who are not related to you, and are not former employers, who have known you closely for at least five (5) years. All persons to whom you refer may be asked to appraise your character, ability, experience, personality, and other qualities. *Please fill out this entire page completely.*

(Name)	(Address)	(Telephone)	(Occupation)	(Years Known)
(Name)	(Address)	(Telephone)	(Occupation)	(Years Known)
(Name)	(Address)	(Telephone)	(Occupation)	(Years Known)
(Name)	(Address)	(Telephone)	(Occupation)	(Years Known)
(Name)	(Address)	(Telephone)	(Occupation)	(Years Known)

Madison County Sheriff's Office Idaho P.O.S.T. Entry Level Patrol and Detention Deputy Physical Agility Standards

Each of the five PRT events measures a different component of physical fitness, each of which is a determinant of an officer's readiness to perform essential job tasks. To pass the PRT, a participant must score a minimum of 10 points on each of the five PRT events. Performance below the level required for 10 points in any event is substandard and results in failure of the PRT. Twenty points is the maximum possible for each event, a total of 100 being the highest possible PRT score.

<u>Fitness</u> <u>Category</u>	<u>Points</u>	<u>Vert. Jump</u> <u>(Inches)</u>	<u>1-Minute</u> <u>Sit-ups (Reps</u>)	<u>Pushups</u> <u>(Reps)</u>	<u>300 Meter</u> <u>(Seconds)</u>	<u>1.5 Mile</u> (Min:sec)
Excellent	20	21.5+	55+	62+	48.0-	9:57-
	19	20.5 - 21.0	51 – 54	56 - 61	48.1 - 51.0	9:58 - 10:50
	18	19.5 – 20.0	47 - 50	50 - 55	51.1 - 54.0	10:51 - 11:43
Good	17	18.5 – 19.0	43 - 46	44 - 49	54.1 - 57.0	11:44 - 12:36
Average	16	17.5 – 18.0	39 - 42	38 - 43	57.1 - 59.0	12:37 - 13:29
	15	16.5 – 17.0	35 - 38	32 - 37	59.1 - 62.0	13:30 - 14:20
	14	16.0	31 - 34	30 - 31	62.1 - 65.0	14:21 - 14:56
	13	15.5	27 - 30	28 – 29	65.1 - 68.0	14:57 - 15:32
Below Avera	ge 12	15.0	23 - 26	26 – 27	68.1 - 71.0	15:33 - 16:08
Minimum	11	14.5	19 – 22	23 – 25	71.1 - 74.0	16:09 - 16:43
Acceptable	10 *******	14.0	15 – 18 ********	21 – 22	74.1 - 77.0	16:44 – 17:17 ******
Substandard	0	<14.0	<15	<21	<77.0	<17:17