**2ND 25TH JUDICIAL DISTRICT COMMUNITY**

**SUPERVISION AND CORRECTIONS DEPARTMENT**

**INTERMEDIATE SANCTIONS FACILITY**

## THIS APPLIATION MUST BE FILLED OUT IN INK OR TYPED AND MUST BE COMPLETED

PROPERLY TO BE CONSIDERED:

|  |  |
| --- | --- |
| Position Applied For | Date of Application |

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| --- |
| Last Name First Name Maiden Name Middle Name |
| Address City State Zip Code |
| Telephone Number Social Security Number |
| Email address |

Have you ever filed an application with us before ? Yes \_\_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Yes, give date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you presently employed ? Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we contact your employer ? Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you prevented from lawfully becoming employed in this

country because of Visa or immigration Status ? Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date you will be available to start

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

Do you have a car available for full-time use ? Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can you travel if the job requires it ? Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, address, and phone number of person other than your spouse who would normally know how to contact you.

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

Show location where you can work, giving reasons for your preference.

Anywhere in the: City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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| EDUCATION |
|  | Name & AddressOf School | CourseOf Study | YearsCompleted | DiplomaDegree |
| ElementarySchool |  |  |  |  |
| HighSchool |  |  |  |  |
| UndergraduateSchool |  |  |  |  |
| Vocational orBusiness School |  |  |  |  |
| Other (Specify) |  |  |  |  |

Other information related to your educational background which you consider important to the position for

which you are applying:

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

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Describe any specialized training, apprenticeship, skills and extracurricular activities:

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

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| Indicate any foreign languages you can speak, read or write. |
|  | FLUENT | GOOD | FAIR |
| Speak |  |  |  |
| Read |  |  |  |
| Write |  |  |  |

Have you ever been fired or asked to resign in the last five years ? Yes \_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

If so, give details and name and address of company:

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

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Have you ever been convicted of any violation of law other than traffic offenses ?

Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_ If so, give details.

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

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Are there any charges pending against you at this time ? Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_

If so give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution?

 Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?

 Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?

 Yes \_\_\_\_\_ No \_\_\_\_\_

\*\***A new employee of the ISF has a continued affirmative duty to disclose any such previous misconduct and any misconduct thereafter.**

Indicate the types of work you would accept using “ Yes “, “ No “, or “ Maybe”.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ permanent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ temporary

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ full – time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ part – time

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ day work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ night work

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ weekends \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ work extra with compensation

 (time given in lieu of payment)

Explain those blanks marked “ No “ or “ Maybe “.

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

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| **Specialized Skills (Check Skills)** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Typewriter (Wpm) \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ WordPerfect\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_ Calculator \_\_\_\_\_\_\_\_\_\_\_\_ PC |

**EXPERIENCE -**  Start with your present or last job. Include any paid or unpaid, full or part – time,

military service assignments, summer jobs, etc**. NOTE:** May we contact any previous supervisors to

verify your description of past duties?

|  |  |
| --- | --- |
| Employer | Address & Phone Number |
| Starting Salary Ending Salary **Start Date:** | Name of Immediate Supervisor |
| Reason For Leaving**Date Left:** | Description of Duties |
| Employer | Address & Phone Number |
| Starting Salary Ending Salary**Start Date:** | Name of Immediate Supervisor |
| Reason For Leaving**Date Left:** | Description of Duties |
| Employer | Address & Phone Number |
| Starting Salary Ending Salary**Start Date:** | Name of Immediate Supervisor |
| Reason For Leaving**Date Left:** | Description of Duties |
| Employer | Address & Phone Number |
| Starting Salary Ending Salary**Start Date:** | Name of Immediate Supervisor |
| Reason For Leaving**Date Left**: | Description of Duties |

Other Qualifications:

If you need additional space, please continue on the back.

Give the names and addresses of three persons for reference (Other than relatives) who know you personally

and who are willing to certify to your **character**, **ability**, and **experience**. Do not use the name of former employers.

|  |  |  |
| --- | --- | --- |
| Name | Address | Phone Number |
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| Note to Applicant: DO NOT ANSWER 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 the activities involved in the job or occupation for which you have applied? A description of the activities involved in such job or occupation is attached.Yes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

I certify that answers given 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 six (6) months. Any applicant wishing to be considered for employment beyond this time period should notify us in writing.

I hereby understand and acknowledge that unless otherwise defined by applicable law any employment relationship with this organization is of an “at will” nature which means that the Employee my resign at any time and the Employer may discharge Employee at any time with or without cause. If is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview 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

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| **FOR PERSONNEL DEPARTMENT USE ONLY** |
| **Date Received Application**:  |
| **Arranged Interview** **Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Employed**  **Yes** **\_\_\_\_\_\_\_\_\_\_\_ No** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Names of People/Person Conducting Interview**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **NOTES:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |