

VERMILION COUNTY SHERIFF'S DEPARTMENT

Application for Employment

PLEASE PRINT

Position(s) applied for _____ **Date** _____

Name in full _____ **Phone** _____

Address _____ **City of** _____ **Zip Code** _____

How long have you lived in the State of Illinois _____ (years).

Social Security Number

Date of Birth

Pursuant to the Rules and Regulations of the Vermilion County Merit Commission for Deputy Sheriffs and/or Corrections Officers, applications for employment with the Vermilion County Sheriff's Department will be accepted from persons meeting the following qualifications:

- 1. Must be a citizen of the United States.**
- 2. Must have attained the age of 20 years at the time of application.**
- 3. Must be a high school graduate or an equivalent certificate. Copy of high school diploma or equivalent certificate must be attached to this application.**

You will receive an additional 5 points on your written examination score if you had Honorable Service in the Armed Forces of the United States AND further if you attach a copy of your "Certificate of Honorable Service" to this application.

- 4. Must be willing to submit to all written and oral examinations deemed necessary by the Merit Commission.**
- 5. Must be of sound mind and body and willing to take a physical examination by a physician selected by the Merit Commission at the expense of Vermilion County.**
- 6. Must be willing to be fingerprinted and submit to a complete record check.**
- 7. Must be bondable.**
- 8. Must not be a conscientious objector from service in the United States forces.**
- 9. Must not be dishonorably discharged from service in the United States forces.**
- 10. Must not be a habitual user of alcohol, of drugs or be a habitual gambler.**
- 11. Must not have been convicted of a felony or serious misdemeanor.**

I certify that I have read the above qualifications and that I meet these requirements.

Signature _____ **Date** _____

**VERMILION COUNTY MERIT COMMISSION FOR LAW ENFORCEMENT
ROOM 317
VERMILION COUNTY COURTHOUSE ANNEX
DANVILLE, IL 61832**

PRE-EMPLOYMENT FORM

To help us comply with Federal Regulations, would you please answer the following questions? This sheet will not be a part of your application form. This is not used for employment decisions, but for record keeping in compliance with Federal Law.

	Last	First	Middle
Name			
	Street	City	State
Address			Zip Code
	Sex	Race	
	Male	Caucasian	
	Female	Black	
		Other	(Explain) _____
Date of Birth	_____		
Place of Birth	_____		Nationality _____

Signature _____ **Date** _____

List below present and past employment, beginning with your most recent.

1. Name and Address of Company and Type of Business	From		To		Starting Weekly Salary	Last Weekly Salary	Reason For Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

2. Name and Address of Company and Type of Business	From		To		Starting Weekly Salary	Last Weekly Salary	Reason For Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

3. Name and Address of Company and Type of Business	From		To		Starting Weekly Salary	Last Weekly Salary	Reason For Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

4. Name and Address of Company and Type of Business	From		To		Starting Weekly Salary	Last Weekly Salary	Reason For Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

May we contact the employers listed above? _____ If not, indicate by No. which one(s) you do not wish us to contact _____