

# PLATTE COUNTY SHERIFF'S OFFICE

**SHERIFF- STEVE KEIGLEY**  
**UNDERSHERIFF- GRADY WINDERS**



850 Maple St.  
 WHEATLAND, WY 82201  
 (307)322-2331  
[pcso@plattecountywv.org](mailto:pcso@plattecountywv.org)  
[www.plattecountysheriff.org](http://www.plattecountysheriff.org)

## ***APPLICATION FOR EMPLOYMENT***

We Consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age disability, marital or veteran status, or any other legally protected status.  
**(PLEASE PRINT)**

Position(s) Applied For:  
 Detention       Dispatch       Secretary       Nurse  
 Control       Patrol

How Did You Learn About Us?  
 Advertisement       Relative       Inquiry  
 Employment Agency       Friend       Other \_\_\_\_\_

Last Name	First Name	Middle Name			
Address	Number	Street	City	State	Zip Code
Telephone Number(s)			Social Security Number		
E-mail address - _____					

- Best Time to contact you at home is: ..... :..... AM-PM
- Have you ever filed an application with us before?.....  Yes  No  
 If Yes, give date \_\_\_\_\_
- Have you ever been employed with us before?..... Yes  No  
 If Yes, give date \_\_\_\_\_
- Do any of your friends or relatives, work here? ..... Yes  No
- Are you currently employed? ..... Yes  No
- May we contact your present employer? ..... Yes  No
- Are you at least 21 years of age?..... Yes  No
- Do you hold a High School Diploma or evidence of an equivalent achievement? ..... Yes  No
- Are you a United States Citizen? ..... Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status  
*Proof of citizenship or immigration status will be required upon employment*.....[  Yes [  No

Have you ever been convicted of a felony? .....[  Yes [  No

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \_\_\_\_\_

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

Do you have a Valid Driver's License? .....[  Yes [  No

What is your Drivers License Number and State in which it's from? \_\_\_\_\_

Have you ever had any Traffic Violations as in Driving Under Influence,  
Reckless Driving, Driving Under Suspension? .....[  Yes [  No  
If Yes, when? \_\_\_\_\_

Can you travel if a job requires it? .....[  Yes [  No

Are you able and willing to work rotating shifts, weekends and holidays? .....[  Yes [  No

Are you willing to work overtime-even mandatory overtime if needed? .....[  Yes [  No

Will you be able to work on a 24 hour call out emergency? .....[  Yes [  No

Are you able to work in a Tobacco-free workplace where it is prohibited to use tobacco  
products devices inside the facility? .....[  Yes [  No

Are you willing to work, "locked inside" a facility, unarmed and at times  
in direct contact with inmates .....[  Yes [  No

We work in a stressful environment. Can you handle verbal, and or physical abuse?  
As in intoxicated, angry or unruly inmates/citizens?.....[  Yes [  No

Have you or are you presently serving in the Military, Reserve, or National Guard? .....[  Yes [  No  
If Yes, What, When, Dates \_\_\_\_\_

Do you have a DD214? (Military Discharge).....[  Yes [  No

## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I have also read the job description and am fully capable of performing all duties required.

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.

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 may resign at any time and the Employer may discharge Employee at any time with or without cause. It 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(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations or the employer.

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

\_\_\_\_\_  
Date

# ***EMPLOYMENT EXPERIENCE***

1	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
2	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
3	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
4	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			

\*\*\* **“IDENTIFY ALL PERIODS”** of unemployment if more than one week in the last 10 years and the reason for it.

Reason for Unemployment	Start Date	Ending Date

# EDUCATION

	Name and Address of School	Course of Study	Years Completed	Graduated	Diploma-Degree
High School					
Undergraduate College					
Graduate Professional					
GED					
Other (Specify)					

## REFERENCES (NOT RELATIVES)

1. Name:	Phone: (     )
Address:	
Relationship:	Years Known:
2. Name:	Phone: (     )
Address:	
Relationship:	Years Known:
3. Name:	Phone: (     )
Address:	
Relationship:	Years Known:
4. Name:	Phone: (     )
Address:	
Relationship:	Years Known:

**Please add your resume to your job application, what is needed in the resume if applicable is:**

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

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

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

Summarize special job-related skills and qualifications acquired from employment or other experiences.

List, Including any computer knowledge and if any would be related to the position being applied for.

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