



Gwinnett
Corrections

BACKGROUND INVESTIGATIONS UNIT

**PRELIMINARY ORIENTATION BOOKLET
GWINNETT COUNTY DEPARTMENT OF CORRECTIONS
PROFESSIONAL STANDARDS UNIT**

Corrections Applicant,

The following is needed to implement your background investigation. **Please return the Preliminary Orientation Booklet postmarked to the Gwinnett County Comprehensive Correctional Complex, located at 750 Hi Hope Road in Lawrenceville, Georgia. If you choose to bring the booklet to the facility it must be in a sealed envelope.**

.....
Please bring the following original documents to your first scheduled appointment.

1. Driver's License
2. Social Security Card
3. High School or GED Diploma
4. College Diploma
5. Marriage License
6. Divorce Documents
7. Bankruptcy Documents
8. Military Release Documents (DD214)
9. Birth Certificate
10. Naturalization Documents

Failure to produce these documents will result in the delay of your application, and may cause your removal from the selection process.

Also, be prepared to provide the following at your first scheduled appointment:

1. Four (4) personal references (no relatives by blood or marriage) to include complete name and address. Use the attached Personal Reference Sheet. Print legibly
2. Provide a continuous personal history for the past ten years to include all periods of employment, unemployment, education etc. Begin with your current position or status and work backwards. Use the attached Personal History Sheet. Make copies of the blank form as needed.

Have the following documents mailed directly to us from the appropriate sources:

1. High School transcript to verify graduation (N/A for GED graduates)
2. College transcript(s) (if applicable)
3. Past 5 year driving record is required. Provide DMV report from state(s) other than Georgia (if applicable)

The mailing address is, Gwinnett County Comprehensive Correctional Complex
Professional Standards Unit
750 Hi Hope Road
Lawrenceville, GA. 30043

The above mentioned documents are only needed when requested. You are not required to place any documents in the packet when initially returning.

WORK HISTORY

NAME OF ORGANIZATION OR COMPANY	TELEPHONE NUMBER		EMPLOYMENT DATES	
BUSINESS ADDRESS	CITY	STATE	ZIP CODE	TIME EMPLOYED
OFFICIAL JOB TITLE	NAME OF SUPERVISOR		SALARY-START-ENDING	

NAME OF ORGANIZATION OR COMPANY	TELEPHONE NUMBER		EMPLOYMENT DATES	
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Gwinnett

GWINNETT COUNTY
DEPARTMENT OF CORRECTIONS

750 Hi-Hope Road | Lawrenceville, GA 30043-4540
(O) 678.407.6000
www.gwinnettcountry.com | www.gccorrections.com
Warden Darrell Johnson

To: _____

Personal References

Home#: _____
Cell#: _____
Fax#: _____
Email: _____

To Whom It May Concern:

The individual listed below is an applicant with the Gwinnett County Department of Corrections. A very important part of the hiring process is the completion of a thorough background investigation.

On the reverse side of this letter you will find a questionnaire which will provide us with the information needed to consider this applicant for a position with our agency. When completed, return the questionnaire in the enclosed self-addressed stamped envelope.

Full Name (Print or Type):	
Full Name (Signature):	
Date:	Phone Number:
Current Address:	

Thank you in advance for your time and your cooperation in completing this questionnaire. If you have any questions, please contact me at 678-407-6010.

Sincerely,

Lieutenant Audrey Henderson, CCM
Professional Standards Unit
audrey.henderson@gwinnettcountry.com



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(O) 678.407.6000
www.gwinnettcounty.com | www.gccorrections.com
Warden Darrell Johnson

To: _____

Employee Reference

Home#: _____
Cell#: _____
Fax#: _____
Email: _____

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Sincerely,

Lieutenant Audrey Henderson, CCM
Professional Standards Unit
audrey.henderson@gwinnettcounty.com

Gwinnett County Corrections Hiring Process

Applicants for a Correctional Officer position must pass a series of tests to determine if they are suitable candidates for employment. The testing process is divided into two series: "Phase I" and "Phase II". The following is more detailed information on the two testing phases.

PHASE I

Submission of Application

To be considered for employment with Gwinnett County Department of Corrections, you must complete and submit an application to the Gwinnett County Department of Human Resources. Candidates who meet the requirements will continue with the steps in the hiring process. Candidates who do not meet the requirements for applying will be notified with an explanation regarding why they were unable to continue in the hiring process.

Preliminary Orientation

Preliminary Orientation will be held for applicants who passed the initial screening by Human Resources. Applicants will receive a Background Booklet and Departmental Authorization Consent Forms. Applicants will be given a specific date that Background Booklets are to be notarized and returned to the Corrections Department. Returned background booklets will be screened and acceptable applicants will be scheduled for the B-PAD Video Test.

