



# Blount County Sheriff's Office Applicant Personal History Statement



Revised October 2017

NAME \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

I am applying for:

Patrol Officer

Corrections Officer

Other/Reserve

## Personal History Statement Instructions

Employees are exposed to confidential and law enforcement sensitive information. A thorough background investigation is required to properly evaluate the suitability of applicants for employment with the agency. Although it is an achievement to reach the background phase of the hiring process, this is still a competitive process and does not, in any way, guarantee selection.

These instructions are provided as a guide to assist you in properly completing your Personal History Statement. **IT IS ESSENTIAL THAT THE INFORMATION IS ACCURATE AND COMPLETE IN ALL RESPECTS SO PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE PROCEEDING.** The Personal History Statement will be used as a basis for a background investigation that will determine your eligibility for employment.

1. Your personal history statement must be typed or printed legibly in **BLACK INK**. Answer all questions truthfully and accurately.
2. If a question is not applicable to you, enter **NO** or **NONE** in the space provided.
3. Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is accurate and in proper sequence before you begin.
4. You are responsible for obtaining correct and full addresses. If you are not sure of an address, personally verify before making that entry on the history statement. **ALL ADDRESSES MUST BE COMPLETE WITH ZIP CODES.**
5. If you need additional space for your answers, make an additional copy of the exact page to complete the requested information, and fill in only the necessary information.
6. An accurate and complete form will help expedite your investigation. **Omissions or falsifications** will result in **disqualification**.
7. You are responsible for furnishing any changes and/or updating your application as needed, such as address changes or telephone changes in writing.
8. Any candidate submitting an incomplete application or incomplete Personal History Statement **WILL NOT BE CONSIDERED FOR EMPLOYMENT.** You **will be evaluated on accuracy, completeness, neatness, and information submitted.**
9. Below is the list of the required documents needed for testing.
  - Valid driver's license - 1 color copies
  - Social Security card - 1 color copies
  - Birth certificate - 1 copy
  - Official U. S. high school transcript or GED or diploma - 1 copy
  - Military DD Form 214, Long Form (if applicable) - 1 copy
  - Original military NGB-22 (if applicable)
  - (If the applicant is still in the military, a statement of service letter from the applicant's Commanding Officer stating the applicant is in good standing, date of enlistment, date of end of active service, and projected honorable discharge.)
  - Original naturalization document, if applicable (No photo copy)
  - Final dispositions on arrests, if applicable (obtained by calling the court of ruling to obtain certified copy) - certified copy
  - Final dispositions of citations received within the previous 1 year (obtained by calling court where citation was issued. Will show how the citation was cleared – paid, dismissed, community service etc.)
10. If you have any questions, please contact Blount County Sheriff's Office (865) 273-5000, and ask for Human Resources or Administrative Assistant.

## Applicant Qualification Section

Before you begin completing this personal history statement, please ensure that you meet the following requirements. You must meet all of these requirements to qualify for licensure as a peace officer or jailer in Tennessee.

### INITIAL      REQUIREMENTS

- \_\_\_\_\_ 1. I am a citizen of the United States of America.
- \_\_\_\_\_ 2. I have earned a high school diploma or a GED.
- \_\_\_\_\_ 3. I have never been convicted, plead guilty (nolo contendere), nor have I been on court-ordered community service/probation or deferred adjudication for any misdemeanor or a felony.
- \_\_\_\_\_ 4. During the last ten (10) years, I have not been convicted, plead guilty (nolo contendere), been on community service/probation or deferred adjudication for any misdemeanor in this state, other state, or while serving in the military.
- \_\_\_\_\_ 5. I have never had a military court martial that resulted in a dishonorable or bad conduct discharge.
- \_\_\_\_\_ 6. I am at least 21 years of age (required for Patrol applicants).
- \_\_\_\_\_ 7. I have a valid, current driver's license.

## Disqualification

There are very few automatic bases for rejection. Issues of prior misconduct, employee terminations, and arrests are usually not, in and of themselves, automatically disqualifying. However, deliberate misstatements or omissions can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals "fail" background investigations is because they deliberately withhold or misrepresent relevant information from their prospective employer.

This personal history statement is a governmental document. Be truthful, as there are criminal consequences for lying on a governmental document.

# Applicant Identification

INFORMATION PROVIDED IN THIS SECTION IS USED FOR IDENTIFICATION PURPOSES ONLY.

Last Name	First	Middle	Maiden
Street Address		Apt. No.	
City		State & Zip Code	
Mailing Address (if different from residence)		State & Zip Code	
Home Telephone No.	Email Address	Cellular No.	
Date of Birth	Social Security No.	Drivers License No. & State	

Have you ever been known or gone by any other name (excluding nick-names)? If yes, give details.

