



# COOS COUNTY SHERIFF'S OFFICE

## COOS COUNTY SEARCH & RESCUE VOLUNTEER APPLICATION

1. Volunteer Position Applying For: \_\_\_\_\_

2. Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
                    LAST                      FIRST                      MI.

a. Other Names used: \_\_\_\_\_

3. DOB: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

4. Mailing address: \_\_\_\_\_

5. Physical address: \_\_\_\_\_

6. Have you ever been convicted of a crime?  YES  NO (Exclude cases processed in juvenile court and minor traffic violations.) Conviction does not necessarily disqualify you from volunteering.

Do you currently have any pending criminal charges  YES  NO

If yes to either, explain: \_\_\_\_\_

\_\_\_\_\_

7. Driver's License Number: \_\_\_\_\_ State of issue: \_\_\_\_\_

Has your license been restricted, suspended or revoked in last 5 years?  YES  NO

8. Education History:

Did you graduate from high school?  YES  NO If no, do you have your GED?  YES  NO

\_\_\_\_\_  
Name & Location: From-To (Mo/Yr): Fields of Study (Major/Minor): Credit Hrs: Certificates/Degree

\_\_\_\_\_  
Name & Location: From-To (Mo/Yr): Fields of Study (Major/Minor): Credit Hrs: Certificates/Degree

9. List any special skills, additional training, licenses or certificates you have that are pertinent to the position for which you are applying:

\_\_\_\_\_

10. REFERENCES: List names of 3 persons, other than former employers and relatives having knowledge of your character, experience or ability:

\_\_\_\_\_  
Name, Address, Business, Phone Number

\_\_\_\_\_  
Name, Address, Business, Phone Number

\_\_\_\_\_  
Name, Address, Business, Phone Number

11. Do you have any relative(s) currently employed by Coos County?  YES  NO

12. Employment History – Begin with your present or most recent employment, include the last 8 years. In addition, list any other prior experience related to duties of the position applied for.

Employing name/Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates employed(yr/mo): \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employing name/Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates employed(yr/mo): \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employing name/Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates employed(yr/mo): \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employing name/Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates employed(yr/mo): \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employing name/Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates employed(yr/mo): \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

13. Remarks: Use this space for additional details and clarification. You may also attach any additional information, i.e. resume, letters of recommendation.

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14. I understand that to ensure that I am not placed in a position which might be a hazard to me or others, a physical exam or other forms of testing relating to my physical condition may be required upon offer of employment at Coos County's expense and authorize release of information to Coos County, and I release Coos County from any and all liability related to the examination and/or testing.

I certify that the facts and information in the application and in any attachment or supporting documents are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission, as well as any misleading statements or omissions, will be cause for denial of employment or immediate termination, regardless of when or how discovered.

I authorize the investigation of all matters which Coos County deems relevant to my qualification for employment, including all statements contained in this application and in any attachments or supporting documents. I authorize you to request and receive such information and I release from all liability any persons (such as former supervisors and managers) or employers supplying it. I also release Coos County from all liability which might result from making the investigation.

I have read the above statements and reviewed all the information I provided in this application and in any attachments or supporting documents.

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

Unsigned applications will not be processed

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The County is an equal opportunity employer and is committed to complying with all applicable federal, state, and local employment practice laws. Coos County strictly prohibits and does not tolerate discrimination against employees, applicants, or any other covered persons because of race, color, religion, creed, national origin or ancestry, ethnicity, sex (including pregnancy and sexual orientation), gender (including gender nonconformity and status as a transgender individual), age, physical or mental disability, citizenship, past, current, or prospective service in the uniformed services, genetic information, or any other characteristic protected under applicable federal, state, or local law. All Coos County Elected Officials, employees, volunteers, interns, and representatives are prohibited from engaging in unlawful discrimination. Coos County endeavors to maintain a harassment-free, drug & alcohol-free and violence-free workplace.

Under provisions of the Immigration Reform and Control Act of 1986, Coos County requires any person hired or rehired to provide evidence of identify and eligibility for employment.

NOTE: If you believe your civil rights in employment matters have been violated at any time during the course of your consideration for employment, please contact the Personnel Office.