



## TALBOT COUNTY SHERIFF'S OFFICE

115 West Dover Street  
Easton, MD 21601  
410-822-1020

Sheriff Joseph J. Gamble



### **ENTRY LEVEL DEPUTY SHERIFF RECRUIT**

**Starting Salary \$40,000**

Talbot County Deputy Sheriffs are fully sworn police officers and perform a broad range of law enforcement functions. Duties include the enforcement of Maryland's Criminal, Civil and Traffic Laws; Service of Civil/Criminal Process, Judicial Security, Prisoner Transports, Fugitive/Warrant Investigation and Out of State Extraditions, Domestic Violence Enforcement and Landlord/Tenant Evictions. Deputy Sheriffs are classified as **essential employees** and subject to inclement weather and alternate shifts.

It is the policy of Talbot County and the Sheriff's Office not to discriminate against anyone and to afford equal employment opportunity to all applicants. To be considered for employment the applicant must be 21 years old, a United States Citizen, have a high school diploma or equivalent, have a valid Driver's License and have no felony or serious misdemeanor convictions.

The hiring process for Deputy Sheriff Recruit candidates is designed to help select those applicants who are most qualified. The candidate must successfully complete each step of the following in order to advance to the next stage.

#### **Physical Ability Test**

You will be evaluated based on a standardized set of criteria. The standards are as follows:

- \* **FLEXIBILITY:** measured by a sit and reach test. Using a box designed for this exercise, the candidate will sit down and place their feet flush on the flexibility box. The candidate will be asked to push a small wooden block forward.
- \* **STRENGTH:** measured by the number of push-ups performed in one Minute.
- \* **MUSCULAR:** endurance measured by the number of bent-leg sit-ups performed in one minute.
- \* **CARDIOVASCULAR:** endurance measured by a 1 ½ mile run/walk.
- \* **HANDGUN TRIGGER PULL:** must pull trigger ten (10) times with Each hand.

The candidate must achieve the following minimum score:

<u>MALE</u>	<u>SIT-UP</u>	<u>FLEX</u>	<u>Push-Ups</u>	<u>1 ½ MILE RUN</u>
20-29	38	16.5 in.	29	12:51
30-39	35	15.5 in.	24	13:36
40-49	29	14.3 in.	18	14:29
50-59	24	13.3 in.	13	15:26

<u>FEMALE</u>	<u>SIT-UP</u>	<u>FLEX</u>	<u>Push-Ups</u>	<u>1 ½ MILE RUN</u>
20-29	32	19.3 in.	15	15:26
30-39	25	18.3 in.	11	15:57
40-49	20	17.3 in.	09	16:58
50-59	14	16.8 in.	08	17:54

### *Oral Interview*

### *Polygraph & Background Investigation*

### *Medical & Psychological Examinations*

### **Selection Committee**

Upon the completion of all the above-listed steps, the candidate's employment package will be submitted to the Administrative Lieutenant. The Administrative Lieutenant will ensure a comprehensive review is conducted on all elements of the process. The Administrative Lieutenant will then recommend to the Sheriff the candidate(s) most qualified for the position of Deputy Sheriff Recruit. The Sheriff will then make the final review and selection.

### **Police Academy**

The selected candidate(s) will be required to successfully complete an approved Maryland Police Training Commission (MPTC) accredited Police Academy during their first year of employment.

Anyone interested in a career as a Deputy Sheriff with the Talbot County Sheriff's Office should contact us at (410) 822-1020 for an employment application.

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Joseph J. Gamble  
Sheriff



Fax  
410-770-8110

**TO: All Talbot County Sheriff's Office Applicants**

**SUBJECT: Truthfulness**

One of the most critically important issues that define the effectiveness of any organization is the perception that it is a credible organization. Central to that image is the integrity and truthfulness of its police officers and all its employees; from the newest person hired through the long term tenured managers.

The need for honest, impartial and accurate representation of facts is the cornerstone of any police organization where success or failure rests with the degree of public trust and support that it receives. Public support can quickly erode or fade where there is a lack of credibility in any person, program, or outreach of an organization.