Required Documentation

You will be required to provide the following documentation to the Gwinnett County Department of Corrections:

- Certified copy of birth certificate
- Official transcripts from high school/college in sealed envelope
- Copy of high school diploma or GED
- Copy of driver's license
- Certified copy of driving record
- Copy of social security card
- Individuals with military service must provide a DD214 for each term of service
- Copies of any documentation relating to the following: adoption records, marriage certificates, bankruptcy discharge, divorce decree, etc.

Failure to provide all requested documents will result in your removal from the process.

NOTE: These items will not be returned to you regardless of your outcome in the hiring process.

B-Pad Video (Behavioral Personnel Assessment Devices)

B-PAD is a test of the applicant's interpersonal competence in dealing with different types of people in different job specific situations. Applicants respond verbally to video simulations as if he or she were actually at the scene responding to real people in a real situation. Applicants must successfully pass the video test to continue in the process for the Correctional Officer position.

Background Investigation

A comprehensive background is conducted on each applicant to establish evidence of good moral character and a pattern of conduct acceptable to the Gwinnett County Department of Corrections to include a review of the applicant's credit history, criminal history, and driving history. Also, fingerprints are taken to verify any criminal record. The background investigation remains ongoing throughout the entire hiring process.

Oral Interview

The interview is designed to assess the mental and emotional fitness to function successfully as a Gwinnett County Correctional Officer. Each applicant will be asked questions to evaluate work experience, education and their prospective in dealing with inmates, designed to demonstrate certain knowledge, skills, or abilities considered basic to effectively perform as a Correctional Officer.

POST Entrance Exam

The Georgia Peace Officers Standards & Training Counsel requires that an applicant pass an entrance exam in order to be accepted in to Basic Correctional Officer Training. Several different exam results are accepted. The most common tests are the ACCUPLACER and the COMPASS Exam.

Applicant Register

Applicants who successfully complete Phase I of the hiring process will then be placed on the Applicant Register. Applicants remain eligible for a period of one year and could be selected at any time to be given a Conditional Job Offer. Applicants do not move on to Phase II unless selected and given a Conditional Job Offer.

PHASE II

Polygraph

A certified polygrapher conducts the polygraph examination. The polygraph evaluation measures the accuracy of information provided during the hiring process.

Drug Screen & Medical Assessment

Applicants will be required to undergo a complete physical examination and controlled substance test. Each applicant's medical and physical condition will be assessed to ensure they can function as a Correctional Officer.

Psychological Evaluation

The psychological evaluation consists of a written and an oral examination. The applicant will take a series of written tests to measure a variety of personality and psychological factors related to the field of Corrections. The results of these questionnaires will be reviewed, scored, and will provide the psychologist with information for the applicant's personal interview. Each applicant will then meet with the Department's psychologist for a personal interview. This evaluation measures the psychological suitability for the applicant to work and manage inmates for the Gwinnett County Department of Corrections.

Final Job Offer

Upon successful completion of Phase II of the hiring process, the applicant will receive a Final Job Offer. Upon acceptance, an official hire date will be established and the applicant will become a Gwinnett County employee.

**GWINNETT COUNTY DEPARTMENT OF CORRECTIONS
PROFESSIONAL STANDARDS UNIT**

AUTHORIZATION FOR ACCESS TO CONSUMER / CREDIT REPORT

As required by the Consumer Credit Reporting Reform Act of 1996

I hereby authorize the Gwinnett County Department of Corrections to obtain and/or receive any consumer/credit report pertaining to me which may be in the files of any credit reporting bureau.

The intent of this authorization is to give my consent for full and complete disclosure of financial records, past and present, contained in any financial or credit institutions including, but not limited to, records of loans, the records of commercial or retail credit agencies (including credit reports, and/or ratings) and other financial statements and records wherever filed.

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.

This release is executed with full knowledge and understanding that the information is for the official use of the Gwinnett County Department of Corrections.

I hereby waive and release any claims against any party which I may have as the result of the release of any records or information referenced in this Authorization and acknowledge that no party shall have any liabilities to me as a result of complying with a request for such information and/or records.

PRINT FULL NAME: _____

SIGNATURE: _____

TODAY'S DATE: _____

NOTARY PUBLIC: _____

I further understand if any adverse action relative to employment is taken based on a consumer/credit report, I am entitled to a copy of said report as well as a copy of the Federal Trade Commission's Consumer Rights Notice.

