

# INFORMATION FOR EMPLOYMENT DEPUTY JAILER

#### PURPOSE AND USE

The principle purpose of the information forms is to collect information needed to determine qualifications, suitability and availability of applicants for employment as a Deputy Jailer. Your completed form may be used to examine, rate and/or assess your qualifications and contact you concerning availability and/or interview.

#### EFFECTS OF NONDISCLOSURE

Because the employment information forms request both optional (other skills, training, social security number, etc) and mandatory data (qualifications and biographical information, etc), it is in your best interest to answer all questions. Omission of an item means you may not receive full consideration for a position. Omission of information may also be grounds for not employing you, or for dismissing you after you begin work. All statements are subject to investigation, including a check of your finger prints, police records and former employers. All information you give will be considered in reviewing your application.

#### **NOTICE**

Incomplete information will result in a delay in the processing of your application.

## Boyd County Detention Center

William D. Hensley, Jailer 209 28th Street Ashland, KY 41129-Office 606-739-4224-Fax 606-989-2102

## APPLICANT'S STATEMENT

I agree to submit to and satisfactory pass pre-employment drug screen by a qualified party of the detention center's choosing. I also agree to submit to random drug testing on a mandatory basis.

I understand, if accepted for employment, that this application does not constitute an employment contract, expressed or implied. An individual's employment and compensation can be terminated at any time at the option of either the Boyd County Detention Center or the employee.

I authorize all persons, schools, current employer, previous employers and organizations named in this application (and accompanying resume, if any) to provide the Boyd County Detention Center with any relevant information that may be required to arrive at an employment decision. I authorize the detention center to conduct an NCIC background check and investigate my driving record, criminal history and any other pertinent information as is necessary to arrive at an employment decision, in accordance with applicable detention center policy, procedure and law. I agree to cooperate in such investigations and release those parties supplying such information to the detention center from all liability or responsibility with respect to information supplied. I authorize the detention center to contact any and all personal and previous employment references I provide.

I understand that I will receive certification for OC Pepper Spray and understand that to receive certification I must be exposed to the OC Pepper Spray. I understand that all employees are subject to a 365 day training period (which may be extended).

I agree to abide by the policies, procedures and directives of the employer. I acknowledge that such policies, procedures and directives may be changed, interpreted, withdrawn, or added to by the employer at any time, at the employer's sole option and without any prior notice to me.

I agree to conform to Boyd County Detention Center's rules and regulations, policies and procedures, I understand and agree that while employed at the Boyd County Detention Center I am not permitted to visit, converse or contract favors of any type to any inmate(s) or family member of inmate(s) incarcerated at the Boyd County Detention Center.

olicant's signature	Date	
Below for Boyd County Staffuse	only:	
Application Received:		
Application Reviewed:	S	
Scheduled For Interview:		
NCIC Complete:	-	
Drug Screen:	Section 11 Control 1	
References Completed	-	
Applicant Contacted:	×	
Hiring Date:	-	

IF EMPLOYED FOR LESS THAN ONE YEAR, I AGREE TO THE REIMBURSEMENT OF TRAINING EXPENSES, UNIFORMS AND REPLACEMENT COSTS IN THE AMOUNT OF \$2,425.00. I ALSO ATTEST I WILL BE LIABLE FOR ANY COSTS OF ATTORNEY'S FEE REASONABLY INCURRED FOR THE COLLECTION OF THIS DEBT. I UNDERSTAND AND AGREE THAT THE REIMBURSEMENT OF THESE COSTS MAY BE DEDUCTED FROM ANY FUNDS / PAY OWED TO ME BY THE COUNTY UPON MY SEPARATION.

	Cost Analysis Associated with Employment
Uniform	\$1,500.00
Replacement Uniforms	\$ 290.00
Training Expenses	\$1,290.00
(Basic jailer, CPR, First Aid)	
Drug Test	\$ 35.00
Total	\$2,425.00
Print Name	
Signature	
2.5n.m.v	
Date	

#### BOYD COUNTY DETENTION CENTER

## **EMPLOYMENT INFORMATION – FULL TIME**

## Pre-Employment Conditions

#### Applicants Must:

- •Must be at least twenty-one (21) years of age
- •Must be a high school graduate or possess a GED
- •Discharged under honorable conditions, if served in military
- •Is not prohibited by federal or state law from possessing a firearm
- •Must be able to read and write the English language
- •Attend and successfully complete twenty-four (24) hours
- of Correctional Training per year
- •Must possess valid motor vehicle operator's license
- •Must successfully complete a criminal, driving, medical history, drug screen and employment background check
- •Submit to Random Drug screens
- •Must maintain a high level of physical fitness

#### Hazardous Floor Deputy Applicants must also:

Agree to Taser impact

Agree to Pepper Spray exposure

Be able to work all shifts

Able to pass weapons training

## Employment Benefits / Training

Health ins. - partial premium paid by county Dental ins. - Paid by employee at group rate