\_\_\_\_\_

Place of Birth (City, County, State, Country) \_\_\_\_\_

Are you a U.S. Citizen by Birth? \_\_\_\_\_ Are you a Naturalized Citizen? \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

Scars, Tattoos (description and location) or other distinguishing marks \_\_\_\_\_

\_\_\_\_\_

**NOTE:** All tatoos must be covered while on duty and/or in uniform.

Do you have a social networking, instant messaging, or other internet-based profile(s)? If yes, provide screen name(s), service provider(s). \_\_\_\_\_

\_\_\_\_\_

List ALL E-Mail Addresses


# Marital & Family History

For your spouse/co-inhabitant, please provide the following information:

Single \_\_\_\_\_ Married \_\_\_\_\_ Engaged \_\_\_\_\_ Co-habiting \_\_\_\_\_

Name (include maiden name) \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Marriage \_\_\_\_\_

Employer(s) \_\_\_\_\_

Employer Address \_\_\_\_\_

Home Telephone No. \_\_\_\_\_ Work Telephone No. \_\_\_\_\_

If you have been separated, divorced, or widowed, provide details below:

Date of Marriage \_\_\_\_\_

City & State \_\_\_\_\_

Separated \_\_\_\_\_ Date \_\_\_\_\_

Divorced \_\_\_\_\_ Date \_\_\_\_\_

Widowed \_\_\_\_\_ Date \_\_\_\_\_

Annulled \_\_\_\_\_ Date \_\_\_\_\_

Court or State issued \_\_\_\_\_

Ex-spouse's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Telephone No. \_\_\_\_\_

Date of Marriage \_\_\_\_\_

City & State \_\_\_\_\_

Separated \_\_\_\_\_ Date \_\_\_\_\_

Divorced \_\_\_\_\_ Date \_\_\_\_\_

Widowed \_\_\_\_\_ Date \_\_\_\_\_

Annulled \_\_\_\_\_ Date \_\_\_\_\_

Court or State issued \_\_\_\_\_

Ex-spouse's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Telephone No. \_\_\_\_\_

Identify children related to you or your spouse (Biological, Step-Children, Adopted, or Foster Children)

Relation	Name	Date of Birth	Mother's / Father's Name



## Personal References

List your best friend and three (3) persons who know you well enough to provide current information about you. Do not list relatives, former or present employers, or supervisors.

Best Friends Name \_\_\_\_\_ Years known \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Alternate Telephone \_\_\_\_\_

Best Friend DOB \_\_\_\_\_ Race/Sex \_\_\_\_\_ E-mail Address \_\_\_\_\_

Name \_\_\_\_\_ Years known \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Alternate Telephone \_\_\_\_\_

Nature of Relationship \_\_\_\_\_ E-mail Address \_\_\_\_\_

Name \_\_\_\_\_ Years known \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Alternate Telephone \_\_\_\_\_

Nature of Relationship \_\_\_\_\_ E-mail Address \_\_\_\_\_

Name \_\_\_\_\_ Years known \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Alternate Telephone \_\_\_\_\_

Nature of Relationship \_\_\_\_\_ E-mail Address \_\_\_\_\_

Identify below any employees of the Blount County Sheriff's Office with whom you are acquainted or to whom you are related, and note the relationship.

\_\_\_\_\_

\_\_\_\_\_

## Traffic Record

Identify all vehicles that you currently own or operate:

Year	Make	Model	Color	License Plate No.	Owner

Please list your current automobile insurance carrier: \_\_\_\_\_ Expires: \_\_\_\_\_

Have you ever possessed a driver's license issued by any state other than Tennessee? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give details below:

Driver's License No. \_\_\_\_\_ State \_\_\_\_\_ Date issued \_\_\_\_\_

Driver's License No. \_\_\_\_\_ State \_\_\_\_\_ Date issued \_\_\_\_\_

Have you **ever** had your driver's license suspended or revoked? Yes \_\_\_ No \_\_\_ If yes, give reason, date, length of suspension, and jurisdictions: \_\_\_\_\_

Identify all motor vehicle accidents you have been involved in during the last 10 years.