The very basis of an individual's integrity, as perceived by the public, friends and fellow workers is at stake whenever the truth is not told. The loss of integrity by an individual or group of individuals can quickly spread throughout the law enforcement organization.

As Sheriff of Talbot County, it is my responsibility to maintain the effectiveness of the Office of Sheriff of Talbot County as a viable law enforcement agency. This document serves notice that I will not tolerate lying of any kind by any member of this Office, including applicants. You are to be advised that all information disclosed or developed during the application process may be verified by means of a polygraph examination.

Any statements or omissions, either written or verbal that are given by any applicant with the intent to deceive will result in the rejection from further consideration for employment with the Talbot County Sheriff's Office. There is no substitute for the truth.

Joseph J. Gamble  
Sheriff of Talbot County

JJG:mumg



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### **EMPLOYMENT APPLICATION PACKET**

Enclosed is the Talbot County Sheriff's Office personal history questionnaire which must be completed. This questionnaire/application must be returned to the Sheriff's Office. It will also be necessary to attach a **copy** of the following:

1. Birth Certificate
2. High School Diploma or Equivalence Certificate
3. College Transcripts
4. Driver's License
5. Naturalization Papers, if applicable
6. Military Discharge (DD214), if applicable
7. Social Security Card

**CAUTION:** Do not misstate, falsify or omit material facts. The facts and statements will be verified to determine your qualifications for employment. Any misrepresentations, falsifications or omissions of material will be justification for rejection.

The background investigation will not be completed and employment will not be considered until all materials have been accepted.

The application packet must be returned within (14) fourteen days of receipt. If there are any problems in any of the areas contact the Sheriff's Office.



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AUTHORIZATION TO RELEASE INFORMATION

I, \_\_\_\_\_
Last First Middle Race Sex DOB
Address City State Zip Code Social Security #

Do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Talbot County Sheriff's Office, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature. The intention of this authorization is to provide information which will be considered in determining my suitability for employment with the Talbot County Sheriff's Office.

The intent of this authorization is to give my full and complete disclosure of the records of educational institutions; financial or credit institutions (see separate consent for credit); medical and psychiatric treatment and/or consultations, including hospitals, clinics, private practitioners, and the U.S. Department of Veteran's Affairs; public utility companies, employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and salary records; real and personal property tax statements and records, and other financial statements and records wherever filed; records complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal and/or traffic records; records of complaints of a civil nature made by or against me, wheresoever located, and to include the records and recollections of attorney at law, or of other counsel, whether representing me or another person in any case in which I presently have, or have had an interest.

I also consider this an acknowledgment and permission for the Talbot County Sheriff's Office to conduct a background investigation knowing that I will not be informed of any information or facts developed by that investigation, other than credit history, whether I am accepted or rejected for the position.

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.

Applicant

Witness

Date

Date



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**Notary Public Certification**

State of Maryland, County of \_\_\_\_\_

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a notary public for said state and county, personally appeared and made oath in due form of law that he/she has executed this authorization for release of information in the capacity therein stated and for the purpose therein contained. In witness, I here unto set my hand and official seal.

\_\_\_\_\_  
**Notary Public Signature**

**My commission expires:** \_\_\_\_\_

**Affix Official Seal**



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### **NOTIFICATION OF VERIFICATION OF CREDIT HISTORY GENERAL CONSENT**

I, \_\_\_\_\_ have been advised that a report of my credit history will be performed by the Talbot County Sheriff's Office as a condition of employment. This check will include all financial and credit institutions, including records of deposits, withdrawals and balances of checking and savings accounts, and loans. It will also include the records of commercial and retail credit agencies (including credit reports and/or ratings).

I understand that, by law, if I am turned down for the position for which I have applied due to a negative credit report, the Sheriff's Office must provide me with:

- a) a copy of **only** the credit report, and;
- b) written instructions as to how to challenge the accuracy of that report.