GWINNETT COUNTY DEPARTMENT OF CORRECTIONS

POSITION: _____ **DATE:** _____

APPLICANT NAME: _____

SOCIAL SECURITY NUMBER _____ - _____ - _____

TABLE OF CONTENTS

TITLE	PAGE(S)
Authorization for Release of Personal Records	1
Introductory Letter	2
Instructions	3
Release Form: Authorization for Work Records	4
Check with Present Employer	
Release Form: Work Schedule Acknowledgement	5
Release Form: Military Affirmation	6
PREA Questionnaire	7
Personal Data	8-10
Marital/Family Data	11-12
Residences	13
Education	14-15
Certification Information	16
Employment History	17-19
Financial History	20
Military Service	21-22
Criminal History/Activity	23-25
Motor Vehicle/Driving	26-28
Drug Use	29-30
Alcohol Use/Gambling	31
Miscellaneous Questions	32-33
Essay	34
Sworn Statement	35

**GWINNETT COUNTY DEPARTMENT OF CORRECTIONS
PROFESSIONAL STANDARDS UNIT**

**AUTHORIZATION FOR RELEASE OF PERSONAL RECORDS AND
INFORMATION CONSENT FORM**

I hereby authorize the Gwinnett County Department of Corrections to obtain and/or receive any criminal history record and/or driver history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia or any other state or country.

I also authorize any Professional Standards Unit officer or authorized representative of the Gwinnett County Department of Corrections bearing this release, or copy thereof, within one year of its date, to obtain any information and/or records concerning myself, whether the said information and/or records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the following records and request that the custodians of such records/information permit my records to be examined, copied or otherwise reviewed:

1. Information and/or records from any educational institution that I have attended including, but not limited to, academic achievement, attendance, athletic personal history, and disciplinary actions.
2. Information and/or records from my past or present financial records contained in any financial or credit institutions including but not limited to, records of loans, the records of commercial or retain credit agencies (including credit reports and/or ratings), and other financial statements and records wherever filed.
3. Information and/or records pertaining to my employment, past and/or present, including, but not limited to, current and past employment records, polygraph reports and charts, background reports, efficiency ratings, complaints and grievances filed by or against me, disciplinary records, and personal history. I also release any information concerning pre-employment records for which I am currently or have been an applicant or candidate; these records/information to include, but not limited to, polygraph reports and charts, background reports, and any other information included in my pre-employment file.
4. Information and/or records pertaining to my personal history past and/or present, including, but not limited to, birth records, marriage and/or divorce documents, and name changes wherever filed.

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.

This release is executed with full knowledge and understanding that the information is for the official use of the Gwinnett County Department of Corrections. Consent is granted for the Gwinnett County Department of Corrections to furnish such information as is described above to third parties in the course of fulfilling its official responsibilities.

I hereby waive and release any claims against any party which I may have as the result of the release of any records or information referenced in this Authorization and acknowledge that no party shall have any liability to me as a result of complying with a request for such information and/or records.

I am furnishing my social security number on a voluntary basis with the understanding such is not required by federal statute or regulation. I have been advised that this number will be utilized only to facilitate the location of the above information/records concerning me in the connection with this application. Should there be any questions as to the validity of this release, you may contact me as indicated below.

PRINT FULL NAME: _____
INCLUDE MAIDEN NAME OR OTHER PREVIOUSLY USED NAME

SIGNATURE: _____

DRIVER'S LICENSE NUMBER: _____

STREET ADDRESS: _____

CITY, STATE AND ZIP CODE: _____

PRIMARY TELEPHONE NUMBER: _____ BUSINESS NUMBER: _____
AREA CODE AND NUMBER AREA CODE AND NUMBER

SECONDARY TELEPHONE NUMBER: _____
AREA CODE AND NUMBER

DATE OF BIRTH: ____/____/____ RACE: ____ SEX: ____ SOCIAL SECURITY NUMBER: _____ TODAY'S

DATE: _____ NOTARY PUBLIC: _____

GWINNETT COUNTY CORRECTIONS DEPARTMENT

BACKGROUND INVESTIGATION UNIT

Dear Applicant:

Thank you for taking an interest in Gwinnett County Corrections Department. All applicants for any position within the Gwinnett County Department of Corrections are required to complete an intensive background investigation. This booklet contains numerous release forms and questions which need to be properly completed so that the background investigation can be initiated.

On the next page are instructions for you to read. Make sure that you understand any instructions given to you not only today but throughout the entire employment investigation process. If you do not understand something, please ask the background investigator for clarification.

