

PLEASE DETACH THIS SHEET FROM YOUR APPLICATION AND KEEP FOR FUTURE REFERENCE.

HALL COUNTY LAW ENFORCEMENT APPLICANT INFORMATION

Attached is an application for employment with Hall County Government in **LAW ENFORCEMENT (Criminal Investigations)**. Applicants must be at least **18 years of age** to be considered for employment.

The following are required to be submitted with your application:

1. Copy of certified **BIRTH CERTIFICATE**.
2. Copy of certified **CERTIFICATE OF CITIZENSHIP** (if naturalized or a repatriated citizen of the United States).
3. Copy of certified **HIGH SCHOOL DIPLOMA** or **GED** and your **COLLEGE DIPLOMA** if you are a graduate.
4. Copy of **Georgia P.O.S.T. Certificate** if certified by the State of Georgia as a Peace Officer.
5. Copy of your certified **Military Discharge (Form DD-214, Member 4)**, if you are a veteran of the Armed Forces.
6. Copy of your **DRIVER'S LICENSE**.
7. Copy of your **SOCIAL SECURITY CARD**.

If application is brought into office with the above documentation, copies can be made for you.

The Department of Public Safety and/or law enforcement will conduct a **BACKGROUND INVESTIGATION** of all applicants. The investigation will include viewing records concerning criminal and driver histories, if any, contacting past employers and personal references as listed on your application, and contacts with other parties that might arise from the investigation to confirm suitability for employment

Applicants considered for employment are required to submit to a pre-employment **POLYGRAPH EXAMINATION** at the request and expense of Hall County Government. Applicants considered for employment may also be required to complete a **PSYCHOLOGICAL ASSESSMENT** at the expense of the hiring agency. Polygraph questions may be drawn from the following areas:

- | | |
|-----------------------------|---------------------------|
| A) Driving Record | D) Thefts |
| B) Criminal Activity | E) Physical Health |
| C) Illegal Drugs | F) Work Record |

Upon successful completion of all aforementioned requirements, applicants will be considered for an **INTERVIEW** with the Sheriff, or his designee.

Applicants considered for employment are required to complete a **POST-OFFER HEALTH SCREENING** and a **PSYCHOLOGICAL ASSESSMENT** at the request and expense of the Hall County Government.

Applicants who do not successfully complete any part of the **PRE-EMPLOYMENT PROCESS** will not be eligible for employment.

Questions regarding the status of your application should be directed to:

**HALL COUNTY HUMAN RESOURCES DEPARTMENT
P. O. BOX 1435
GAINESVILLE, GA 30503
770-531-6712**



HALL COUNTY GOVERNMENT HUMAN RESOURCES DEPARTMENT

JOB VACANCY

December 20, 2013

INVESTIGATOR - CRIMINAL INVESTIGATIONS DIVISION

JOB CODE: 9855-144

SALARY: \$33,525 - \$41,907

Pay Grade: 2018

SUMMARY OF DUTIES:

Investigates all criminal violation reports initiated by uniformed patrol officers to assure all crimes committed against persons or property in Hall County are thoroughly investigated, suspects questioned, and leads followed until a case is resolved and successfully prosecuted. Accepts calls from uniform patrol deputies; responds to crime scenes and receives initial report from deputies. Interviews complainants, witnesses, victims, and informants to decipher information as to the facts of the case; follows all leads and prepares reports. Coordinates activities at crime scenes; identifies, collects, and marks physical evidence; photographs crime scene; processes evidence for fingerprints or any other clues for suspects and motive for crimes; may attend autopsies to gather information on the cause of death. Identifies stolen property through research, insurance records and other departments. Analyzes investigative information and develops a plan of action; questions suspects on a particular crime; obtains search warrants; checks pawn shops and business known to deal in stolen goods; questions known criminals with past histories of similar crimes. Informs suspects of their rights and attempts to get a confession; when sufficient evidence is gathered, obtains arrest warrant and makes arrest; contacts victim and gives them progress reports; asks them to identify found evidence if applicable. Conducts surveillance, stakeout, undercover, and special surveillance operations; writes reports detailing the facts and investigative methods used; recovers stolen property and assures its safekeeping for trial. Assists the District Attorney prepare and present cases in various courts; assures pertinent facts are presented in a clear, concise, and accurate manner to assure conviction; recommends sentences to the District Attorney and confers with the Judge on matters pertaining to the case. Performs other related duties as required.