Date	Location	Police Report: Yes/No
Cause of Accident (e.g., ran red light, failed to control speed)		
Date	Location	Police Report: Yes /No
Cause of Accident (e.g., ran red light, failed to control speed)		



*BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT*

Identify all traffic citations and warning citations you have received within the last 10 years, excluding parking tickets:

Month/Year	Violation	City & State	Disposition (e.g., defensive driving, dismissed)

### Arrests, Detentions, and Litigation

Have you ever been arrested or detained by law enforcement?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, complete the following table:

Agency	Offense	Date	Location	Outcome

Have you **ever** committed an act of family or domestic violence? (“Family or domestic violence” means an act by a member of a family or household against another member of the family or household that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places the member in fear of imminent physical harm, bodily injury, assault, or sexual assault, but does not include defensive measures to protect oneself.) If yes, explain when, where, circumstances and other persons involved: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

Have you **ever** assaulted another person since the age of seventeen (17)? ("Assault" means to cause bodily injury to another, threaten another with imminent bodily injury, or to cause physical contact with another when the person knows or should reasonably believe that the other will regard the contact as offensive or provocative.) If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Have you **ever** been considered or named as a suspect in a criminal investigation or criminal offense? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Have you **ever** been a party to a civil suit or action? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Have you **ever** been involved in any incident (do not include vehicular accidents) in which a police report was made or law enforcement was called? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever committed - or assisted another person in the commission of - a felony crime, serious misdemeanor, or a crime involving moral turpitude that went undetected or unreported to law enforcement? Please include juvenile offenses/charges and convictions that have been expunged. If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Do you anticipate being sued or named in any type of lawsuit or proceeding? Yes\_\_\_\_\_ No \_\_\_\_\_

### Family and Relatives' Arrests

Have members of your immediate family (parent/sibling) ever been arrested?

Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, complete the following table:

Name/Relationship	Charge/Offense	Outcome	Year	Agency

Identify any person or entity to whom you owe money, and the extent of your indebtedness. Include mortgages, vehicle payments, charge accounts, credit cards, loans, child support payments, and any other debts or payments.

Name of Creditor (e.g., Sears, Citi financial)	Type of Debt (e.g., student loan, automobile)	Monthly Payment	Approx Balance

### Credit Information

Have you **ever** filed bankruptcy personally or on behalf of a business? Yes \_\_\_ No \_\_\_

If "Yes" to above, indicate type \_\_\_\_\_

Have you **ever** had any personal or real property repossessed or foreclosed? Yes \_\_\_ No \_\_\_

Have you **ever** failed to pay Federal, state, or other taxes? Yes \_\_\_ No \_\_\_

Have you **ever** failed to file a tax return, when required by law? Yes \_\_\_ No \_\_\_

Have you **ever** had a lien placed against your property for failing to pay taxes or other debts? Yes \_\_\_ No \_\_\_

Have you **ever** had a judgment entered against you? Yes \_\_\_ No \_\_\_

Have you **ever** defaulted on any type of loan? Yes \_\_\_ No \_\_\_

# Employment History

**BEGINNING WITH YOUR PRESENT OR MOST RECENT JOB:** list all employment including active military service duty for the last 10 years. Include full-time, part-time, temporary, seasonal, military assignments, paid or unpaid internships, plus all periods of unemployment. Do NOT provide 1-800 numbers - Do provide a current cell # or direct dial # and extension, for previous and current supervisors.

If you are currently employed, may we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

1. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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

Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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

Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_

\_\_\_ Voluntary resignation: \_\_\_\_\_

\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_

\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide dates and explain: \_\_\_\_\_

\_\_\_\_\_

BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

2. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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

Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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

Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_

\_\_\_ Voluntary resignation: \_\_\_\_\_

\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_

\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above?

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

If yes, provide dates and explain: \_\_\_\_\_

\_\_\_\_\_

BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

3. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_

\_\_\_ Voluntary resignation: \_\_\_\_\_

\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_

\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above?  
Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide dates and explain: \_\_\_\_\_

\_\_\_\_\_

BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

4. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_

\_\_\_ Voluntary resignation: \_\_\_\_\_

\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_

\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide dates and explain: \_\_\_\_\_

\_\_\_\_\_

BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

5. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_

\_\_\_ Voluntary resignation: \_\_\_\_\_

\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_

\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above?

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

If yes, provide dates and explain: \_\_\_\_\_

\_\_\_\_\_



BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

6. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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

Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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

Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_

\_\_\_ Voluntary resignation: \_\_\_\_\_

\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_

\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above?

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

If yes, provide dates and explain: \_\_\_\_\_

\_\_\_\_\_

BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

7. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_

\_\_\_ Voluntary resignation: \_\_\_\_\_

\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_

\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above?