The recruitment process for employment is time consuming and requires many hours of background investigation. Any applicant, who fails to complete the required forms, and to bring proper documents such as birth certificate, diploma, etc., will be removed from the process. Therefore, in order to give every applicant the best opportunity for employment, the background investigation will not begin on an applicant until all forms and documents are returned to the Professional Standards Unit/Background Investigations. Files not containing all documents will be treated as Incomplete and will not be processed.

Good Luck!

INSTRUCTIONS

1. Fill out the release forms/booklet completely and accurately.
2. Print legibly using black ink.
3. Incomplete release forms/booklets will not be accepted.
4. The information provided by you in this booklet will be used and verified during the entire employment process including, but not limited to, the background investigation and the polygraph examination. Any false or misleading information identified during the employment process will result in the immediate disqualification of your application and could result in criminal prosecution under Georgia Code 16-10-20. It is therefore imperative that you answer all questions truthfully and to the best of your ability.
5. Should any information you have provided us change at any time during this process, YOU MUST NOTIFY the Background investigator handling your file. This includes, but is not limited to, telephone number changes; address changes, marital status, new traffic citations, arrests, etc.
6. READ EACH QUESTION CAREFULLY. Unless otherwise stated, any questions that require a “YES” response or an explanation must be explained on the back of the page you are working on. Indicate the question number and then provide a detailed explanation as to the dates, times, fines, etc. Provide as much information as possible when explaining your answers. One line explanations will not be accepted. Unless otherwise instructed, answer each question as it relates to your entire lifetime not just to your adulthood.
7. If you are unsure as to how to answer a question, answer “YES” and fully explain your answer on the back of the page you are working on.
8. Any information received throughout the employment process, including but not limited to, background booklet, release forms, employment information, psychological reports, credit information, medical information, etc., are the sole property of the Gwinnett County Corrections Department and no information will be released back to the applicant.
9. Due to the large volume of applicants, the Background Investigations Unit of the Gwinnett County Corrections Department and the Human Resources Department at the Justice Center are unable to effectively receive a large amount of telephone calls or unscheduled appointments. It is therefore requested that an applicant not contact either office unless it is an extreme emergency. Extreme emergency including illness, death in one’s immediate family, jury duty, and military duty. If an applicant should move or change his/her telephone number, a letter indicating such is appropriate. You can reach the Background Unit by calling Lieutenant Henderson {(678) 407-6010 or audrey.henderson@gwinnettcountry.com }

Signature of Applicant

Date

Signature of Investigator

GWINNETT COUNTY DEPARTMENT OF CORRECTIONS

RELEASE FORM

AUTHORIZATION FOR WORK RECORD CHECK WITH PRESENT EMPLOYER

If you do not wish us to check with your present employer at this time, it will not be held against you. However, if you are selected to continue in the second phase of the employment process, your present employer will be contacted at that time. Falsification will result in your name being removed from the Applicant Register.

Do you give the Gwinnett County Department of Corrections' Background Investigations Unit investigators permission to conduct a work record check with your present employer at this time?

YES () NO () UNEMPLOYED () SELF-EMPLOYED ()

If you checked NO, list below any/all disciplinary action(s) taken against you by your present employer.

PRINT NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE OF SIGNATURE

NOTARY PUBLIC

GWINNETT COUNTY DEPARTMENT OF CORRECTIONS

RELEASE FORM

WORK SCHEDULE ACKNOWLEDGEMENT

I understand that if I am appointed to the position of _____
for the Gwinnett County Department of Corrections, it will involve working any of numerous
shifts. I understand that I may be assigned to any shift and that at the discretion of my
supervisor, I may be rotated to another shift with little or no notice.

The different shifts that are currently in operation for this position have been explained to
me and I understand that these hours can change at any time with little or no notice.

I understand the above condition and have no objections to them.

PRINT NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE OF SIGNATURE

NOTARY PUBLIC

GWINNETT COUNTY DEPARTMENT OF CORRECTIONS

RELEASE FORM

MILITARY AFFIRMATION

I, _____, do hereby swear and affirm that I have never been enlisted nor have I served in any of the armed forces of the United States or in any foreign military service. I further swear and affirm that I have never served in any branch of the United States Reserve Forces, any State National Guard, or in the Coast Guard.

PRINTED NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE OF SIGNATURE

NOTARY PUBLIC

Prison Rape Elimination Act Questionnaire

PREA

PREA Hiring and Promotions: The Gwinnett County Department of Corrections (GCDC) must adhere to the United States Department of Justice Final Rule on the “National Standards to Prevent, Detect, and Respond to Prison Rape Under the Prison Rape Elimination Act (PREA) Standards” at 28 C.F.R. Part 115 Docket No. OAG-131. GCDC may not hire or promote anyone who may have contact with inmates, residents, or offenders under supervision who answers “Yes” to any of the following questions:

	YES	NO
1. Have you ever engaged in sexual abuse in a prison, jail, community confinement facility, juvenile facility, or other institution?		
2. Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse?		
3. Have you been civilly or administratively adjudicated to have engaged in the activities described?		

