



CAMERON PARISH SHERIFF'S OFFICE
HUMAN RESOURCES DEPARTMENT

124 RECREATION LANE
POST OFFICE BOX 1250
CAMERON, LOUISIANA 70631

(337) 775-5111
Fax (337) 775-5211

Please provide the items below when returning this application. Items 1 - 4 are mandatory and should be copies not originals.

1. COPY OF BIRTH CERTIFICATE
2. COPY OF HIGH SCHOOL DIPLOMA OR EQUIVALENCY CERTIFICATE
ISSUE BY THE STATE DEPARTMENT OF EDUCATION
3. COPY OF YOUR SOCIAL SECURITY CARD
4. COPY OF YOUR DRIVER'S LICENSE WITH PHOTO
5. COPY OF TRANSCRIPT OF COLLEGE CREDITS OR DIPLOMA
6. COPY OF MILITARY DISCHARGE PAPERS (DD214)
7. COPY OF CERTIFICATES FROM ANY ADDITIONAL SCHOOLS



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The selection process outlined below should help you understand what is involved in the selection of new employees for the Cameron Parish Sheriff's Office.

- Completed applications with required attachments must be submitted to Human Resources in person or mail to PO Box 1250 Cameron, LA 70631.
- A thorough background check of every applicant is completed (usually requiring 2-3 weeks).
- As job openings become available, applicants with the best credentials, work experiences, and backgrounds may be selected for testing. Testing includes measurement of pre-employment skills, reading and math skills, and a polygraph.
- After the testing an applicant may be recommended for interview.
- Those not recommended to proceed in the selection process will be notified by formal letter that their application will be considered for future openings unless otherwise directed by the applicants.
- After applicants have been interviewed, tested, polygraphed, and recommended to proceed in the selection process, those applicants for enforcement position will undergo psychological testing before being offered employment.
- Those offered employment will be scheduled for medical exams and drug tests at the Sheriff's Office expense.
- If the medical exams and drug tests are satisfactory, the applicants are processed and become probationary employees.
- All applications are considered active for one calendar year and may be updated by the applicant as desired.
- Applicants may reapply after one year, or may apply for additional positions during the active period of the application.
- Applicants who proceed through the entire selection process must be prepared to allow a minimum of six weeks for completion of the entire process.

3. List all relatives employed by the Cameron Parish Sheriff's Office

FULL NAME	RELATIONSHIP	DEPARTMENT

4. Character references: List three (3) persons (not employers or relatives) who know you well enough to give current or former information about you.

NAME	OCCUPATION	ADDRESS/ STREET, CITY, STATE	HOME PHONE	BUSINESS PHONE

5. Are you trained on office machines, computers, or software? If yes, please explain below.

6. Have you ever applied for a position with the Cameron Parish Sheriff's Office? Yes _____ No _____

If yes explain _____

7. Have you ever been terminated from any job or position? Yes _____ No _____

If yes, which employer: _____

8. Have you ever received a traffic citation or been involved in a traffic accident?

List City - State - Agency

Yes _____ No _____ If yes, explain _____

Yes _____ No _____ If yes, explain _____

Yes _____ No _____ If yes, explain _____

9. Have you ever been arrested or convicted of a felony? Yes _____ No _____

If yes, please explain: _____

10. List all misdemeanor arrests and / or convictions below:

DATE	CHARGE(S):	DETAINING OR ARRESTING DEPARTMENT	PENALTY

11. Have you ever had charges expunged from your record? Yes _____ No _____

If yes, explain: _____

12. Have you ever been convicted of the crime of domestic violence? Yes _____ No _____

If yes, explain: _____

13. Do you hold any personal or religious beliefs that would prevent you from taking a human life if it became necessary in the line of duty?

Yes _____ No _____

14. Have you ever served in any branch of the United States Armed Forces or other military organization?

Present draft classification: _____

YES	NO	ORGANIZATION	ENLISTMENT DATE	DISCHARGE DATE	TYPE	RANK

15. Certain deputies may be required to attend the Regional Law Enforcement Academy. This training is extensive, intense, and requires total commitment by the trainee. Will you obey all rules, regulations of the Academy?

Yes _____ No _____

16. Are you a United States Citizen? Yes _____ No _____

By Birth? Yes _____ No _____ Naturalized? Yes _____ No _____

17. Have you ever been involved in the use, purchase, possession, distribution or sale of controlled dangerous substances except as perscribed by a Licensed Physican (including Marijuana)? Yes _____ No ____ If "Yes," explain:

18. I acknowledge that if I become employed, I will be free to terminate my employment at any time for any reason and the Sheriff's Office retains the same rights.

_____ **Initial**

19. If your position requires you to attend the Regional Law Enforcement Training Academy, you must pass the Entry Level Policy for Physical training for the Physical Fitness Testing based on Louisiana P.O.S.T. council.

_____ **Initial**

20. I declare that the information provided by me in this application is true, correct, and complete to the best of my knowledge. I understand that if employed, any falsification, misstatement, or omission of fact in connection with my application, whether on this document or not, may result in immediate termination of employment.

_____ **Initial**

21. I _____ do hereby grant my permission to all present and former employers, health service providers, references, and law enforcement agencies to release to the Cameron Parish Sheriff's Office and it's officers all verbal and written information in their possession that pertains to me.

