



Chester County Sheriff's Office

Correction Officer

Requirements and Job Description

Requirements:

Must have a high school diploma or a GED

Must have a valid Tennessee Driver's License

Must be able to pass a drug test

Must pass physical

Must pass background check

Must be able and willing to work any shift, holidays and weekends

Must be willing to continue annual training

Job Description consist but is not limited to the following:

Booking in new inmates

Releasing inmates

Making security and wellness checks

Assisting Medical Staff

Passing meals to inmates

New officer certification through TCI

Transporting inmates to and from the facility

Assuring inmates in custody are secure and safe

Performing various duties to assist fellow officers



Chester County Sheriff's Office

333 Eric Bell Drive

Henderson, TN. 38340

Sheriff's Office (731) 989-2449

Jail (731) 989-5409

Sheriff: Mark Griffin

Correction Officer Job Application

The Chester County Sheriff's Office is an equal opportunity employer and does not discriminate on the basis of race, sex, color, religion, national origin, age, disability, or veteran status in employment opportunities and benefits.

Overview of the hiring and employment process: This application is but one part of the hiring process. Other steps may include an interview, job shadow, physical, psychology evaluation, drug test, driving history and background check.

Prior to completing this application be sure to read the job description of the position for which you are applying. As you complete this application, please be aware of the following:

- We reserve the right to check all information for accuracy and completeness
- All applications for employment are a matter of public record
- Must be available to work any shift

Personal Information (please print)

Name: (Last, First, Middle): _____ Date: _____

Sex: _____ Social Security: _____ Date of Birth: _____

Phone Number: _____ Email: _____

Physical Address: _____ City: _____ State: _____

Driver's License Number: _____ State: _____ Exp. Date: _____

Age: _____ Marital Status: _____ Spouse's Name: _____

Emergency Contact: _____ Relationship: _____

Emergency Contact's Phone Number: _____

Have you ever been arrested for or convicted or pled guilty to any felony or misdemeanor?

Yes _____ No _____

If YES, please explain and provide year:

Have you ever served in the military? Yes ____ No ____ If YES, what branch? _____

How discharged? _____

Your Education and Training

High School Attended: _____

City: _____ State: _____

Do you have a high school diploma? Yes _____ No _____ GED _____

College/ University/ Trade School/ Business School	City	State	Degree Earned
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List other training received (special courses, work training programs, armed forces training, etc.)

List special qualifications and skills (license s, skills with machines, etc.)

Based on the job description that you are applying for: Are you able to perform the essential functions of the job which you have applied? Yes _____ No _____

References

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Please list at least persons, other than relatives or former employers who have knowledge of your character and/or abilities:

Name	City/ Town and State	Years known	Phone Number
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Prior Employment Information

List below all present and past employment information and/or substantive volunteer work starting with the most recent:

Name and address of current or most recent employer:

Phone Number: _____ Supervisor: _____

Your job title and responsibilities:

Reason for leaving: _____

From; _____ To: _____

Name and address of previous employer:

Phone Number: _____ Supervisor: _____

Your Job title and responsibilities:

Reason for leaving: _____

From: _____ To: _____

Name and address of previous employer:

Phone Number: _____ Supervisor: _____

Your Job title and responsibilities:

Reason for leaving: _____ From: _____ To: _____

*****IMPORTANT*****

I hereby affirm that the information provided on this application (and accompanying resume, if provided) is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me for further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I waive any right of privilege, privacy, and/or confidentiality I may have in the information provided by references or others whom I have indicated may be contacted.

Applicant Signature: _____ Date: _____

Please return completed application and Wavier on following page to:

333 Eric Bell Drive, Henderson, TN. 38340 Suite B.



Chester County Sheriff's Office Wavier

I DO HEREBY AUTHORIZE THE RELEASE TO THE CHESTER COUNTY SHERIFF'S OFFICE ANY AND ALL RECORDS OR OTHER INFORMATION THEY WISH TO OBTAIN TO HELP DETERMINE MY ELIGIBILITY FOR EMPLOYMENT. THIS INCLUDES MY CRIMINAL FELONY AND/OR MISDEMEANOR RECORDS FROM ANY LAW ENFORCEMENT AGENCY OR ANY BRANCH OF THE UNITED STATES MILITARY. THIS ALSO INCLUDES RECORDS FROM ANY PAST OR PRESENT EMPLOYERS OR EDUCATIONAL, MEDICAL OR INSURANCE ENTITIES. THIS ALSO INCLUDES WEB SITES, INTERNET WEB POSTINGS, SOCIAL MEDIA, INTERNET BLOGS ON ANY AND ALL SITES.

I SO INDEMNIFY AND HOLD HARMLESS ANY INDIVIDUAL, INCLUDING THE CHESTER COUNTY SHERIFF'S OFFICE AND ITS AGENTS, WHO MAY PROVIDE NEGATIVE OR DEROGATORY INFORMATION ABOUT ME. I DO THIS VOLUNTARILY FOR THE PURPOSES OF ASSISTING THE CHESTER COUNTY SHERIFF'S OFFICE IN MY BACKGROUND CHECK.

HAVE YOU EVER BEEN CONVICTED OF ANY MISDEMEANOR, FELONY OR OFFENSE WHERE A FAMILY MEMBER WAS THE VICTIM OR ANY VIOLENT CRIME THAT WAS CONSIDERED DOMESTIC VIOLENCE? YES ___ NO ___

HAVE YOU EVER BEEN CONVICTED OF ANY TYPE OF A MISDEMEANOR OR FELONY? YES ___ NO ___

NAME OF APPLICANT (PRINT): _____ DATE: _____

ADDRESS: _____

CITY/ STATE/ ZIP CODE: _____

SS#: _____ DATE OF BIRTH: _____

DRIVERS LICENSE #: _____ CITY/ STATE: _____

DL EXPIRATION DATE: _____

I HAVE READ AND UNDERSTAND THE ABOVE AND SWEAR OR AFIRM THAT ALL ANSWERS ARE TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT: _____ DATE: _____

EMAIL ADDRESS: (OPTIONAL ON THIS FORM) _____

NOTARY: _____ DATE: _____

Complete