I acknowledge and understand that, should I become subject to these prohibitions in my current position or any subsequent department position I may hold, involving contact with persons in confinement or under supervision; I will notify departmental management within twenty-four hours of my involvement in any of the above. I understand the Department has the authority to conduct random criminal background checks to ensure compliance with these federal standards in relation to the Department’s employment practices. Further, I understand that if I am subject to these prohibitions, I may be subject to termination of employment. In addition, if I falsely certify my eligibility for employment and it is subsequently discovered that I have involvement in any of the above, I will be subject to termination or disqualification for employment for the falsification.

PRINTED NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE OF SIGNATURE

NOTARY PUBLIC

PERSONAL

1. Position applied for: _____

2. Today's date: _____

3. Full name: _____
LAST NAME FIRST NAME MIDDLE NAME

4. Home address: _____
STREET ADDRESS

CITY STATE ZIP CODE

5. Home telephone number: _____
AREA CODE AND TELEPHONE NUMBER

Business telephone number: _____
AREA CODE AND TELEPHONE NUMBER

Other telephone number: _____
AREA CODE AND TELEPHONE NUMBER

6. Date of birth: _____
MONTH DAY YEAR

7. Place of birth: _____
CITY COUNTY STATE/COUNTRY

8. Have you ever used another name or had your name changed? YES NO
Note: This includes, but is not limited to, maiden names, former names, former married names, adopted names, nicknames, etc. If yes, fill in the information in the table below.

PREVIOUS NAME	DATE OF CHANGE	LOCATION OF CHANGE	REASON FOR CHANGE

PERSONAL DATA CONTINUED

9. Social Security Number: _____

10. In which state was your social security number issued: _____
If unknown, print unknown

11. Describe any scars, marks, tattoos and their locations:

Location on body	Scars	Marks	Tattoos

12. Are you a citizen of the United State? (Required for Peace Officers)
YES **NO**

13. Are you: **NATURAL BORN ()** Provide a certified copy of your birth certificate from the Bureau of Vital Statistics in the state you were born.

NATURALIZED () Provide original Naturalization Papers

RESIDENT ALIEN () Provide alien registration card

13. What special skills or qualifications do you possess? This can include, but is not limited to, foreign language skills, computer skills, office skills, technical skills etc.

PERSONAL DATA CONTINUED

16. In case of emergency, please list someone we can contact:

NAME OF PERSON TO CONTACT

RELATIONSHIP

HOME ADDRESS

CITY

STATE

ZIP CODE

HOME TELEPHONE NUMBER (including area code)

BUSINESS TELEPHONE NUMBER (including area code)

MARITAL / FAMILY DATA

1. Are you currently: SINGLE () MARRIED () DIVORCED () SEPARATED ()
2. If married, what is the full name of your spouse (including maiden name):

FIRST NAME	MIDDLE NAME	MAIDEN NAME	LAST NAME
------------	-------------	-------------	-----------

3. If married, are you living with your spouse? YES NO
If no, please explain on the back of this page.

4. List the following information about your current and former spouses:

NAME OF SPOUSE	ADDRESS OF SPOUSE	DATE OF MARRIAGE	LOCATION OF MARRIAGE (CITY/STATE)	DATE OF DIVORCE	LOCATION OF DIVORCE (CITY/STATE)

MARITAL / FAMILY DATA CONTINUED

2. List the following information for all of your dependents (not your current spouse):

NAME	DATE OF BIRTH	PLACE OF BIRTH	CURRENT RESIDENCE

NOTE: CERTIFIED COPIES (RAISED SEAL) OF ALL DOCUMENTS RELATING TO NAME CHANGES, MARRIAGES, AND DIVORCES ARE REQUIRED BEFORE APPLICATION FOR EMPLOYMENT WILL BE PROCESSED. THIS INFORMATION CAN BE OBTAINED FROM THE COURT IN WHICH THE PROCESS WAS COMMENCED.

RESIDENCES

1. List all of your addresses for the last ten (10) years. Begin with your present address. This list should include temporary addresses, part time addresses, military addresses (any address over thirty days which includes TDY), permanent addresses, and school addresses. If you rented, list the name, address and telephone number of the landlord or management company for each rental on the back of this page.

