

Applicant Name

HISTORY

Please list Employment History for last 10 years

Current Employer	Occupation		
Supervisor's Name	Supervisor's Phone Number		
Length of Time Employed	May We Contact Supervisor	Yes	No

1st Previous Employer	Occupation		
Supervisor's Name	Supervisor's Phone Number		
Length of Time Employed	May We Contact Supervisor	Yes	No

2nd Previous Employer	Occupation		
Supervisor's Name	Supervisor's Phone Number		
Length of Time Employed	May We Contact Supervisor	Yes	No

Please account for any gaps in employment history.

If you need additional space to list all employers, please include additional pages at the end.

BACKGROUND CHECK

This position requires a criminal background check. To facilitate this, please list any other names (first, middle and/or last) you have used.

Have you ever been convicted of a crime? Yes No

If yes, please provide details:

VOLUNTEER ASSIGNMENTS

Do you prefer any specific type of volunteer assignments? Yes No

If yes, please specify:

SKILLS AND INTEREST

(Please check all that apply)

Clerical (filing, typing, information desk)

Computer Skills (word process, data entry)

Speak Multiple Languages

Found Property Recovery

Mailings Preparation

Organizational Leadership Skills

Public Speaking

Telephone/Reception (answering questions and gathering information)

Telephone Visitor (contacting citizens who request neighborhood information)

Writing (preparing letters, memos or informational flyers)

I volunteer my services through the Volunteers in Police Services program. I authorize agents of the Scott County Sheriff's Office to conduct a security background investigation to determine whether or not I am qualified for a position in the VIPS program. If selected, I will abide by all laws, ordinances, and policies of the Scott County Sheriff's Office and the Volunteers in Police Services program. I understand that I am a Volunteer and receive no compensation or benefits for my services. I further understand that I may become aware of the confidential, sensitive or criminal intelligence information during my time as a volunteer and that I will not divulge this information to anyone outside the Scott County Sheriff's Office as required by law.

Volunteer Signature

Date

Please return this application to the:

**Scott County Sheriff's Office
400 West 4th Street
Davenport, Iowa 52801**

History continued...

Applicant Name

3rd Previous Employer

Occupation

Supervisor's Name

Supervisor's Phone Number

Length of Time Employed

May We Contact Supervisor

Yes

No

4th Previous Employer

Occupation

Supervisor's Name

Supervisor's Phone Number

Length of Time Employed

May We Contact Supervisor

Yes

No

5th Previous Employer

Occupation

Supervisor's Name

Supervisor's Phone Number

Length of Time Employed

May We Contact Supervisor

Yes

No

6th Previous Employer

Occupation

Supervisor's Name

Supervisor's Phone Number

Length of Time Employed

May We Contact Supervisor

Yes

No

7th Previous Employer

Occupation

Supervisor's Name

Supervisor's Phone Number

Length of Time Employed

May We Contact Supervisor

Yes

No

8th Previous Employer

Occupation

Supervisor's Name

Supervisor's Phone Number

Length of Time Employed

May We Contact Supervisor

Yes

No

9th Previous Employer

Occupation

Supervisor's Name

Supervisor's Phone Number

Length of Time Employed

May We Contact Supervisor

Yes

No