



## **OPEN APPLICATIONS FOR DEPUTY SHERIFF**

**The McLean County Sheriff's Office is now accepting applications for the position of Deputy Sheriff on an ongoing basis for both:**

**Lateral Applicants  
(Previous law enforcement experience)**

**AS WELL AS**

**New Applicants (no experience needed).**

**Applicants can apply ONLINE using CIVICHR ([McleanCountyIL.gov/Jobs](http://McleanCountyIL.gov/Jobs)) OR by printing the Application Packet and turning all requested information into the McLean County Sheriff's Office in person. \*Only fill out PDF Application if you intend to apply in person. If you apply online everything will be collected through the link above.**

**Once application and requested documentation is received by our office, applicants will be contacted to schedule Physical and Written Testing.**

**For any questions, please contact Lt. Jon Albee at 309-888-4943 / [Jonathan.Albee@McLeanCountyIL.gov](mailto:Jonathan.Albee@McLeanCountyIL.gov)**

## TO: DEPUTY APPLICANT

Attached is your application for employment with the McLean County Sheriff's Office.

Please complete the entire application and provide the following materials, which need to be returned with the application when submitted:

- A certified copy of your birth certificate from the county you were born. We **cannot** accept birth certificates issued by the hospital.
- Transcripts from the institution of your highest level of education.
- Transcripts of military service discharge, if applicable.
- A valid driver's license along with two copies of said driver's license.
- Reside within a forty-five mile radius of the McLean County Law and Justice Center, Bloomington, IL, regardless of weather and road conditions, vehicle availability and vehicle performance.

Applicants must attend an orientation meeting and successfully pass the following testing procedures (to be scheduled after receiving Application):

- **Physical Agility Test (Power Test)**
- **Basic Skills Written Exam**
- **Oral Interviews**

Upon successful completion of the above, the Merit Commission then certifies that the applicant is eligible for employment with the McLean County Sheriff's Department and the applicant will be notified by letter that he/she is being placed on the eligibility list.

To be eligible for employment with this department, you will be subject to a medical examination and an intense background check, which will include a polygraph exam, psychological exam and additional oral interviews with the Sheriff's Office Command Staff. You are required to sign an **Authorization for Release of Personal Information** so that the background check can be conducted.

Thank you for your interest in our Office.



Jon Sandage

McLean County Sheriff

# Deputy/Corrections Application

Please take your time to fill out all areas of the application. Be as complete and accurate as possible. If there is a question you are unsure of, leave it blank. If you are notified that a field is required, please complete it to the best of your knowledge before submitting.

**Job Title**

**Requisition Number**

## Personal Data Contact

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**First Name**

**Middle Name**

**Last Name**

**Social Security Number:** \_\_\_\_\_

**If your education and/or employment records cannot be verified using the name and social security number provided, please list all other names and aliases used:**

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**Address**

**City**

**State**

**Zip Code**

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**Primary Phone**

**Alternate Phone**

**Email Address**

## Point of Contact

*Please provide the following requested information of a person who will know where you may be contacted.*

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**Full Name**

**Phone Number**

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**Address**

**City**

**State**

**Zip Code**

## Eligibility

Are you at least 21 years of age?

Yes  No

If not when will you be 21?

Date available for work?

Do you have a legal right to work in the U.S.? Yes  No

If yes, are you able to provide documents as required by law to verify your eligibility to work in the U.S.? Yes  No

## Driver's License

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**Do you have a valid Driver's License?**

Yes

No

**Do you have a CDL Endorsement?**

Yes

No

**Driver's License State:** \_\_\_\_\_

## Previous County Employment

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Have you ever been employed by McLean County? Yes  No

If yes, please list:

From: \_\_\_\_\_ To: \_\_\_\_\_ Department: \_\_\_\_\_

## Education Information

### High School

High School Name \_\_\_\_\_ Did you graduate? Yes  No

City \_\_\_\_\_ State \_\_\_\_\_

### College/University

Name of College/University/Other \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Years Completed: \_\_\_\_\_ Degree: \_\_\_\_\_ Major: \_\_\_\_\_

### Graduate/Professional

Name of College/University/Other \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Years Completed: \_\_\_\_\_ Degree: \_\_\_\_\_ Major: \_\_\_\_\_

### Trade School

Name of College/University/Other \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Years Completed: \_\_\_\_\_ Degree: \_\_\_\_\_ Major: \_\_\_\_\_

## Additional Education Information

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Please list any additional education below.

Describe your extracurricular activities (e.g. professional/student organizations, leisure activities, civic, etc.)

## Employment Information

*Start with your present or last job. Indicate any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, religion, gender, national origin, disability, or other protected status.*

### Most Recent Employer

**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_ **Full Time?** Yes  No

**Position Title:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

**Duties:**

**Reason For Leaving?**

**May we contact for reference?**

### Previous Employer

**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_ **Full Time?** Yes  No

**Position Title:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

**Duties:**

**Reason For Leaving?**

**May we contact for reference?**

## Previous Employer

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**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_ **Full Time?** Yes  No

**Position Title:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

**Duties:**

**Reason For Leaving?**

**May we contact for reference?**

## Previous Employer

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**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_ **Full Time?** Yes  No

**Position Title:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

**Duties:**

**Reason For Leaving?**

**May we contact for reference?**

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**Professional Certifications and Licenses – provide details such as License/Certifications Number, State of Issue, and Expiration Date, as appropriate:**

**Office & Other Skills: Including supervision skills, other languages or information regarding the career/occupation you wish to bring to the County’s attention.**

**Are there any other experiences, skills, or qualifications that you feel would expecially fit you for work with McLean County and/or the position for which you are applying?**

## **References**

*Please provide 3 references.*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Years Known: \_\_\_\_\_

## **Applicant Statement**

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize McLean County to make such investigations and inquiries of my personal and employment history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the County.

I agree  Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Corrections Officer and Deputy Patrol Officer**

*Assesses all of the requirements to be a Correction's Officer or Deputy Patrol Officer.*

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Are you a high school graduate or the certifiable equivalent formal education? Yes  No

Are you willing to undergo a polygraph test? Yes  No

Are you willing to undergo a psychological examination? Yes  No

Are you willing to undergo an intensive background check? Yes  No

Are you willing to undergo a medical examination? Yes  No

Do you live within 1 hour of the McLean County Law & Justice Center? Yes  No







## PERMISSION FOR SECURITY CHECK

I understand that I will have to successfully pass a background investigation, which may include a polygraph test, due to the nature of this position. I hereby give my permission to the McLean County Sheriff's Department to conduct such an investigation.

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Signature of Applicant

Date

### PLEASE PRINT

Full Name: \_\_\_\_\_

List any other names under which your employment and/or education can be verified (including maiden names, etc.):

\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License # \_\_\_\_\_

Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female