FROM MO/YR	TO MO/YR	ADDRESS	CITY	STATE	ZIP CODE	RENT/OWN

EDUCATION

1. Circle the highest grade completed:

1 2 3 4 5 6 7 8 9 10 11 12 other

2. If you graduated from high school, complete the following information:

NAME OF HIGH SCHOOL

DATES ATTENDED FROM/TO

COMPLETE MAILING ADDRESS

CITY/STATE

ZIP CODE

AREA CODE AND TELEPHONE NUMBER

DATE GRADUATED

3. if you received a GED certificate, complete the following information:

NAME OF SCHOOL (IF SCHOOL NO LONGER EXISTS, LIST THE ADDRESS OF THE LOCAL BOARD OF EDUCATION)

COMPLETE MAILING ADDRESS OF SCHOOL (IF SCHOOL NO LONGER EXISTS, LIST THE LOCAL BOARD OF EDUCATION)

YEAR GED WAS OBTAINED

STATE GED WAS OBTAINED

4. List any degrees that you have obtained (A.A., A.A.S., B.S., M.P.A., ETC)

TYPE OF DEGREE

GRADE POINT AVERAGE

YEAR RECEIVED

TYPE OF DEGREE

GRADE POINT AVERAGE

YEAR RECEIVED

TYPE OF DEGREE

GRADE POINT AVERAGE

YEAR RECEIVED

5. Since high school, have you ever been expelled or suspended from any school or been disciplined by any school official? YES NO (If yes, explain on the back of this page.)

EDUCATION CONTINUED

5. List below any colleges, universities, vocational / technical schools, and / or graduate schools that you have attended:

NAME OF SCHOOL	COMPLETE ADDRESS	DATES ATTENDED	MAJOR COURSE OF STUDY	DID YOU GRADUATE?

NOTE: APPLICANT IS RESPONSIBLE FOR FURNISHING THE GWINNETT COUNTY CORRECTIONS DEPARTMENT WITH SEALED HIGH SCHOOL AND COLLEGE TRANSCRIPTS AT THE APPLICANTS OWN EXPENSE.

CERTIFICATION INFORMATION

- 1. Have you ever attended a basic state, federal, local, or military mandate school for Police Officer, Deputy Sheriff, Correctional Officer, military Police Officer, etc?**

YES If yes, answer the below listed questions.

NO If no, go to next page.

List the dates you attended basic mandate school: / /
FROM MO/YR TO MO/YR

Did you receive a certification number? YES NO If yes, please list your certification number: _____

Number of years and months experienced as a certified law enforcement officer:
YEARS _____ **MONTHS** _____

List the agency, department, or organization which sponsored you for mandate school:

[illegible]

COMPLETE MAILING ADDRESS OF SPONSORING AGENCY

AREA CODE AND TELEPHONE NUMBER	CONTACT PERSON
--------------------------------	----------------

- 2. If you are not presently working as a law enforcement officer, list the date and agency you last worked as a certified law enforcement officer:**

DATE LAST WORKED AS A LAW ENFORCEMENT OFFICER	AGENCY
---	--------

COMPLETE MAILING ADDRESS OF AGENCY

AREA CODE AND TELEPHONE NUMBER	CONTACT PERSON
--------------------------------	----------------

EMPLOYMENT HISTORY

1. What is your present occupation?
2. How did you find out about this job? Please circle appropriate answer.
a. advertisement b. mailing list c. job fair d. other: _____
3. Have you ever worked for Gwinnett County? YES NO
If yes, what department? _____
If yes, when? _____
4. Have you ever applied with Gwinnett County? YES NO
If yes, fill in the information on the table below. If you need more space, use the back of this page.

DATE	POSITION	DEPARTMENT	WHAT HAPPENED

6. Do you have any relatives that are employed with Gwinnett County? Relatives include, but are not limited to, brothers, sisters, parents, grandparents, cousins, aunts, uncles, in-laws, etc.
 YES NO
If yes, fill in the information on the table below. If you need more space, use the back of this page.

NAME OF RELATIVE	RELATIONSHIP TO YOU	DEPARTMENT IN WHICH THEY WORK

EMPLOYMENT HISTORY CONTINUED

If you answer YES to any of the following questions, please explain fully on the back of the page.

	YES	NO
6. Have you ever been terminated, forced to resign or otherwise Involuntarily separated by a previous employer?		
7. Have you ever been reprimanded by a supervisor for misconduct or or not doing your job properly?		
8. Have you ever been reprimanded for being late or absent?		
9. Have you ever been disciplined by a supervisor (including verbal or written reprimands, suspensions, fines, etc.)		
10. Have you ever left a job without giving two weeks notice?		
11. Have you ever been engaged in any business as an owner, partner or corporate member?		
12. Have you ever taken anything of value, goods or service, from an Employer without their permission?		
13. Have you ever taken any cash money from an employer?		
14. Have you ever accepted a bribe to perform or not perform your duty?		

