



# Jefferson County Sheriff's Office Cadet Application



**Directions:**

- Please read all questions contained in this application carefully.
- Complete the entire application.
- If a specific question contained in this application does not apply to you, please state so.
- Incomplete answers may be grounds for rejection of this application.
- You must attach a copy of your most recent school progress report, grade report, or transcript if still attending school.
  - If graduated from High School your diploma will serve as school verification.

**---FOR OFFICIAL USE ONLY---**

	<u>DATE</u>	<u>COMPLETED BY #</u>
<i>Date Received:</i>	_____	_____
<i>Date Contacted for Oral Board Interview:</i>	_____	_____
<i>Date of Oral Board:</i>	_____	_____
<i>NCIC/WACIC Check:</i>	_____	_____
<i>DOL / ADR Check:</i>	_____	_____
<i>Triple I:</i>	_____	_____
<i>In-House:</i>	_____	_____
<i>Learning for Life Application:</i>	_____	_____
<i>Cadet Training Waiver:</i>	_____	_____
<i>Release and Waiver of Civil Claims:</i>	_____	_____
<i>Notified of oral board results:</i>	Yes _____ No _____	_____
<i>Accepted:</i>	Yes _____ No _____	_____

**APPLICANTS NAME:** \_\_\_\_\_

The purpose of the Jefferson County Sheriff Cadet Law Enforcement Program is to educate and involve youth in police operations and to interest them in possible law enforcement careers. The program is to provide the youth of Jefferson County an opportunity to observe, learn and participate in various law enforcement activities on a first-hand basis. The program is chartered through Exploring (A program of Learning for Life) in Washington State. <http://resources.learningforlife.org/exploring/YPT/index.html>

The Cadet Program is a volunteer service organization, functioning under the control and supervision of the Sheriff of Jefferson County. While on duty, the Cadets are under the direct supervision of the designated Cadet Coordinator and when out of uniform, each member will obey the laws of the county and the State of Washington.

The following are minimum requirements for acceptance into the Cadet Program:

1. Must be a resident of Jefferson County or live within a reasonable distance of the county line.
2. Must be able to read, write and speak the English language.
3. Must be between the ages of 16 and 21 years old.
4. Must have the approval of the review board, the Cadet Advisor(s).
5. Must have and maintain a 2.5 academic G.P.A. if attending school. *Verification of schooling is required prior to acceptance into the Cadet Program.*
6. **Must reside in Jefferson County or if located in Clallam County AND within a reasonable distance to the Jefferson County line AND possess a valid Washington State driver's license AND your own means of transportation. (Cannot rely on others for transportation to and from meetings, events, or ride-a-longs.)**

Applicants must pass a personal oral board interview with the review board. Applicants accepted after the oral board will be placed into the cadet recruit program and on probation for four months. During probation the review board may dismiss the cadet recruit for any reason.

Completed applications should be returned to:

Jefferson County Sheriff's Office  
Attn: Deputy Moore or Deputy Schreier  
79 Elkins Road  
Port Hadlock, WA 98339

**APPLICANT**

Last Name		First Name		Middle Initial
Date of Birth	Race	Sex	Social Security Number	
Street Address			City	State Zip Code
Mailing Address			City	State Zip Code
( )	( )		( )	
Home Phone	Cell Phone		Message Phone	

**PARENT/GUARDIAN**

Last Name		First Name		Middle Initial
Date of Birth	Relationship			
Street Address			City	State Zip Code
Mailing Address			City	State Zip Code
( )	( )		( )	
Home Phone	Cell Phone		Message Phone	

**EMERGENCY CONTACT**

Last Name		First Name		Middle Initial
Date of Birth	Relationship			
Street Address			City	State Zip Code
Mailing Address			City	State Zip Code
( )	( )		( )	
Home Phone	Cell Phone		Message Phone	

Do you have any Physical, Mental, Sensory or other health limitation or disability that might affect your ability to perform the job that you are applying for? YES ( ) NO ( )  
 (If "YES" please explain)

Do you have any relative working for Jefferson County? YES ( ) NO ( )  
 Name: \_\_\_\_\_ Department/Division: \_\_\_\_\_  
 Name: \_\_\_\_\_ Department/Division: \_\_\_\_\_

Do you possess a valid Driver's license or Instruction Permit? YES ( ) NO ( )  
 State: \_\_\_\_\_ License # \_\_\_\_\_

School Attending (or Attended)	Last Grade Completed	Grade Point Average
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Did you graduate from High School or Receive a GED?  
 YES ( ) NO ( ) If yes, Date \_\_\_\_\_