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

If yes, provide dates and explain: \_\_\_\_\_

\_\_\_\_\_

8. Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Job Title \_\_\_\_\_ Beginning and Ending Salary \_\_\_\_\_

Work Schedule \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Supervisor Telephone No. \_\_\_\_\_

Name of a Co-worker \_\_\_\_\_ Co-worker Telephone No. \_\_\_\_\_

Duties: \_\_\_\_\_

Identify any disciplinary actions or performance counseling you received at work, when they occurred, and explain why:

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Identify any alleged complaints about you and/or policy violations that were investigated, or internal affairs investigations you were the subject of, when they occurred, and the outcome of each:

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Reason for Leaving – Check the most accurate reason for your leaving this job, and then explain the reason for leaving:

\_\_\_ Fired/Terminated Involuntarily: \_\_\_\_\_  
\_\_\_ Voluntary resignation: \_\_\_\_\_  
\_\_\_ Voluntary resignation in lieu of being fired/terminated: \_\_\_\_\_  
\_\_\_ Laid off for lack of work/Business closed: \_\_\_\_\_

Was there an unemployment period between previous employment and the one listed above? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide dates and explain: \_\_\_\_\_  
\_\_\_\_\_

## Educational History

High School(s) attended	Address	Dates attended From-To	Graduated Yes/No

Do you have a G.E.D. Certificate? \_\_\_\_\_

Were you **ever** expelled/suspended from school? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Identify all colleges, universities, or technical schools you have attended:

Name	City & State	Dates attended	Hrs Completed	Major	Degree & Date

## Military Obligation

Have you ever served in the U.S. Armed Forces or State Military Forces? Yes \_\_\_\_\_ No \_\_\_\_\_

Served from \_\_\_\_\_ to \_\_\_\_\_ Highest Rank held \_\_\_\_\_  
Date Date

Branch of Service \_\_\_\_\_ Last Unit of Assignment \_\_\_\_\_

Job Title(s) (e.g., Rifleman, Security) \_\_\_\_\_

Type of discharge \_\_\_\_\_

Are you actively serving in a National Guard or Reserve Unit? Yes \_\_\_\_\_ No \_\_\_\_\_

Serving from \_\_\_\_\_ to \_\_\_\_\_ Current Rank held \_\_\_\_\_  
Date Date

Branch of Service \_\_\_\_\_ Unit \_\_\_\_\_

Job Title(s) (e.g., Rifleman, Security) \_\_\_\_\_

Have you **ever** been subject to court martial or any other disciplinary proceeding under the Uniform Code of Military Justice? (Include non-judicial, Captain's mast, etc.) If "Yes," provide date(s), charge(s), military court(s) or authority(ies), and outcome(s).

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## Special Qualifications & Skills

Identify any special licenses or certificates you hold (e.g., pilot, radio operator):

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If you know a foreign language, indicate your fluency in each block below (excellent, good, fair)

Language	Understanding	Speaking	Reading	Writing

Do you have any experience with firearms? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been denied a carry permit or had a carry permit revoked? Yes \_\_\_\_\_ No \_\_\_\_\_

## Membership in Organizations (past and present)

Name & Address	Type (e.g., social, fraternal, professional)	From	To

Have you ever been an officer or a member of, or made a contribution to, an organization that advocates or practices the commission of acts of force or violence to discourage others from exercising their rights under the U.S. Constitution or right granted by law. Yes \_\_\_\_\_ No \_\_\_\_\_

### Personal Declarations

Do you consume alcoholic beverages? Yes \_\_\_\_\_ No \_\_\_\_\_ If "Yes", how often? \_\_\_\_\_

Have you **ever** used marijuana or hashish? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when last used? \_\_\_\_\_

Have you **ever** used any illegal drug (including a performance-enhancing steroid) not prescribed by a physician?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes how often \_\_\_\_\_ When last used \_\_\_\_\_

Provide explanation: \_\_\_\_\_

Have you **ever** sold or furnished controlled substances or prescription drugs to anyone? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give details: \_\_\_\_\_

Are there any incidents in your life, or details not mentioned herein, which may influence this department's evaluation of your suitability for employment? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Have you **ever** failed a polygraph exam? If yes, please explain: Yes \_\_\_\_\_ No \_\_\_\_\_

Identify ANY illegal drug, and any legal prescription drug for which you did not have a valid prescription, and any performance enhancing steroid/drug, you have EVER USED (THIS INCLUDES MUSHROOMS, INHALANTS, BATH SALTS, ETC:

DRUG/SUBSTANCE	HOW MUCH USED/FREQUENCY OF USE	DATE OF LAST USE (MONTH AND YEAR)

BLOUNT COUNTY SHERIFF'S OFFICE PERSONAL HISTORY STATEMENT

Have you **ever** been employed by or applied with any other law enforcement agency? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please identify to the best of your knowledge:

Agency Name & Address	Date Applied or Hired	Status of Application

Identify any additional information you think should be considered in your application for the position you are seeking, and/or any further explanation of answers to previous questions:

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I hereby certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers to the above questions. I fully understand that any misrepresentation, omission, or falsification may deem me permanently unsuitable, or if hired, may lead to the termination of my employment.

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

\_\_\_\_\_  
Date