MINIMUM QUALIFICATIONS REQUIRED:

High School Diploma or G.E.D.; Georgia POST Basic Law Enforcement Certification; Valid Class C Driver's License and a satisfactory Motor Vehicle Record (MVR).

Apply By: January 3, 2014

HALL COUNTY GOVERNMENT IS A DRUG FREE EMPLOYER AND ALL APPLICANTS ARE SUBJECT TO A POST OFFER DRUG SCREEN, BACKGROUND CHECK AND MEDICAL PHYSICAL.

DUE TO GEORGIA STATE LAW, ALL APPLICATIONS ARE SUBJECT TO PUBLIC DISCLOSURE.

EOE

ONLY CANDIDATES TO BE INTERVIEWED WILL BE CONTACTED



HALL COUNTY GOVERNMENT EMPLOYMENT APPLICATION

HUMAN RESOURCES DEPARTMENT

P. O. Drawer 1435, Gainesville, GA 30503
Telephone: (770) 531-6712 ----- FAX: (770) 531-7137

Active for 30 days unless otherwise notified

Date Applied _____

NOTE: All fields must be answered fully in order to be considered for employment. Please ask for assistance if any portion of application is unclear. All candidates will be required to pass a pre-employment drug test.

LAST NAME	FIRST	MIDDLE	STREET ADDRESS	CITY	STATE	ZIP
() _____ PHONE NUMBER		SOCIAL SECURITY NUMBER		YEARS AT ABOVE ADDRESS		
LIST JOB CODE NUMBER FOR JOB APPLYING FOR: One job per application		JOB CODE NUMBER: 9855-144		NAME OF JOB APPLYING FOR: Investigator-Investigations		
ARE YOU AVAILABLE TO WORK ANY TIME OF THE DAY <input type="checkbox"/> YES <input type="checkbox"/> NO			TYPING TEST REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO DATE: _____			
ARE YOU AVAILABLE TO WORK ANY DAY OF THE WEEK <input type="checkbox"/> YES <input type="checkbox"/> NO			GRADE: _____ KEYSTROKE: _____ WPM: _____			
FORMER COUNTY EMPLOYEE <input type="checkbox"/> YES <input type="checkbox"/> NO	DEPARTMENT/DIVISION	JOB TITLE & DUTIES	FROM	TO		
RELATIVES WORKING FOR THE HALL COUNTY GOVERNMENT – NAMES AND RELATIONSHIP						
HOW DID YOU LEARN OF THIS AVAILABLE POSITION: <input type="checkbox"/> WALK-IN <input type="checkbox"/> TV 18 <input type="checkbox"/> OTHER						
PLEASE CHECK: <input type="checkbox"/> NEWSPAPER <input type="checkbox"/> INTERNET <input type="checkbox"/> EXPLAIN: _____						
ARE YOU AUTHORIZED TO BE EMPLOYED IN THE UNITED STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO						
Note: If offered employment, you will be required to provide documentation to verify employment eligibility. Failure to provide the requested documentation may result in a determination that the applicant is ineligible for employment in the United States.						
LIST LICENSES / CERTIFICATES RELATED TO POSITION APPLIED FOR: _____						
HAVE YOU EVER BEEN CONVICTED FOR VIOLATING ANY LAW? <input type="checkbox"/> YES <input type="checkbox"/> NO A YES WILL NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT IF YES, PLEASE EXPLAIN ⇒						
MUST POSSESS A VALID DRIVER'S LICENSE. PLEASE COMPLETE THE FOLLOWING:						
POSSESS A VALID DRIVER'S LICENSE YES _____ NO _____	GOOD DRIVING RECORD YES _____ NO _____	DRIVER'S LICENSE NO.	DRIVER'S LICENSE CLASS/ENDORSEMENTS			