15. Figure out a dollar amount of how much you have taken from all employers combined during the last five years and circle the amount below that comes closest to the total dollars in merchandise, goods, or services you have taken. This can include, but is not limited to, paper, pens, paperclips, etc.

\$0 \$10 \$25 \$50 \$75 \$100 \$200 \$500 \$750 \$1000 \$2500 \$5000

Other: _____

Explain any amounts on the back of this page.

16. In the last five years, have you submitted an application for employment with any other law enforcement agency or department? YES NO

If yes, fill in the information in the following table. If you need more space, use the back of the page.

EMPLOYMENT HISTORY CONTINUED

AGENCY	DATE APPLIED	DISPOSITION OF APPLICATION

17. Have you ever taken a polygraph examination for any reason? YES NO
 If yes, fill in the information on the table below. If you need more space, use the back
 Of the page.

DATE	AGENCY/COMPANY	CITY/STATE	REASON POLYGRAPHED	RESULT

18. Have you ever been rejected for cause from a public safety job? YES NO
 If yes, please explain fully. Be specific.

19. At the present time, do you have any pending applications with any other law
 enforcement agency? YES NO
 If yes, please list the agency, the position and the current status.

20. Are you being urged or paid by any person or organization to work for this department?
 YES NO
 If yes, fully explain on the back of this page.

FINANCIAL HISTORY

If you answer YES to any of the following questions, please explain fully on the back of the page.

	YES	NO
1. Do you have any bills that are past due?		
2. Are any creditors currently pressing you for payment?		
3. Have you EVER had any credit accounts in collections?		
4. Have you EVER had any items repossessed?		
5. Within the last five years, have you filed for bankruptcy?		
6. Within the last five years, have you had your wages garnished?		
7. Is there currently an action pending to have your wages garnished?		
8. Within the last five years, have you been evicted or dispossessed from A residence or business?		
9. Have you EVER been involved in a civil suit of any kind? (This can include, but is not limited to, custody proceeding, divorces, etc.)		
10. Are you currently involved in any type of civil suit?		
11. Have you ever intentionally written a bad check?		
12. Have you ever misused a credit card or forged a check?		
14. Have you ever attempted to obtain credit by using another name or another Social security number?		

NOTE: CREDIT HISTORIES OF ALL APPLICANTS ARE CHECKED THROUGH EQUIFAX IN ATLANTA, CERTIFIED COPIES (RAISED SEAL) OF ALL PAPERWORK REGARDING BANKRUPTCIES, GARNISHMENTS, CONSUMER CREDIT COUNSELING SERVICES, ETC. ARE REQUIRED UPON REQUEST.

MILITARY SERVICE

If you answer YES to any of the following questions, please explain fully on the back of the page.

	YES	NO
1. Have you ever <u>attempted</u> to enlist in any branch of the United States Armed Forces? (Including Reserves, National Guard, and Coast Guard).		
2. Have you ever served in any branch of the United States Armed Forces? (Including Reserves, National Guard, and Coast Guard)		
3. Have you ever served in any branch of a foreign military?		
4. Have you ever been involved in a subversive act against the United States Government, or any other government, such as mutiny, Treason, sabotage, espionage, etc.?		

APPLICANTS WHO HAVE SERVED IN THE MILITARY, ANSWER THE FOLLOWING QUESTIONS

5. Complete the following table regarding your military service. If you need additional space, please use the back of the page.

BRANCH OF SERVICE	ENLISTMENT PERIOD	SERVICE NUMBER	HIGHEST RANK HELD

6. What is the type of your military discharge? (Honorable, Dishonorable, General, Under Honorable Conditions, Entry Level Separation, Medical, etc.). BE SPECIFIC.

MILITARY SERVICE CONTINUED

7. What was your military occupation specialty (MOS)? _____

8. Have you ever been court martialed, tried on charges, or subject of an Article 15, company punishment, OR ANY OTHER disciplinary action while a member of the Armed Forces?
YES NO

If yes, fill in the appropriate information on the table below and explain the offense(s) in detail on the back of the page.

TYPE OF DISCIPLINARY ACTION	BRANCH OF SERVICE	DATE OF ACTION	DISPOSITION OF ACTION

CRIMINAL HISTORY / ACTIVITY

1. Have you **EVER** been arrested and/or convicted for a misdemeanor or felony offense (excluding minor traffic offenses)? YES NO
 If yes, fill in the information on the table below.

