

*BRISTOL COUNTY SHERIFF'S OFFICE*

EMPLOYMENT APPLICATION



THOMAS M. HODGSON  
Sheriff of Bristol County

LAST NAME

FIRST NAME

M.I.

DATE

POSITION(S) APPLYING FOR: \_\_\_\_\_  
\_\_\_\_\_

**AN EQUAL OPPORTUNITY EMPLOYER**

THE BRISTOL COUNTY SHERIFF'S OFFICE IS AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER. WOMEN, VETERANS, DISABLED AND MINORITIES ARE ENCOURAGED TO APPLY. IT IS UNLAWFUL TO DISCRIMINATE ON THE BASIS OF RACE, COLOR, AGE, RELIGION, SEX, SEXUAL ORIENTATION OR NATIONAL ORIGIN.

ALL APPLICATIONS ARE KEPT CONFIDENTIAL.

**Minimum Requirements for Employment with the Bristol County Sheriff's Office**

- Valid Massachusetts Driver's License\*
- High School Diploma or Equivalency\*\*
- Proof of Citizenship (*Naturalization Documents / Birth Certificate*)

\* If licensed in another state you must be eligible for a Massachusetts Driver's License

\*\*Unless otherwise specified for posted positions

## PERSONAL

Last:		First:		Middle:	
List your current address where you actually reside, not a mailing address:					
Number and Street:			City:	State:	Zip Code:
Rent:	Own:	Parents:	Other:	How long have you lived there?	Yrs. Mo.
List your landlord and his/her phone number:					
Please list your contact information below:					
Home Telephone:			Work Telephone:		
E-mail address:			Cellular Phone:		
List your mailing address if different from your current address:					
Number and Street:			City:	State:	Zip Code:
Are you at least 19 years of age? No _____ Yes _____					
Are you a citizen of the United States? No _____ Yes _____ <i>(Must submit copy of Proof of Citizenship)</i>					
Place of Birth:			Birth Date:		
In accordance with Federal Privacy Act of 1974, disclosure of your Social Security Number is voluntary. The SSN will be used for identification purposes to ensure proper records are obtained.				SSN:	
Provide the following for purposes of identification:					
Height:		Weight:		Hair:	Eyes:
List and describe all tattoos (indicate where they are located):					
List all names, aliases, nicknames you have used or have been known by (include maiden name):					
Last:	First:	Middle:	Years used:		

## EDUCATION

Have you ever attended a trade, Vocational or Business school? Yes _____ No _____						
School:	Type of training:	Date attended:	Course Completed:			
			Yes _____ No _____			
			Yes _____ No _____			
Are you a High School Graduate or received an equivalency diploma Yes _____ No _____ <i>Must submit copy of High School Diploma or equivalency)</i>						
Please list Name of School you received diploma from and date of certificate						
College:	City and State:	Major:	Date Began:	Date Ended:	Credits:	Degree:

## EXPERIENCE AND EMPLOYMENT

**BEGINNING WITH YOUR MOST CURRENT EMPLOYMENT**, please list EVERY job, including military service, you have held in the last ten years. All time periods must be accounted for. Jobs include self-employed, part time, temporary work, voluntary work and internships. You must list all employment regardless of the length of employment. Addresses must be complete, current and accurate. If you have had intervening periods of unemployment, please list those periods in sequence in the spaces provided.

_____ Unemployed?	From _____ To _____		
Date of Employment: From:                      To: Month/Year              Month/Year  ____/____      ____/____	Name and address of employer:   Job title:	Phone number with area code:	
		Supervisor's name:	Length of employment:
Describe your duties:			
Reason for leaving, be specific:			
Co-worker:		Work or home number:	
Co-worker:		Work or home number:	

_____ Unemployed?	From _____ To _____		
Date of Employment: From:                      To: Month/Year              Month/Year  ____/____      ____/____	Name and address of employer:   Job title:	Phone number with area code:	
		Supervisor's	Length of employment:
Describe your duties:			
Reason for leaving, be specific:			
Co-worker:		Work or home number:	
Co-worker:		Work or home number:	

_____ Unemployed?	From _____ To _____		
Date of Employment: From:                      To: Month/Year              Month/Year  ____/____      ____/____	Name and address of employer:   Job title:	Phone number with area code:	
		Supervisor's name:	Length of employment:
Describe your duties:			
Reason for leaving, be specific:			
Co-worker:		Work or home number:	
Co-worker:		Work or home number:	

_____ Unemployed?		From _____	To _____
Date of Employment: From: _____ To: _____ Month/Year Month/Year  _____/_____/_____/_____		Name and address of employer:   Job title:	Phone number with area code:  Supervisor's name:  Length of employment:
Describe your duties:			
Reason for leaving, be specific:			
Co-worker:		Work or home number:	
Co-worker:		Work or home number:	