U.S. MILITARY HISTORY

BRANCH	DATE ENTERED	DATE DISCHARGED	TYPE OF DISCHARGE	HIGHEST RANK ATTAINED AND UNIT
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INDICATE SPECIFIC SKILLS ACQUIRED IN THE U.S. ARMED FORCES

EDUCATIONAL HISTORY

HIGH SCHOOL	NAME	LOCATION	CIRCLE THE HIGHEST GRADE COMPLETED: 7 8 9 10 11 12	GRADUATED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> GED
TRADE (OR APPRENTICE) SCHOOL			FROM: _____ TO: _____	
COLLEGE OR BUSINESS SCHOOL			FROM: _____ TO: _____	HRS. EARNED: _____ QTRS. EARNED: _____ MAJOR: _____ DEGREE EARNED: _____

DESCRIBE SPECIAL VOCATIONAL OR BUSINESS COURSES YOU HAVE TAKEN WHICH RELATE TO THE JOB FOR WHICH YOU ARE APPLYING:

* The Hall County Government is an equal opportunity employer and provides fair and equal employment opportunities to all applicants for employment and employees without regard to race, color, religion, natural origin, citizenship status, age, sex, disability, veteran's status, or political affiliation
USE THIS SPACE FOR COMMENTS ABOUT YOUR SPECIAL ABILITIES I.E. APPRENTICESHIPS, TOOLS, CERTIFICATIONS, EXPERIENCE, ETC.

Describe your work history BEGINNING WITH YOUR CURRENT OR MOST RECENT JOB. Include military, volunteer experience and periods of unemployment. Complete address with zip code and phone numbers for all employers are necessary. A resume may be attached only as additional information and will not be accepted in lieu of completing this section.

EMPLOYMENT HISTORY (PLEASE COVER EMPLOYMENT HISTORY FOR PAST TEN YEARS, INCLUDING MILITARY IF APPLICABLE). USE ATTACHMENT IF NECESSARY.					
(1) NAME OF EMPLOYER (2) ADDRESS OF EMPLOYER (3) PHONE NUMBER	FROM MO./YR.	TO MO./YR.	WAGE RATE START/FINISH	JOB TITLE AND DUTIES	REASON FOR LEAVING SUPERVISOR'S NAME
name ----- address ----- phone ()					
name ----- address ----- phone ()					
name ----- address ----- phone ()					
name ----- address ----- phone ()					

PLEASE COMPLETE ALL AREAS ABOVE, WHETHER OR NOT A RESUME IS ATTACHED.

WORK REFERENCES WE MAY CONTACT (INCLUDE AT LEAST TWO MOST RECENT OR CURRENT SUPERVISORS)

NAME	NAME
ADDRESS	ADDRESS
OCCUPATION	OCCUPATION
PHONE	PHONE
NAME	NAME
ADDRESS	ADDRESS
OCCUPATION	OCCUPATION
PHONE	PHONE

PLEASE READ THIS IMPORTANT INFORMATION BELOW. ASK FOR CLARIFICATION IF NEEDED.

The undersigned has applied for employment with the Hall County Government and hereby authorizes the Hall County Government to contact my current and former employers and references for the purpose of acquiring information regarding me; I hereby authorize such employers and references to supply such information verbally or in writing to the Hall County Government. In consideration for their furnishing such information, I hereby waive any and all claims against such former employers and references which may arise from their furnishing such information.

I understand the Hall County Government has a Substance Abuse Prevention Program which includes drug testing. I agree to comply with applicable County policy.

I understand that once offered a position I will be required to complete a medical evaluation and drug screening.

I understand that once offered a position I may be required to pass a physical examination as a condition of continued employment.