**Additional Schooling or Training**

Have you previously filed an application with this program? YES ( ) NO ( )  
 If yes, give the date and results:

Have you ever served, or are you currently serving in the Armed Forces of the U.S.A.? YES ( ) NO ( )  
 If yes, please provide the following information:  
 Branch of Service: \_\_\_\_\_ Highest Rank Held: \_\_\_\_\_

Were you ever court martialled, tried or charged, or were you the subject of a Summary Court, Deck Court, Captain's Mast, company punishment, or any other disciplinary action while a member of the Armed Forces? YES ( ) NO ( )  
 If yes, explain:

Are you a member of the Military Reserve or National Guard? YES ( ) NO ( )  
 If yes, give rank, status and organization to which you are assigned.

List any disciplinary action taken against you in the National Guard or other reserve unit.

**CRIMINAL HISTORY**

**Exclude all Traffic Citations. A conviction record will not necessarily disqualify you from acceptance into the Cadet Program.**

Have you ever been arrested, charged and/or convicted of a misdemeanor or felony? YES ( ) NO ( ) If yes, give details below:

Crime Charged \_\_\_\_\_ Police Agency \_\_\_\_\_  
 Date: \_\_\_\_\_ Disposition of Case: \_\_\_\_\_

## DRIVING HISTORY

Have you ever possessed an operator's license or permit issued by any state *other than Washington*?      YES (  ) NO (  )

State \_\_\_\_\_ License # \_\_\_\_\_

Has your license ever been suspended or revoked by the Department of Licensing in any state?      YES (  ) NO (  )

If yes, specify what state and why:

Has your license been restored?      YES (  ) NO (  )

Have you ever been refused an operator's license by any state?      YES (  ) NO (  )

If yes, explain the details:

Has your license ever been placed on negligent operator's probation?      YES (  ) NO (  )

If so, give the details:

Have you ever been involved in a motor vehicle collision?      YES (  ) NO (  )

If yes, give complete details for each collision.

Date: \_\_\_\_\_ Police Investigation?      YES (  ) NO (  )

Location: \_\_\_\_\_ Injury      / Non-Injury? \_\_\_\_\_

Date: \_\_\_\_\_ Police Investigation?      YES (  ) NO (  )

Location: \_\_\_\_\_ Injury      / Non-Injury? \_\_\_\_\_

List ALL traffic citation / infractions you have received:

Location (City / State)	Approximate Date	Violation	Penalty / Disposition

## WORK HISTORY

*(attach additional sheets if necessary)*

	( )	
Company Name	Phone #	Position Held
	From: _____ To: _____	
Supervisor's Name	Dates employed there (Month / Year)	Paid or Volunteer
Reason for leaving		
Description of duties		
	( )	
Company Name	Phone #	Position Held
Supervisor's Name	Dates employed there (Month / Year)	
Reason for leaving		
Description of duties		

## REFERENCES

*(REQUIRED)*

Name	Occupation	Phone
Name	Occupation	Phone
Name	Occupation	Phone
Name	Occupation	Phone

**How did you hear about this program?**

An extensive background check will be completed for each applicant, including, but not limited to; verification of work history, educational and military background, driving history and a criminal warrants check. References may also be contacted. Falsification of any information contained in this application will immediately disqualify the applicant and prevent him/her from applying with the Cadet Program in the future.

Further, if the applicant is accepted into the program and it is later learned that he/she falsified information on their application; the Cadet Advisors have the option to dismiss them from the post. If dismissed, the person will not be allowed to re-apply in the future.

Any applicant not accepted into the cadet program after the oral board interview may re-apply to the program after 6 months have passed from the date of the oral board interview.

**CERTIFICATION**

*I hereby certify that all statements made in this application are true and complete and that I understand that any misstatements or material facts will subject me to disqualification or dismissal. I understand that if I am accepted to the Jefferson County Sheriff's Cadet Program, I do so on a voluntary basis without salary and that I will be responsible for purchasing all of the necessary equipment at my own expense, and I will not hold the Jefferson County Sheriff's Office, the Sheriff, Jefferson County, or the County Commissioners Council responsible for injuries while in my performance of duties as a cadet.*

*If under the age of 18, parent/guardian signature required. Signature below shows parent/guardian consent with above statement and parent/guardian assumes full responsibility in the transportation of named minor child to and from functions.*

\_\_\_\_\_  
Signature Date \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature in Full (required under 18) Date \_\_\_\_\_

\_\_\_\_\_  
Place signed (City & State or County & State)