Retirement – Eligible for County Retirement Plan

401 K Available Uniforms provided

80 hours orientation training 24 hours annual training Field Training Program

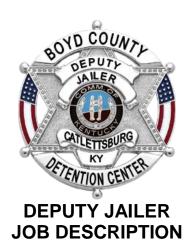
Shift assignment will be subject to facility needs

#### Salary

Boyd Detention Center Salary Scale

Title	Years of Exp.	Hourly	Yearly
Deputy	(training)	\$19.13	\$39,714
Deputy I	1-5 years	\$21.22	\$44,165
Deputy II	5-10 years	\$23.88	\$49,666
Deputy III	11 years +	\$25.47	\$52,956
Sgt:		\$28.85	\$60,000
Lt.		\$33.65	\$70,000

App.	lıcant	S	Signa	ature
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#### **Position Summary**

Responsible for the care and custody of inmates in accordance with statutory and Boyd County Detention Center requirements.

#### **Essential Duties and Responsibilities**

Maintain discipline over inmates; admittance and booking of inmates to Detention Center; escort inmates to and from court or other required appointments; assist in the cleaning and sanitation of the Detention Center, keep records and make reports verbally and in writing. Under supervision, this position also supports the department by performing other work as assigned. The position requires shift work including nights, weekends and holidays and is subject to call back within 24 hours if the needs of the facility require it. Additional duties included but are not limited to:

Is a sworn peace officer

Carries a firearm in the course of duty.

Be able to perform all tasks related to in and out processing of inmates

Arrange for the inmates to attend court

Supervise the general cleaning of the Detention Center

Supervise the distribution of inmate meals

Specifically supervise the cleaning of inmate cells

Transport inmates to doctor, dentist, hospital or other appointments Process work release inmates out and back in to the Detention Center

Search work release inmates and other inmates for contraband

Search cells periodically for contraband

Serve and file warrants

Use and monitor a two-way radio

- Meet and deal effectively and courteously with the public
- Process and account for money received for bonds, fines, etc.
- Maintain daily logs and records as required
- Culminate an arrest on Detention Center property when necessary
- Write offense citations accurately
- Mark and disperse evidence properly
- 20) Testify in court
- Assist all law enforcement agencies in a cooperative manner
- Be familiar with previous shift's activities and be able to pass-on information to on-coming shift personnel

#### Qualifications

To perform this job successfully, an individual must be able to perform each essential duty satisfactory. The requirements listed below are representative of the knowledge, skill and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

#### Education/Experience

Completion of a high school education or equivalent; or any equivalent combination of training and experience which provides the required knowledge, skills and abilities. Must be at least 21 years of age and possess a valid Kentucky Driver's License.

Must not have been convicted of a felony or misdemeanor, excluding traffic violations and/or minor convictions. It is at the discretion of the Jailer as to whether such violations and/or convictions are related to the job and are a basis for rejection of an employment application.

Subject to an extensive background check. May be required to undergo psychological and/or other pre-employment testing. In addition, he or she must possess a high degree of integrity and be a sober, order and law-abiding citizen. Individuals with histories of offenses of assault and/or sexual abuse will not be eligible for employment consideration.



### Boyd County Detention Center William D. Hensley, Jailer 209 28th Street Ashland, KY 41129-Office 606-739-4224-Fax 606-989-2102

## **BOYD COUNTY DETENTION CENTER**

An Equal Opportunity Employer
APPLICATION FOR EMPLOYMENT

It is the policy of the Boyd County Detention Center to provide employment, training, compensation, promotion, and other conditions of employment based on qualifications, without regard to race, color, religion, national origin, sex, age, marital or veteran status, the presence of non job-related disability, or any other legally protected status.

(Print Only)							
				Date of A	Application		
Last Name		First N	ame			Middle	e Initial
Name you go by		Date of	f Birth_	Age_		Male	Female
Street Address			City		State		Zip Code
Telephone number (s)		_	Social	Security No.			
Cell phone number (s)		_	E-mail	l address			
How did you find out about job openings wi	thin our facility?						
JOB INTERESTS							
Type of employment seeking (choose one):	Full tin	ne		Part time			
Position seeking (choose one or more):	Sworn	Deputy		Admin/Clerical			
Date available for employment:		_					
Currently employed?	Yes	No _					
EDUCATION AND TRAINING	Addres	<u>s</u>		<u>Degree</u>			Grade Completed
High School				_			
College							
Graduate School							
Apprentice, business, technical, military or v	ocational school						
Other training or skills (factory or office ma	chines operated,	special co	ourses, n	nilitary training, etc.)	)		
Describe any honors received							

