

Tuscaloosa County Sheriff's Office
Application for Reserve Deputy Sheriff

Date

Read the entire application. Then answer every question in ink and in your own handwriting. Write no or none after questions that do not apply to you.

Full Name: _____
Last First Middle

Address: _____
Number and Street (No PO Boxes)

City State Zip

Telephone: _____
Home Work Ext.

How long have you lived at your present address? _____

How long have you lived in Tuscaloosa County? _____

List home address for past five (5) years: _____

Date of Birth: ____/____/____ Place of Birth: _____
City State

Social Security Number: _____

Driver's License Number: _____ State: _____

Height: ____ ft. ____ in. Weight: _____ lbs. Hair: _____ Eyes: _____

Sex: _____ Race: _____

Do you have any health considerations that may limit your performance as a Deputy Sheriff? (examples: asthma or seizures) _____

Name of Spouse: _____

Spouse's Occupation: _____

Number of Dependent Children? _____

Do you hold any political or party office (Y/N) _____

If yes, give title of position: _____

Have you ever been arrested, placed under bond, charged or cited for any violation of any law, ordinance or police regulation (including traffic violations, except for parking violations)? (Y/N) _____

If yes, explain fully, whether found guilty or not: _____

Have you ever served in the armed forces or any reserve component of the United States or any State? (Y/N) _____

Dates of Service: From: _____ To: _____ Unit: _____

From: _____ To: _____ Unit: _____

From: _____ To: _____ Unit: _____

Rating at time of separation: _____

Are you now an active member of any reserve component? (Y/N) _____

If yes, name the reserve component: _____

Are you presently employed? (Y/N) _____ If yes, may your employer be contacted in regard to this application? (Y/N) _____

Have you ever been discharged or requested to resign from any position? (Y/N): _____

If yes, explain: _____

List your work experience for the past five (5) years including military service, if any.

Start with your present or last job and work back in chronological order.

Employed: _____

Name and Address of Firm

From

To

Reason for leaving: _____

Duties of your job: _____

Employed: _____
Name and Address of Firm

From _____ To _____

Reason for leaving: _____

Duties of your job: _____

What church do you attend, if any? _____

Name of Pastor: _____

List all religious, charitable, civic, fraternal, etc. organizations to which you belong or have belonged during the last five (5) years.

List three personal reference who know you well enough to testify to your good character. (Do not list relatives.)

Name _____ Address _____

Phone _____ Employer _____

How long have you known this person? _____

Name _____ Address _____

Phone _____ Employer _____

How long have you known this person? _____

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

Last date this school was attended? _____

List college or university attended: _____

From: _____ To: _____ Degree or years attended is not a graduate:

List all special schools, institutes, and training centers attended. Give dates attended, subjects studied and certificates received.

List your hobbies: _____

Can you operate any specific equipment: (i.e. computers, semi-tractor trailer, etc)

Explain in detail any police training or experience you have had including Civil Defense Training. Show dates, places and length of experience.

Why are you seeking application for this program? _____

List days and hours of the week that you will be available for regular patrol duties if accepted for this program: _____

How many hours per month do you think you will be willing to work in this program?

List the names of present full-time or reserve deputies whom you know.

Date

Signature

Please attach a recent photograph of yourself. A Polaroid is acceptable.