22. I _____ do hereby certify that a photocopy of this document shall serve as an original for the purpose of releasing information to the Cameron Parish Sheriff's Office and its administrative officers.

23. I _____, do hereby understand that this document is an application only and that the completion hereof does not imply or state a condition of future employment.

24. TO BE COMPLETED BY APPLICANT:

The Civil Rights Act of 1963, the Civil Rights Act of 1967, and The Americans with Disabilities Act of 1990 prohibit discrimination in employment based on: Race, Color, Religion, Sex, National Origin, Age, and Disabilities.

I, _____, have applied for employment with the Cameron Parish Sheriff's Office. I understand that completion of the application process requires that a personal background check be made by the Cameron Parish Sheriff's Office. I hereby authorize the Cameron Parish Sheriff's Office or its designated agents to investigate my previous record and character to collect any and all information, whether it is of record or not, that may concern my eligibility for employment.

This authorization includes, but is not limited to, criminal history, bank, credit, school, selective service, physical, hospital, health, insurance, or employment records, and releases any person, organization or corporation from any charges or claims for furnishing said information. A copy of this authorization shall be considered as effective and valid as the original. It is my desire for this authorization to be ongoing. It is my intent that the Cameron Parish Sheriff's Office be allowed to run periodic checks, at their discretion, during the course of this application and if hired, the life of my employment.

My signature below also indicates that I have received a copy of the summary of the selection process and that it is my responsibility to read and direct relevant questions to Human Resources.

Signature

Date

Note: This application will be retained for one (1) year.

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EQUAL EMPLOYMENT OPPORTUNITY REPORTING DATA

The data provided below is collected for the purpose of meeting governmental record keeping and reporting requirements. Providing this data is optional. This data is not considered to be part of the formal application and it is stored separately in a confidential file. This data does not impact employment decisions.

Racial/Ethnic Group

White

Asian/Pacific Islander

Black

American Indian/ Alaskan Native

Hispanic

Other

Sex: Male

Female

Birthday: _____

(Last Name)

(First Name)

(Middle Name)

**CAMERON PARISH SHERIFF'S OFFICE
RON JOHNSON, SHERIFF
124 RECREATION LANE
PO BOX 1250 CAMERON, LA 70631**

Authorization For Release of Information to the Cameron Parish Sheriff's Office

Last Name, First Name, Middle Name

Date of Birth

Address

Telephone

City, State, Zip

Social Security Number

To Whom It May Concern: I am an applicant for a position with the Cameron Parish Sheriff's Office. The Sheriff's Office needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold and maintain the position for which I applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the Cameron Parish Sheriff's Office.

I hereby authorize any representative of the Cameron Parish Sheriff's Office bearing this release to obtain any information in your files pertaining to my employment and or criminal record and hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Cameron Parish Sheriff's Office, whether said records are of public, private or confidential nature. These records include but are not limited to educational insitutions, credit bureaus and retail establishments, medical and psychological consultations and or treatments, including those of hospitals, clinics, private practitioners, veteran's administration, and all military and psychiatric facilities, public utility companies, and other employers. The intent of the authorization is to give my consent for full and complete disclosure. I reiterate and emphasize that the intent of this authorization is to provide full and free access to background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data for the Cameron Parish Sheriff's Office to consider in determining my suitability for original and continued employment in the department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and reputation, my military service records, and any information contained in investigatory files, efficiency rating, complaints or grievances filled by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed.

I hereby release you, your organizations, and all others from liability or damages that may result from furnishing the information requested, including any liability or damages pursuant to any state or federal laws. I hereby release you, as the custodian of such records and your organization, including its officers, employees, or related personnel, both individually and collectively from any and all liability for damages of whatever kind, which may at anytime result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct you to release such information upon request of the duly accredited representative of the Cameron Parish Sheriff's Office regardless of any agreement I may have made with you previously to the contrary. The Cameron Parish Sheriff's Office will discontinue processing my application if the information, pursuant to this release , is not disclosed upon their representative's request.

For and in consideration of the Cameron Parish Sheriff's Office acceptance and processing of my application for employment, I agree to hold the Cameron Parish Sheriff's Office, its agents and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me with the Cameron Parish Sheriff's Office. I understand that should information of a criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Cameron Parish Sheriff's Office in conjunction with employment procedure. Additionally, I understand that the Louisiana Freedom of Information Act (Louisiana Sunshine Law) provides me the right to request access to and disclosure of records related to my application for employment with the Cameron Parish Sheriff's Office. Hereby waive my right to request access to or disclosure of information obtained by the Cameron Parish Sheriff's Office during background investigation portion of the application process, including information provided pursuant to this signed Authorization for Release of Information.

A photocopy or FAX copy of this release form will be valid as an original thereof, even though, the said photocopy or FAX copy does not contain an original writing of my signature.

This waiver is valid from the date of my signature until my eligibility for original or continues employment is discontinued. Should there be any questions as to the validity of this release, you may contact me at the address listed on this form. I agree to indemnify and hold harmless the person to whom this request is presented and their agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out or by reason of complying with this request.

Applicant Signature: _____ **Date:** _____

Applicant Name Printed: _____

Witness Signature: _____

Witness Name Printed: _____