I certify that the answers given by me to all of the questions on this application are to the best of my knowledge and belief true and correct. I further affirm that I have not knowingly withheld any facts or circumstances that would detrimentally affect my application for employment, and I understand that any misleading or incorrect statement may render this application void and would be cause for dismissal, if employed.

I AGREE THAT IF HIRED, THE HALL COUNTY GOVERNMENT OR I MAY TERMINATE MY EMPLOYMENT AT ANY TIME WITH OR WITHOUT CAUSE. I UNDERSTAND THAT NO COUNTY POLICY, PRACTICE, PROCEDURE, OR STATEMENT BY ANY COUNTY REPRESENTATIVE SHALL LIMIT OR ALTER THIS AT-WILL EMPLOYMENT RELATIONSHIP.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS:

SIGNATURE

DATE

APPLICANT'S CERTIFICATION

(READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING)

I hereby certify that all statements on my application are true and complete to the best of my knowledge and belief. I understand and agree that any misstatements or omissions of material fact may cause any offer of employment made by Hall County Public Safety Division to be withdrawn, or if employed, my employment to be terminated. I further understand that any employment offered to me will be contingent upon the results of a complete character and fitness investigation. I further and fully understand and consent to a polygraph examination concerning the veracity of my responses to the information requested on this application as required. I also understand and agree that my employment application shall be the property of the Hall County Government. I understand and agree that if employed, I will not divulge to anyone any confidential, privileged information acquired by me during my employment, except as may be required by law. It is understood that, as a condition of employment, in the Hall County Public Safety Division, I will, as provided by law governing protective services personnel, submit to a polygraph test when specifically ordered to do so.

Signature of Applicant

Date

Witness

Date

I certify that I have received a copy of the **Law Enforcement Applicant Information Sheet** contained in this packet.

Signature of Applicant

Date

PLEASE REVIEW THE FOLLOWING EMPLOYMENT DISQUALIFIERS

O.C.G.A. § 35-8-8 requires a Pre-Employment background for peace officers and jailers (including detention officers who are certified jailers). The Hall County Sheriff's Office will conduct a thorough background on each applicant that applies for a position as a peace officer or jailer. The background investigation includes, but is not limited to:

- Check of the applicant's work history
- Driver's history
- Criminal history
- Credit history (if position is of a fiduciary capacity)
- Polygraph examination and/or other deception detection examinations
- References (Personal and Work)
- Interview with a member of the command staff
- Administering of a written and/or clinical psychological exam
- Administering of a physical examination/drug screen

Employment in law enforcement requires integrity and public trust. Only those applicants whose conduct, character, and behavior, which does not discredit either themselves or the Hall County Sheriff's Office will be employed. The process of employment with the Hall County Sheriff's Office will address the integrity, ethical conduct, honesty, prejudices, and past behavior of all applicants.

In an effort to maintain an equitable standard for the positions of Peace Officer or Jailer, the Command Staff of the Hall County Sheriff's Office has set certain standards and guidelines. The following standards are among those that will automatically disqualify an applicant for consideration:

EMPLOYMENT DISQUALIFIERS

1. Intentionally falsifying, misrepresenting, or omitting pertinent information while completing the employment application, preliminary interview questionnaires, or any other pre-employment document(s).
2. Deliberately making inaccurate, misleading, false, or fraudulent statements during the employment process.
3. Poor management of personal finances (within the past 5 years). Debts, pending civil suits, garnishments, dispossessory warrants, bankruptcies, etc., will be investigated to determine a candidate's suitability for employment.
4. Personal State or Federal tax liability or delinquent student or government loans unless the applicant is on an approved payment plan.
5. Any felony convictions.
6. Any outstanding criminal charge pending adjudication and completion of any sentence or probation.
7. Sufficient misdemeanor convictions to establish a pattern for disregard of the law.
8. No conviction for misdemeanor of an aggravated nature, public order, decency or moral turpitude.
9. Any conviction or plea of *nolo contendere* within the past five (5) years for Driving Under the Influence of Drugs or Alcohol (DUI) or for any serious traffic offense, including, but not limited to: Fleeing or Attempting to Elude a Police Officer, Vehicular Homicide, Failure to Stop and Render Aid, or leave information, Reckless Driving, and Racing.