**This must be done prior to a final decision not to hire.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witnessed By (Print Name)

\_\_\_\_\_  
Witness Signature



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**EMERGENCY MEDICAL ALERT CARD**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Allergies/Medications: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2<sup>nd</sup> Contact Person: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell Phone: \_\_\_\_\_





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EMPLOYMENT APPLICATION

Position Applied For: \_\_\_\_\_

- A) This application must be completed in Ink, Printed or Typed.
B) Failure to disclose all information truthfully will result in the automatic disqualification of your application.
C) Any questions requiring additional space, place on an attached sheet.

PART I - PERSONAL INFORMATION:

1. Name: \_\_\_\_\_
Last First Middle

2. Address: \_\_\_\_\_
Number & Street City State Zip Code

3. How long at present address? \_\_\_\_\_ Home Phone Number: \_\_\_\_\_
Pager Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_
Whom do you live with at this address? \_\_\_\_\_

4. List any previous address(es) you have had in the past ten years.
\_\_\_\_\_
\_\_\_\_\_

5. Date of Birth \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair Color \_\_\_\_\_
Social Security No. \_\_\_\_\_ Eye Color \_\_\_\_\_ Blood Type \_\_\_\_\_

6. Have you ever changed your name? \_\_\_\_\_ If Yes, complete below.
Date of Change \_\_\_\_\_ Reason (marriage, divorce, etc.) \_\_\_\_\_
Name changed from \_\_\_\_\_ to \_\_\_\_\_

**PART II – MOTOR VEHICLE INFORMATION:**

- 1. Driver's License number: \_\_\_\_\_ State: \_\_\_\_\_  
 License Type: \_\_\_\_\_ Date of Expiration: \_\_\_\_\_ Restrictions: \_\_\_\_\_
- 2. Has your license to drive ever been refused, suspended, cancelled or revoked? \_\_\_\_\_  
 If Yes, give details: \_\_\_\_\_
- 3. Do you own a motor vehicle? \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_  
 Tag #: \_\_\_\_\_ State: \_\_\_\_\_

**PART III – FAMILY RELATIONSHIPS:**

- 1. Father: \_\_\_\_\_ DOB: \_\_\_\_\_  
                     First                    Middle                    Last  
 Address: \_\_\_\_\_  
                     Number & Street                    City                    State                    Zip Code  
 Occupation/Employer: \_\_\_\_\_
- 2. Mother: \_\_\_\_\_ DOB: \_\_\_\_\_  
                     First                    Middle                    Last  
 Address: \_\_\_\_\_  
                     Number & Street                    City                    State                    Zip Code  
 Occupation/Employer: \_\_\_\_\_
- 3. Brother/Sister: \_\_\_\_\_ DOB: \_\_\_\_\_  
                     First                    Middle                    Last  
 Address: \_\_\_\_\_  
                     Number & Street                    City                    State                    Zip Code  
 Occupation/Employer: \_\_\_\_\_  
  
 Brother/Sister: \_\_\_\_\_ DOB: \_\_\_\_\_  
                     First                    Middle                    Last  
 Address: \_\_\_\_\_  
                     Number & Street                    City                    State                    Zip Code  
 Occupation/Employer: \_\_\_\_\_

4. Spouse: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
                                First                                Middle                                Last

Address: \_\_\_\_\_  
                                Number & Street                                City                                State                                Zip Code

Spouse's Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_ DOB: \_\_\_\_\_

5. List full names and DOB's of your children:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. If you live with someone other than those family members listed above, identify below:  
Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
                                First                                Middle                                Last

Occupation/Employer: \_\_\_\_\_

7. How many times were you previously married? \_\_\_\_\_ How was the marriage(s) dissolved?  
(Divorce, death, etc.) \_\_\_\_\_  
\_\_\_\_\_

**PART IV – MILITARY:**

1. Have you ever been a member of the armed forces? \_\_\_\_\_  
Branch of Service: \_\_\_\_\_ Present Status: \_\_\_\_\_  
Serial Number: \_\_\_\_\_ Reserve Unit: \_\_\_\_\_  
Date of Entry: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_  
Highest Rank: \_\_\_\_\_  
Were you ever subjected to military discipline? \_\_\_\_\_  
If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

