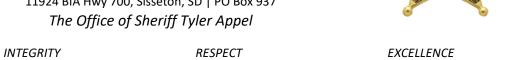


FAIRNESS

ROBERTS COUNTY

SHERIFF'S OFFICE

11924 BIA Hwy 700, Sisseton, SD | PO Box 937 The Office of Sheriff Tyler Appel



Employment Application

		Applicant In	nformation		
Full Name:	Last	First		<i>M.I.</i> DO	В:
Address:	Street Address				Apartment/Unit #
	City			State	ZIP Code
Phone:		I	Email		
Date Availab	ole:	Social Security No.:		Desired Salary:	\$
Position App	olied for:				
Are you a cit	zizen of the United States?	YES NO	If no, are yo	ou authorized to work i	n the U.S.? NO
Have you ev	er worked for this company?	YES NO	If yes, when?		
Have you ev	er been convicted of a felony?	YES NO			
If yes, explai	n:				
		Educa	ation		
High School	:	Address:			
From:	To:	_ Did you graduate?	YES NO	Diploma:	
College:		Address:			

From:	To:	Did you graduate?	YES	NO	Degree:	
Other:		Address:				
From:	To:	Did you graduate?	YES	NO 🔲	Degree:	
		Refere				
Please list three	professional referen	ces. Do not list former em	ployers	or relat	ives.	
Full Name:					Relationship:	
Company:					Phone:	
Address:						
Full Name:					Relationship:	
Company:					Phone:	
Address:						
Full Name:					Relationship:	
Company:					Phone:	
Address:						
_	_	Previous Em	nlovm	ent	_	-
C		Trevious Em	рюун	-	Dl	
Company:					Phone:	
Address:					Supervisor:	
Job Title:		Starting Sa	lary:\$		Ending Salary:\$	
Responsibilities:						
From:	To:_		Reaso	on for Lea	aving:	
May we contact yo	our previous superviso	or for a reference?	YES	N(
Address:					Supervisor:	

Job Title:	Starting Salary:	Ending Salary:\$
Responsibilities:		
From: To:	Reason for Leaving	:
May we contact your previous supervisor for a reference	e? YES NO	
Company: Address:		Phone:Supervisor:
Job Title:	Starting Salary:	Ending Salary:\$
Responsibilities:		
From: To:	Reason for Leaving	:
May we contact your previous supervisor for a reference	e? YES NO	
	Military Service	
Branch:	From	n: To:
Rank at Discharge:	Type of Discharge	e:
If other than honorable, explain:		

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand and agree that any misrepresentation by me in this application will be sufficient cause or rejection of this application and/or termination of employment if I am hereafter employed by Roberts County. Furthermore, if I am hired, I understand that I am free to resign at any time by submitting a written notice two weeks in advance to the Department head or the Roberts County Commission. Roberts County reserves the right to terminate my employment at any time by giving two weeks written notice of intended action. I understand that no representative of Roberts County has authority to make any representations or assurances to the contrary. I understand that I may be requested to submit to a test to detect the current illegal use of drugs and if the test results identify that I am a current illegal user, I will not be eligible for employment by Roberts County. I further understand that I have the right to refuse to submit to such tests or to consent to such tests of my own free will. I authorize Roberts County to make a thorough investigation and background check of my past employment, education, and job-related activities. To the extent permitted by law. I release Roberts County from any liability which might result from making such investigation and I also release from any liability all

persons and entities supplying such information. I acknowledge that Roberts County is an equal opportunity employer and that Roberts County does not discriminate in employment. I understand that no question on this application is used for the purpose of limiting or excluding Roberts County's consideration of me for employment on a basis prohibited by federal, state, or local information prohibited by federal, state, or local law. I understand that Roberts County will consider this application to contain current information for a period of only sixty days. All job openings will be advertised in the County's designated newspapers. I understand that no person shall hire in a position where he or she shall be supervised by or receive supervision from a relative as defined by brother, sister, mother, father, son, daughter, grandson, granddaughter, or any of the preceding who are in that capacity as in-laws, or any other member of the prospective employee's household

Signature:	Date:	

Return your application in one of the following ways:

Deputy Sheriff Eligibility List & Correctional Officer Openings – Deputy Trevor Mishler | Email: Tmishler@robertsco.org

911 Dispatcher Openings – 911 Coordinator Alexis Johnson | Email: 911@robertsco.org

OR

Mailing: Roberts County Sheriff's Office

Attn: (List appropriate contact – See above)

P.O. Box 937

Sisseton, SD 57262