<b>Have you ever been investigated by your employer or supervisor for improper conduct, illegal activities, sexual harassment or Equal Employment Violations which resulted in your being found in violation of any policies, regulations, rules, or any State or Federal laws?</b> Yes _____ No _____ If yes, please provide the following information.			
Date:	Employer:		
Details and results of the investigation:			
Have you ever been suspended by an employer or received a formal written reprimand? Yes _____ No _____ Explain.			
Date:	Employer:	Circumstances:	
Have you ever attended a police academy or a law enforcement training center? Yes _____ No _____ Explain.			
Name and address of site:		Date started:	Date ended:
Did you complete training? Yes _____ No _____ if no, explain:			

### **PRIOR APPLICATION**

Have you ever applied to the Bristol County Sheriff's Office before? Yes _____ No _____ If yes, provide the following information.			
Date applied:			Position:
Have you ever taken the Bristol County Sheriff's Office Correction Officer Exam? Yes _____ No _____			Score:
Location of exam:		Date of exam:	

### **APPLICATIONS WITH OTHER AGENCIES**

Have you ever applied to any other law enforcement agency? Yes _____ No _____ If yes, list every agency, starting with the most recent one listing all. DO NOT include this application.			
Agency including address:		Date applied:	
		Position:	
Agency including address:		Date applied:	
		Position:	

## MILITARY SERVICE

Did you comply with the draft registration law? Yes _____ No _____ Selective Service Number: _____			
Have you ever served in any Armed Forces, National Guard or Military Reserves? Yes _____ No _____			
If yes, what is your current status with the military? Active _____ Reserve _____ Inactive _____ Discharged _____			
Branch:	Unit:	Enlistment Date:	Discharge Date:
Service Number:	Highest rank:	Rank at discharge:	Type of discharge:
Separation code:	Re-enlistment code:	If active or current reserve, list your C.O's name:	
Were you ever investigated for any criminal activity while in the military or military reserves? Yes _____ No _____ If yes please explain.			
Have you ever been reduced in pay grade or been the subject of any judicial or non-judicial disciplinary action while in the military, National Guard or military Reserves? Yes _____ No _____ If yes, please explain.			
Date:	Violation:	Penalty:	
Did you receive an honorable discharge? Yes _____ No _____ If no, please explain.			

## LEGAL

Have you ever been convicted of a criminal offense? Yes _____ No _____			
Have you ever admitted in any court of law to having committed a criminal offense? Including a plea of NOLO. Yes _____ No _____			
Either as an adult or juvenile, have you ever been arrested? Yes _____ No _____			
Have you ever been charged with a criminal act? Yes _____ No _____			
This includes charges that were dismissed, dropped or reduced. If yes provide the following information. Start with most recent.			
Date:	Charges:	Police Agency:	Results:
Circumstances:			
Date:	Charges:	Police Agency:	Results:
Circumstances:			
Date:	Charges:	Police Agency:	Results:
Circumstances:			

## LEGAL (Continued)

Have you ever applied for a permit to carry a concealed weapon? Yes _____ No _____ If yes, explain.		
Date applied:	Permit granted: Yes _____ No _____	Weapon:
Name of agency where applied:		
For what purpose?		Was it ever revoked?
Are you now or have you ever been involved as a plaintiff or defendant in any civil court action? Yes _____ No _____		
Have you ever had a judgment ruled against you? Yes _____ No _____ If yes to either question, provide the following.		
Date:	Court location:	Plaintiff _____ Defendant _____
Details:		
Date:	Court location:	Plaintiff _____ Defendant _____
Details:		
Have you ever sold or supplied any form of illegal drug, narcotic or substance including marijuana?		Yes _____ No _____
Have you ever manufactured any form of drug, narcotic or controlled substance?		Yes _____ No _____
Have you ever cultivated, grown or attempted to grow marijuana?		Yes _____ No _____
Have you ever taken any form of illegal drug, narcotic or substance, including steroids?		Yes _____ No _____
Have you ever remained at a private gathering or party where illegal drugs or narcotics were being used?		Yes _____ No _____
Have you ever allowed someone to use illegal drugs or narcotics including marijuana at your residence or in your vehicle?		Yes _____ No _____
<b>IF YES TO ANY OF THE ABOVE, EXPLAIN ON PAGE 7</b>		

## PREA Standard 115.17(f)

Pursuant to the **Prison Rape Elimination Act (PREA)**, applicants for hire or for promotion to positions that may have contact with inmates must answer the following:

1. Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement, juvenile facility, or other institution defined in 42 U.S.C. 1997? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
2. Have you ever been convicted of engaging in or attempting to engage in sexual activity in the community facilitated by force, overt or implied threat of force, or coercion, or if the victim did not consent or was unable to give consent or refused? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
3. Have you ever been civilly or administratively adjudicated to have engaged in the activity described in question 2? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