2. Have you registered for the draft? \_\_\_\_\_

**PART V – EDUCATION:**

1. High School:  
\_\_\_\_\_  
                                Name                                Full Address  
\_\_\_\_\_  
                                Graduation Date: \_\_\_\_\_

Were you ever suspended or expelled? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

If you did not graduate, do you hold a High School Equivalency? \_\_\_\_\_ If Yes, complete below:

Certificate No. \_\_\_\_\_ Date: \_\_\_\_\_ State: \_\_\_\_\_

2. College:

Name & Locations of College or University	Dates Attended From - To	Credit Hours Semester - Quarter	Degree Rec'd	Year Rec'd
--	-----------------------------	------------------------------------	-----------------	---------------

\_\_\_\_\_  
\_\_\_\_\_

List your college major: \_\_\_\_\_

3. Other schools or training (trade, vocational, business or military). For each, give the name, location, dates attended, subject studied and any other data.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART VI – CRIMINAL RECORD:**

1. Have you ever been arrested for a criminal violation? \_\_\_\_\_  
If Yes, give details: date, location, etc. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Have you ever been held, detained or questioned by any law enforcement agency regarding any criminal matters? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Have you ever been or are you currently under the supervision of a parole or probation agent? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

**PART VII – UNDETECTED CRIMES**

1. Have you ever committed an act that you were not caught doing, but if caught, you would have been arrested? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

2. Have you ever filed an insurance claim that was not accurate (overestimating losses)? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

3. Has a law enforcement agency ever been called because of something that you were involved in? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

- 4a. When did you last write a check that bounced or have you ever written a check that there were no funds to cover the value of the check? \_\_\_\_\_  
\_\_\_\_\_
- 4b. How many in your lifetime? \_\_\_\_\_ Have you ever written a check using another person's name? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
5. Have you ever used a fraudulent document to obtain money? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
6. Were you ever in a fight in which a weapon was used? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
7. Have you ever injured or caused the death of another person? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
8. Have you ever physically abused a spouse, girlfriend, boyfriend or child? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
9. Have you ever intentionally damaged property belonging to another person? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
10. Have you ever filed a false police report? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
11. Have you ever participated in a riot or disturbance? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
12. Since you have been an adult (18 years old), have you ever had any sexual involvement with someone under 18 years old? \_\_\_\_\_ If Yes, how old were they? \_\_\_\_\_ How old were you? \_\_\_\_\_ How long ago? \_\_\_\_\_ Give details: \_\_\_\_\_  
\_\_\_\_\_
13. Have you ever sexually assaulted anyone? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
14. Have you ever engaged in prostitution or used the services of a prostitute? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
15. Have you ever been questioned by a law enforcement agency as a suspect in an investigation? (Do not include situations in which you were a victim or witness to a crime). \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

- 16. Other than what has already been covered, have you been involved in anything that you could have been arrested for? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 17. Have you ever belonged to, or associated with anyone belonging to any organization, past or present, that would place the integrity of the Talbot County Sheriff's Office in question? (e.g., KKK, Nazi Organization, Gang Member, Organized Crime) \_\_\_\_\_  
If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 18. Do you now or have you ever had regular associations with persons whom you knew or should have known, were under criminal investigation or who had a reputation in the community or with law enforcement agencies for involvement in criminal behavior? \_\_\_\_\_  
If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