#### OTHER JOB-RELATED ACTIVITIES

List professional, trade, business or civic activities and office national origin, age, ancestry, or other protected status.	•		
SPECIAL SKILLS AND QUALIFICATIONS			
Summarize special job-related skills and qualifications acqu	ired from employment or other experie	ence.	
MILITARY			
Have you served in the military? Yes No _	Branch of service		
Final rank Type	e of discharge		
Nature of Duties and / or special training received:			
Honors or special awards:			
Copy of DD214 Attached: Yes	No If no reason:		
Have you ever previously been employed at the Boyd Co	ounty Detention Center:		
If yes when and reason for departure			
EMPLOYMENT HISTORY Start with the present or last job and provide a complete job further details. Explain any gaps in employment in comme		sume with th	ne application to provide
Employer	Dates worked:	From	To
Address			Per
Job title			Per
Supervisor/Dept.			
Reason for leaving			No
Employer	Dates worked:	From	To
Address	Starting salary:	\$	Per
Job title	Final salary:	\$	Per
Supervisor/Dept.	Phone number		
Reason for leaving		Yes	No
Employer	Dates worked:	From	To
Address	Starting salary:	\$	Per
Job title	Final salary:	\$	Per
Supervisor/Dept.	Phone number		
Reason for leaving	May we contact?	Yes	No
Employer	Dates worked:	From	To
Address			Per
Job title		\$	
	1 III at Salat y .	Ψ	1 V1

Supervisor/Dept			Phone number			
			May we contact? Yes No			
Emplo	yer		Dates worked:	From	To	
Address			Starting salary:	\$	Per	
Job tit	le		Final salary:	\$	Per	
Supervisor/Dept.		t	Phone number			
Reason	n for leav	ing	May we contact?	Yes	No	
Emplo	yer		Dates worked:	From	To	
Addre	SS		Starting salary:	\$	Per	
Job tit	le		Final salary:	\$	Per	
Superv	Supervisor/Dept.	t	Phone number			
Reason	n for leav	ing	May we contact?	Yes	No	
relativ  1	es or prev	ntime telephone number and the best time to contact five peoperious employers.		-		
3						
4						
5						
Do yo	u know aı	nyone who works at the Boyd County Detention Center? No	Yes (lis	st names)		
<u>YES</u>	<u>NO</u>	Are you 21 years of age or older? Do you have a valid driver's license? Do you have a high school or GED diploma? Do you have a Social Security card? Are you legally eligible for employment in the U.S.? Can you provide documentation verifying your eligibility? Are you able to perform the essential duties and responsible without accommodation? Since the age of 18, have you ever been charged with or configure in the provided provided in the provided provided in the provided provided provided in the provided provi	nvicted of a misdeme	anor or felo	ny?	

Applicant's signature		Date	
A1:			
I understand that any false information immediate discharge if I am employed.			
What do you hope to accomplish with t	his type of career?		
Where do you see yourself in 5 years?			
What are your weaknesses (Describe)?			
What are your strongest assets:			
Write a statement on why you would be	e the best person to be chosen a	s a deputy jailer at BCDC?	
Are you available to work any shift and	day of the week? Yes 1	NO	
	ed an administrative or civil pu pove questions, please provide of		
Have you been convi	sexual abuse and/or sexual mis	e and/or sexual misconduct?	•
PREA Standard 115.17			

### **Boyd County Detention Center**

### **Pre-employment Consent Form**

I agree to submit to pre-employment drug testing as required by Boyd County Detention Center Policy. I understand that the specimens I provide will be analyzed for the presence of drugs. I authorize release of the test results to the Boyd County Detention Center officials. I understand my employment is contingent upon passing the pre-employment test.

I understand that the Boyd County Detention Center has a "zero-tolerance" policy with respect to abuse of drugs and alcohol and that ongoing compliance is a condition of employment. I agree to comply and understand that violation of the regulation or policy may result in penalties up to and including dismissal.

<u>X</u>	
Signature	Date
X	
Witness	Date

## **Boyd County Detention Center**

### Request for Local & NCIC Record Check

Please fill out upper portion of form

Name:				
	(Last) (F	irst)	(Middle)	(Maiden)
Present Addre	ess:		<del></del>	How long?
Previous Add	ress:			How long?
				Hair color
	Birth date	Height		_ Weight
	Place of birth			
	Drivers License number_			Driver's OL State
	Social Security number _			
Official use on	lly			
Date of Reque			ECPIC	official
Kentucky State	e Police results:		1.6.11.3	THE COLUMN TO TH
The above na	med person had been che	cked and our file	s reveal:	
	Traffic Arrest	Yes	No	
	Accidents:	Yes	No	
	Criminal Arrest:	Yes	No	
	Details of Arrest Attache	d Yes	No	
Remarks:				
Date:		Signe	d:	Central Records

# **NOTICE**

Withholding or failure to provide accurate and truthful information on this application shall be grounds for immediate termination of employment. All prospective employees will have a criminal background check run and all new employees shall have a drug screen performed.

Signature:	Data
Signature:	Date:
515114ta1 C1	Batci