*Please be advised that material omission regarding such misconduct or the provision of materially false information shall be grounds for termination (for employees) or non-hire (for applicants).*

## TRAFFIC HISTORY / MOTOR VEHICLE OPERATION

Massachusetts driver's license number:	Class or type:	Expiration Date:
Name in which license was granted:	Other names used (maiden name)	

List other States where you are or have held a valid operators license:		
State:	Under what name:	Number:

## TRAFFIC HISTORY / MOTOR VEHICLE OPERATION (CONTINUED)

Has your driver's license ever been suspended, revoked or placed on negligent operator's probation by any state? Yes _____ No _____ Explain _____

Have you ever received a traffic citation? Yes _____ No _____ If yes, list all citations in the last ten years. Most current first:			
Month/Year:	Violation:	City/State:	Resulting Actions:

List all vehicles that you own and or that are registered to you. Include vehicles you frequently use:				
Year:	Make/Model	Color:	License number/State:	Currently registered: Yes _____ No _____
				Yes _____ No _____
				Yes _____ No _____
				Yes _____ No _____
				Yes _____ No _____

As a driver, have you ever been involved in a motor vehicle accident? Yes _____ No _____ If yes, provide the following information.			
Date:	City/State	Were you considered at fault?.....Yes _____ No _____ Unk _____	Was there a report taken?.....Yes _____ No _____
		Did you cause injury to another person?...Yes _____ No _____	Was the accident a hit and run?.....Yes _____ No _____
Police Department:		Were you cited or arrested?.....Yes _____ No _____	

Date:	City/State	Were you considered at fault?.....Yes _____ No _____ Unk _____	Was there a report taken?.....Yes _____ No _____
		Did you cause injury to another person?...Yes _____ No _____	Was the accident a hit and run?.....Yes _____ No _____
Police Department:		Were you cited or arrested?.....Yes _____ No _____	

## RESIDENCE

Please list all your previous residences starting with the most recent.

Previous address:	City/state:	Since:
With whom do you live:		
From: _____ To: _____	Landlord: _____	

Previous address:	City/state:	Since:
With whom do you live:		
From: _____ To: _____	Landlord: _____	

Previous address:	City/state:	Since:
With whom do you live:		
From: _____ To: _____	Landlord: _____	

Please list as references, three (3) individuals you have known for at least two (2) years who have knowledge of you and your qualifications. Examples can be personal friends, fiancée, boyfriend; friends of the family, roommates, teachers, neighbors, classmates, co-workers, past supervisors and military supervisors or acquaintances. DO NOT include relatives or family members.

Name:	Address: Work _____ Home _____	Work number:
Occupation:		Home number:
Relationship:	How long have you known this person?	

Name:	Address: Work _____ Home _____	Work number:
Occupation:		Home number:
Relationship:	How long have you known this person?	

Name:	Address: Work _____ Home _____	Work number:
Occupation:		Home number:
Relationship:	How long have you known this person?	

List any relatives or close friends now or formerly employed by the Bristol County Sheriff's Office.

**AFFIRMATIVE**

Government agencies require periodic reports on sex, ethnic background, handicap and veteran status of any and all applicant's.

This data is for analysis and affirmative action only. **Submission of information in this section is voluntary**

Please check one: Male _____ Female _____	
Race ethnic group:	white _____ Black _____ Cape Verdean _____ Hispanic _____
American Indian / Alaskan Native _____	Asian / Pacific Islander _____ Other: _____ Specify _____

**ADDENDUM**

Use this section as an addendum or supplemental to any question you responded to. Please indicate page number:




# Code of Ethics

**The orderly and efficient operation of a Bristol County correctional facility requires that employees maintain discipline and proper personal standards of conduct at all times.**

The following are some examples of rules of conduct. See policy number BCSO 01.07 for a complete version of the Bristol County Sheriff's Office Code of Ethics policy.

**Relationships with clients, colleagues, other professionals and the general public:**

All BCSO staff members shall respect and protect the civil and legal rights of all clients, shall serve each case with the appropriate concern for the client's welfare and with no purpose of personal gain, shall be of such character as to promote mutual respect with the profession and improvement of its quality and service, and shall respect and protect the rights of the public and be safeguarded from criminal activity.

**Professional Conduct and Practices:**

No BCSO staff member shall use his/her official position to secure privileges or advantages for him or her, shall not accept any gift or favor of a nature to imply an obligation, each staff member shall report without reservation any corrupt or unethical behavior that could affect either a client or the integrity of the organization, shall not discriminate against any client, employee or prospective employee on the basis or race, color, sex, religious, age, handicap, creed or national origin.