**PART VIII – QUESTIONS FOR CURRENT OR FORMER LAW ENFORCEMENT OFFICERS:**

- 1. Have you ever accepted a bribe? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 2. Have you ever been accused of using excessive force? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 3. Have you ever witnessed an excessive force situation? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 4. Have you ever been the subject of an Internal Investigation? \_\_\_\_\_ If Yes, list in chronological order, short synopsis and outcome to include discipline received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 5. Do you have any active or pending Internal Investigations or discipline? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 6. Have you ever been disciplined as a Law Enforcement Officer? \_\_\_\_\_ If Yes, please include oral & written reprimands, suspensions and anything that was purged from your file:  
\_\_\_\_\_  
\_\_\_\_\_
- 7. Have you ever lied under oath? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 8. As a Law Enforcement Officer, have you ever engaged in any sexual act while on duty? \_\_\_\_\_  
If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 9. Have you ever been involved in any shooting incident? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 10. Have you ever been the subject of a Grand Jury Investigation? \_\_\_\_\_ If Yes, give details:  
\_\_\_\_\_  
\_\_\_\_\_
- 11. Have you ever been involved in any on-duty motor vehicle accident? \_\_\_\_\_ If Yes, please list each one and who was at fault: \_\_\_\_\_  
\_\_\_\_\_
- 12. Have you ever removed, destroyed or altered police records or files? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 13. Have you ever had any sexual involvement with a juvenile? \_\_\_\_\_ If Yes, give details:  
\_\_\_\_\_  
\_\_\_\_\_
- 14. Since becoming a Law Enforcement Officer, have you used any illegal drugs? \_\_\_\_\_  
If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
- 15. Have you ever falsified any type of official report? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 16. Have you ever taken anything from a place that had already been burglarized? \_\_\_\_\_  
If Yes, please give dollar amount and list items: \_\_\_\_\_  
\_\_\_\_\_
- 17. Have you ever taken any item from an investigative scene? \_\_\_\_\_ If Yes, give details:  
\_\_\_\_\_

**PART IX – EMPLOYMENT HISTORY:**

1. List all employers, from your current or most recent, then backwards in chronological order:

- A. Current/Recent Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_ Position: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_
  - B. Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_ Position: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_
  - C. Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_ Position: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_
- (ANY ADDITIONAL EMPLOYMENT SHOULD BE PLACED ON A SEPARATE SHEET OF PAPER)**

- 2. If now employed, may we seek information from your present employer? \_\_\_\_\_
- 3. Have you ever been discharged from employment? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PART X – FINANCIAL INFORMATION:**

1. List any outstanding debts: \_\_\_\_\_

	Debtor	Amount
_____	Debtor	Amount
_____	Debtor	Amount
_____	Debtor	Amount

2. Are you buying your home? \_\_\_\_\_ Renting \_\_\_\_\_ Monthly Payment \_\_\_\_\_

3. Are you presently or have you ever been in arrears in paying debts? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

4. Are there now or have there been any liens, judgments or attachments filed against you? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

4a. Have you ever been the defendant in a civil suit or is there now pending any civil action against you? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

5. Have either you or your spouse ever been denied credit for any reason other than age? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

6. Have you or your spouse ever filed for bankruptcy? \_\_\_\_\_ If Yes, how many times, dates and what were the circumstances: \_\_\_\_\_  
 \_\_\_\_\_

**PART XI – DRUG USAGE:**

1. Have you ever possessed, sold or used drugs? (This includes experimentation drugs) \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
 \_\_\_\_\_

2. How many times in your life have you used marijuana? (Please include approximate dates and how many times; weekly, monthly) \_\_\_\_\_  
 \_\_\_\_\_



