



Hendry County Sheriff's Office
Sheriff Steve Whidden

Date: _____ Position applied for: _____

Name: _____ SS#: ____/____/____ DOB ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

PRESCREEN QUESTIONNAIRE

A thorough background investigation is a part of the screening process the Hendry County Sheriff's Office uses to ensure that the individuals it hires is worth of the trust and authority vested in them. This prescreen questionnaire is a part of that process. Please read the following questions carefully and answer them as fully and accurately as you can. The information you provide will be checked with other sources and with other employers to whom you have applied for jobs.

If it is determined that the information you have supplied is inaccurate or incomplete, you may be disqualified for the subject issues and for dishonesty during the background investigation. This is a serious matter to the Hendry County Sheriff's Office because honesty is imperative to this agency.

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1.) Will you consent to a thorough background investigation of your character?
If NO, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.) Have you ever applied with the Hendry County Sheriff's Office?
If YES, when _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.) Are you a citizen of the United States? (If no, go to question 4) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.) Are you a Resident Alien, or do you possess a United States Work Permit? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.) Do you possess a High School Diploma or GED? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.) Do you possess a College degree? (Associates, Bachelors, Masters of Doctorate) | <input type="checkbox"/> | <input type="checkbox"/> |

Yes **No**

7.) Have you ever been denied employment, for any reason, by a law enforcement agency?
If YES, please explain _____

8.) Have you ever been terminated by any law enforcement agency?
If YES, please explain _____

9.) Have you ever been terminated or asked to resign from ANY job?
If YES, please explain _____

10.) Have you ever been physically arrested or given a Notice to Appear (copy of charges)
for violation of any city, county, state or federal law?
If YES, please explain _____

11.) Have you ever appeared in any County (including juvenile) as a defendant to answer any
city, county, state or Federal charges?
If YES, please explain _____

12.) Have you ever been detained or stopped by any law enforcement representative, been
the subject of any criminal investigation, or been named as the accused on an indictment
or warrant?
If YES, please explain _____

13.) Have any of your immediate relatives, (spouse, parent, child) been convicted of a felony?
If YES, please explain _____

14.) Have you ever done anything, which if uncovered by law enforcement, would have led
to your arrest?
If YES, please explain _____

- | | Yes | No |
|--|--------------------------|--------------------------|
| 15.) Have you ever taken anything that did not belong to you?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 16.) With the exception of pens and pencils, have you ever taken any property from your employer for your personal use?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 17.) Have you ever been named in or served with an Injunction for Protection Against Domestic Violence?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 18.) Have you ever viewed or downloaded any child pornography?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 19.) Have you ever been arrested for DUI (Driving Under the Influence)?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 20.) Have you ever been arrested for any crime of moral turpitude?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 21.) Have you ever received any tickets for traffic violations on any license that you have held since you began driving?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 22.) Have you ever driven under the influence of alcohol or any other drugs?
(for purposes of this question, "under the influence" means that you may have been Arrested by law enforcement if you have been stopped)
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |

- | | Yes | No |
|--|--------------------------|--------------------------|
| 23.) During the past five (5) years, have you been involved in more than two (2) traffic stops?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 24.) Have you ever signed up for, joined, or served in any US Military branch?
(i.e. Army, Navy, Air Force, Marines, Coast Guard or National Guard)
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 25.) If you have served in the US Military, were you ever disciplined while in the armed forces?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 26.) If you served in the US Military, did you receive a discharge other than Honorable?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 27.) Have you ever used, tried, ingested or experimented with marijuana? (including as a juvenile)
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 28.) Have you ever used, tried, ingested, inhaled, injected or experimented with ANY other type of
Illegal narcotics or other illegal drugs (i.e. cocaine, crack cocaine, heroin, hashish, speed, LSD,
anabolic steroids, etc.)?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 29.) Have you ever <u>sold</u> any type of illegal drugs, <u>delivered</u> illegal drugs, <u>shared</u> drugs with another
person, <u>held</u> drugs for another person, or <u>directed</u> another person where to buy drugs?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 30.) Have you ever used prescription drugs other than your own?
If YES, please explain _____ | <input type="checkbox"/> | <input type="checkbox"/> |

- | | Yes | No |
|--|--------------------------|--------------------------|
| 31.) Are you delinquent in any payments, you owe credit cards, car loans, home loans, personal loans, child support, spousal support, utility bills, taxes, or other debts?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 32.) Have you ever filed for bankruptcy, had any judgements against you, had property repossessed, had a foreclosure against any property you owned, or had an account turned over for collection?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 33.) Do you know of anything that might prevent you from obtaining the position that you have applied for?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 34.) Have you purposely omitted any information from this prescreen questionnaire?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 35.) Which other law enforcement agencies have you applied for?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 36.) Were you able to understand all of the questions in this application? | <input type="checkbox"/> | <input type="checkbox"/> |

THE FOLLOWING QUESTIONS TO BE COMPLETED ONLY BY APPLICANTS WHO ARE CURRENTLY CERTIFIED LAW ENFORCEMENT OR CORRECTION OFFICERS

- | | Yes | No |
|--|--------------------------|--------------------------|
| 37.) Are you a certified law enforcement officer? | <input type="checkbox"/> | <input type="checkbox"/> |
| 38.) Are you a certified corrections officer? | <input type="checkbox"/> | <input type="checkbox"/> |
| 39.) Have you ever been the focus of or a witness in any internal investigation?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 40.) Have you ever been under investigation by your agency or any other government agency?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 41.) Have you ever been terminated or asked to resign from any law enforcement agency?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 42.) Did you ever take a pre-employment polygraph or voice stress exam prior to being hired into law enforcement or corrections?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 43.) Have you ever been sued or caused any law enforcement agency to be sued as a result of your actions or lack of actions?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 44.) Have you ever been found to be at fault in any vehicle crash while on duty?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 45.) Have you ever been demoted as a result of any discipline?
If YES, please explain _____
_____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 46.) What state or local law enforcement agencies have you worked for?
_____ | | |

Drug Use Questionnaire

Other than your own prescriptions, have you ever used or had experimented with any of the following substances, drugs, or narcotics?

Have you ever used:			Last time used:		
<u>Substance</u>	Yes	No	This Past Year	1-5 Years Ago	5 or More Years
Marijuana					
Cocaine					
Steroids					
Quaaludes					
Hashish					
Ecstasy (MDMA)					
Rohypnol (Roofies)					
P.C.P.					
Heroin (Other Opiates)					
Crack Cocaine					
LSD or Other Hallucinogens					
PCP (Angel Dust)					
Barbiturates (Downers)					
Amphetamines (Uppers)					
Methamphetamines					
Fraudulent use of Prescription Drugs					

I do solemnly swear and affirm that I have read and understand these questions and that the information provided above is true and correct to the best of my knowledge.

Your signature must have an HCSO employee witness

Signature

Date

Witness Signature

Date