**Conflicts of Interest: Gifts and Political Activities**

No staff member of the Bristol County Sheriff's Office, consultant or contractor to the Sheriff's Office or any staff members family shall be able to accept a gift or loan made either directly or indirectly to someone acting on behalf of the intended recipient from the following individuals: *Former inmate, Member of a present or former inmate's family, Person, Group or organization acting on behalf of present or former inmates.* Any staff member unknowingly accepts a gift must report the matter to the Sheriff of Bristol County as soon as possible after the discovery.

**Inmate Record Information:**

No BCSO staff member shall disclose criminal offender record information (CORI) except to authorize agencies and individuals and as directed by the Criminal History Systems Board regulations. A staff member in violation of this policy is subject to a fine of up to \$5,000 and /or imprisonment for up to one year.

**Sexual Harassment:**

Any employee found to have engaged in sexual harassment in violation of this policy of the Bristol County Sheriff's Office Sexual Harassment policy (BCSO 03.05) shall be subject to disciplinary action, up to and including, termination of employment.

**Reportable Information:**

A BCSO staff member is responsible for promptly reporting the following information to the ADS Human Resources and the facility Deputy Superintendent: *Change in home address, summer address or telephone number, the commitment of a relative or close friend, any involvement with law enforcement, including investigation, arrests, court appearances, and any other employment or second job.*

**I have read the above and understand that I am responsible for reviewing and making myself familiar with the complete Bristol County Sheriff's Office Code of Ethics Policy (BCSO 01.07) if I am appointed as an employee of this agency.**

I understand that my application for employment with the Bristol County Sheriff's Office is not complete and will not be accepted unless I enclose the following documents.

- \_\_\_\_\_ **Copy of my valid Driver's License**
- \_\_\_\_\_ **Copy of my High School Diploma or Equivalency \***
- \_\_\_\_\_ **Copy of Proof of Citizenship**

I further understand that it is my responsibility to make sure to submit a complete application for employment in order to be considered for an interview.

\* Unless otherwise specified for posted positions

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

## Applicant Notification and Release

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability. Federal, State and local government are not affected by the law.

An applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. An applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" to an inquiry herein relative to prior arrests or criminal court appearances. In addition, any applicant for employment may answer "no record" with respect to any inquiry to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court from criminal prosecution.

You may include any verified work performed on a volunteer basis.

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during interviews, can be justification for refusal of employment, or if employed, termination from employment.

Any offer of employment that I receive from the Bristol County Sheriff's Office is contingent upon my successful completion of the pre-employment screening process, including Bristol County Sheriff's Office receiving references that it considers satisfactory, and my satisfactory completion of any post-offer, pre-employment physical examination that Bristol County Sheriff's Office may require.

I understand that, as a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, I may be required to submit to an alcohol or drug screening at any time at the discretion of the Bristol County Sheriff's Office.

In processing my application for employment, the Bristol County Sheriff's Office may verify all of the information provided by me, or may produce or have prepared a consumer or an investigative consumer report for this purpose concerning, among other things, my prior employment or military record, education, character, general reputation, personal characteristics, criminal record, and mode of living. I understand that upon written request to the Bristol County Sheriff's Office, I will be informed whether an investigative consumer report was requested and given full information as to the nature and scope of this investigation.

I authorize and request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment. I hereby release my present and former employers and those individuals I have listed as personal references from any and all liability for damages arising from furnishing the requested information.

**The Bristol County Sheriffs' Office is a law enforcement agency. All employment applicants are subject to a background investigation. Applicants are advised that any false or misleading statements in the employment application may lead to rejection of application or dismissal after hiring.**

## AUTHORITY FOR RELEASE OF INFORMATION

I \_\_\_\_\_, born at \_\_\_\_\_, on \_\_\_\_\_, having filed an application for employment with the Bristol County Sheriff's Office, consent to have an investigation made as to my moral character, reputation, and fitness for the position to which I have applied and such information as may be received, reported to the appointing authority. I agree to provide any further information, which may be required in reference to my past record.

I also authorize and request, every person, firm, company, corporation, government agency, court, association or institution having control of any documents, records and other information pertaining to me, to furnish to the Bristol County Sheriff's Office any such information, including documents, files, records, files regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, and to permit the Bristol County Sheriff's Office or any of its agents or representatives to inspect and make copies of such documents, records, and other information.

Specifically, I hereby authorize the release of the following data or records to the Bristol County Sheriff's Office:

I hereby release, discharge, and exonerate the Bristol County Sheriff's Office, its agents and representatives, and any person so furnishing information from any liability of every nature and kind arising out of furnishing or inspection of such documents, records, and other information or investigations made by or on behalf of the Bristol County Sheriff's Office.

This authority shall continue for one year unless sooner revoked in writing by the undersigned.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address