3. When was the last time you used marijuana? \_\_\_\_\_  
\_\_\_\_\_
4. Have you used any of the following? \_\_\_\_\_ If Yes, include the total number of times and the last date used): \_\_\_\_\_
- |  |                           |
|--|---------------------------|
| A. _____ Speed                         | K. _____ Mescaline        |
| B. _____ Barbiturates (Downers)        | L. _____ Steroids         |
| C. _____ Amphetamines (Uppers)         | M. _____ PCP (Angel Dust) |
| D. _____ Rush                          | N. _____ Crack            |
| E. _____ Quaaludes                     | O. _____ Cocaine          |
| F. _____ LSD                           | P. _____ Heroin           |
| G. _____ Hash                          | Q. _____ Ecstasy          |
| H. _____ Ice or Met Amphetamine        | R. _____ Amilnitrates     |
| I. _____ Mushrooms                     | S. _____ Designer Drugs   |
| J. _____ Another Person's Prescription | T. _____ Peyote           |
5. Any other illegal substance not listed: \_\_\_\_\_ If Yes, what was it: \_\_\_\_\_  
\_\_\_\_\_
6. Have you ever used inhalants or any other legal substance to get high? (e.g. Paint Thinner, Aerosol, Glue, etc.) \_\_\_\_\_ If Yes, what was it: \_\_\_\_\_  
\_\_\_\_\_
7. Have you ever been involved in the purchase of any illegal drugs? (Any amount from a joint to a kilo) \_\_\_\_\_ If Yes, include type of drug, the amount, the circumstances and the last time): \_\_\_\_\_  
\_\_\_\_\_
8. Have you ever been involved in the sale of illegal drugs, either directly or indirectly: \_\_\_\_\_  
If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
9. Have you ever set up a drug deal? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
10. Have you ever been in the company of people using illegal drugs? \_\_\_\_\_ If Yes, give details and the last time: \_\_\_\_\_  
\_\_\_\_\_
11. What is the total amount of money you have spent on illegal drugs in your life? \_\_\_\_\_  
\_\_\_\_\_
12. Have you ever stolen money or drugs from another drug dealer? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
13. Have you ever driven a motor vehicle under the influence of illegal drugs? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_
14. Have you ever used medication from another person's prescription to get high? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

15. Have you ever tried to grow or cultivate any illegal drugs? (Include any amount from one seed and up): \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_

16. Explain in detail, any other information related to illegal drug use or involvement which has not been covered; to include transportation, manufacturing, etc.: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART XII – MEDICAL HISTORY:**

1. Describe your present health? \_\_\_\_\_  
\_\_\_\_\_

2. Have you ever filed for or received compensation for an injury sustained either in military service or civilian life? \_\_\_\_\_ If Yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART XIII – REFERENCES:**

1. List three (3) business references: (Do not include past employers)

<u>NAME</u>	<u>FULL ADDRESS</u>	<u>OCCUPATION</u>	<u>YEARS KNOWN</u>	<u>PHONE</u>

2. List five (5) character references who you have known for at least 5 years: (Do not list relatives).

<u>NAME</u>	<u>FULL ADDRESS</u>	<u>OCCUPATION</u>	<u>YEARS KNOWN</u>	<u>PHONE</u>

**PART XIV – MISCELLANEOUS INFORMATION:**

1. Have you ever applied for a position with any other police, fire or protective agency? \_\_\_\_\_  
If Yes, complete below:

Department \_\_\_\_\_ When \_\_\_\_\_ Result \_\_\_\_\_

Department \_\_\_\_\_ When \_\_\_\_\_ Result \_\_\_\_\_

2. List any organizations which you have or now belong to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Do you drink alcoholic beverages? \_\_\_\_\_ If Yes, to what degree:

Seldom \_\_\_\_\_ Moderate \_\_\_\_\_ Regularly \_\_\_\_\_ Socially \_\_\_\_\_

4. What experience do you have with Firearms? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. From what source did you learn about the position for which you are applying? \_\_\_\_\_

\_\_\_\_\_

6. Do you have a pending application for any other employment? \_\_\_\_\_ If Yes, give details:

\_\_\_\_\_  
\_\_\_\_\_

7. Briefly state any qualifications that you have which would be an asset towards your employment with this office: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART XV – APPLICATION SUMMARY:**

For what reason did you apply to the Talbot County Sheriff's Office? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In the area provided to the right, attach a head and shoulders picture of yourself, taken no longer than two (2) years ago.

I understand that each of the statements given in this application will be investigated and any inaccurate, untruthful or misleading statement will be sufficient cause for immediate rejection of the application without appeal.

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

**Any changes of pertinent data contained in the application may be made in writing or calling the: Talbot County Sheriff's Office, 115 West Dover Street, Easton, Maryland 21601 (410) 822-1020**