10. **Three (3) or more convictions and/or pleas of *nolo contendere* within the past two (2) years for any moving violation.**
11. **Must have valid driver's license.**
12. **No convictions for offenses involving the Family Violence Act as defined in O.C.G.A. 19-13-1, to include no active Temporary Protective Orders (TPO) or Protective Orders.**
13. **No discharge for cause from a local, state, or national Civil Service or Merit System.**
14. **If POST certified, must be in good standing and not on Probation.**
15. **If discharge from military organization is other than Honorable or Medical, an explanation should be attached.**
16. **Illegal sale, distribution, or manufacture (to include growing) of any drug.**
17. **Use or possession of marijuana during the last three (3) years.**
18. **Use of an illegal drug or combination of illegal drugs (including non-prescribed drugs), other than marijuana, during the past 5 years and no life time use of LSD, Methamphetamine, Acid, or Heroin.**
19. **No non-prescribed steroid use within the past five (5) years.**
20. **Deliberate association of a personal nature within the past year with persons who use illegal drugs in the presence of the applicant. (Deliberate association will be determined on a case by case basis considering the totality of the circumstances).**
21. **Any tattoo that is visible while on duty and/or in uniform will require successful removal before the applicant may be considered for employment. For most people this generally means that tattoos located on the arm must be 2.5 inches above the elbow not to be visible in short sleeve uniform shirt.**

Should an applicant have any concerns pertaining to the background investigation or the above disqualifiers, the applicant should contact the Hall County Sheriff's Office, Office of Professional Standards – Internal Affairs Division at 770-718-5728 or the Hall County Government Human Resources office at 770-531-6712.

Based on the preponderance of evidence and other pertinent information received during the background investigation process, the Hall County Sheriff's Office reserves the right to disqualify any applicant that has applied for a position of Peace Officer or Jailer.

I HAVE READ AND UNDERSTAND THE DISQUALIFIERS AS STATED ABOVE:

Signature of Applicant

Date



GERALD COUCH
Sheriff

OFFICE OF THE SHERIFF

HALL COUNTY, GEORGIA

610 Main Street
Gainesville, Georgia 30501
Phone: 770-531-6900 Fax: 770-531-7150

Authorization for Release of Information

Applicant: _____

Date of Birth: _____

Social Security #: _____

To Whom It May Concern:

This release, when presented by a duly authorized representative of the Hall County Sheriff's Office, constitutes my consent and authority to examine and obtain copies and abstracts of records and to receive statements and information containing my background.

Specifically, I authorize the release (including duplication of records) to the Hall County Sheriff's Office, of any and all records concerning me that you may hold.

This authorization is given in connection with a background investigation being conducted relative to my application for, or continued employment with (as a result of for cause investigation or change in public safety position) the Hall County Sheriff's Office. The intent of this authorization is to provide full and free access to the background history of both my professional and my personal life, for the specific purpose of pursuing an investigation, which may provide pertinent data for the Hall County Sheriff's Office to consider my suitability for employment.

I understand that any information obtained by a background investigation, which is developed directly or indirectly, in whole or in part upon this release authorization, will be considered in determining my suitability for employment by the Hall County Sheriff's Office. I understand that all materials pertaining to this background investigation become the property of the Hall County Sheriff's Office and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his/her agents and employees, from and against all claims, damages, losses and expenses arising out of or by reason of complying with this request. I further understand that in the event my application is disapproved, the confidential information or source(s) of information will not be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Signature _____

Street Address _____

City, State, Zip _____

State of _____

County/City of _____

Subscribed and sworn before me this ____

day of _____, 20____.

My commission expires _____

Signature of Notary