POLICE / COURT JURISDICTION	CHARGE	FELONY / MISDEMEANOR	DATE	DISPOSITION

2. Circle any of the following activities you have ever committed, whether detected or undetected, and fully explain on the back of the page, including dates. If none, write none under item 27.

ACTIVITY / CRIME	ACTIVITY / CRIME	ACTIVITY / CRIME
1. ARSON	11. AUTO THEFT	21. RAPE
2. ASSAULT	12. THEFT BY TAKING	22. CHILD MOLESTATION
3. BATTERY	13. KIDNAPPING	23. INCEST
4. BURGLARY	14. MURDER	24. SODOMY
5. CRUELTY TO ANIMALS	15. BAD CHECKS	25. PEEPING TOM
6. DRUG SALES	16. ROBBERY	26. OTHER SEX CRIME
7. DRUG POSSESSION	17. SHOPLIFTING	27. OTHER
8. DUI / DWI	18. STEAL ANYTHING	
9. ENTERING AUTO	19. THEFT FROM EMPLOYER	
10. EXTORTION	20. VANDALISM	

CRIMINAL HISTORY / ACTIVITY CONTINUED

3. Have you ever been fingerprinted for any reason?
If yes, fill in the information on the table below.

YES

NO

AGENCY	DATE	PURPOSE

4. Have you ever been charged, whether or not you were convicted, as a result of any domestic violence related incident?

YES

NO

If yes, explain fully in the space below. Please include the appropriate police jurisdiction and the disposition of the case.

3. Have any criminal warrants ever been taken out against you? (This can include, but is not limited to, bad check citations, domestic violence, interference with custody, etc.)

YES

NO

If yes, please fill out the information on the table below.

CHARGE(S)	DATE	JURISDICTION	DISPOSITION

CRIMINAL HISTORY / ACTIVITY CONTINUED

If you answer YES to any of the following questions, please explain fully on the back of the page.

	YES	NO
6. Have you ever been involved in any undetected crime?		
7. Have you been involved in the theft of any merchandise, property, money, etc., from any person or place?		
8. Have you ever been required to pay a fine in excess of \$25.00?		
9. Have you ever been placed on any type of probation or parole?		
10. Have you ever been questioned as a victim, witness, or suspect by a law enforcement officer concerning any felony theft, violent crime, or sexual offense?		
11. Are there currently any criminal charges pending against you?		
12. Are you currently under any subpoena(s)?		
13. If you are, or have ever been, a peace officer (including a Correctional Officer), has it ever been alleged that you have made an improper / Bad arrest?		
14. If you are, or have ever been, a peace officer (Including a Correctional Officer), have you ever used excessive force while making an arrest?		

MOTOR VEHICLE / DRIVING HISTORY

1. Do you currently possess a valid driver's license? YES NO
 If yes, which state? _____ License number _____
 Class _____ Expiration date _____
 Restrictions _____

2. Have you ever had a driver's license in another state? YES NO
 If yes, which state? _____ License number _____

3. Have you ever had a foreign driver's license? YES NO
 If yes, in which country / countries? _____
 Where was the foreign driver's license issued? _____
 Foreign driver's license number (if known) _____
 What is the current status of your foreign driver's license? _____

4. Have you ever had a military driver's license? YES NO
 If yes, which branch of the military services issued the license? _____
 Military driver's license number (if known) _____
 What is the current status of your military license? _____

If you answer YES to any of the following questions, please explain fully on the back of the page.

	YES	NO
5. Has your driver's license (including out of state, foreign, or military) Ever been suspended, canceled or revoked in any state or country?		
6. Have you ever been refused a driver's license by any state, military, or foreign entity?		
7. Have you ever obtained or attempted to obtain a driver's license under an assumed name?		

8. Do you have any pending traffic citations or parking tickets? If yes, complete information in the table below.

CHARGE	JURISDICTION	DATE RECEIVED	COURT DATE

MOTOR VEHICLE / DRIVING HISTORY CONTINUED

9. In the table below, list all traffic citations you have received in the last TEN (10) years. If you need more space, use the back of this page. If none, write NONE in the table below.

CHARGE	JURISDICTION	DATE RECEIVED	COURT DATE	DISPOSITION

10. Have you been involved in any motor vehicle accident in the last TEN (10) years? This can include, but is not limited to, single car accidents, accidents which were not reported, hit and run accidents, whether or not you were at fault, private property accidents, on duty, off duty, etc.
- YES NO

If yes, fill in the information on the table below.

DATE	POLICE REPORT YES / NO	LOCATION CITY / STATE	CAUSE OF ACCIDENT	INJURIES YES / NO	DRIVER AT FAULT	CITATIONS YES / NO

MOTOR VEHICLE / DRIVING HISTORY CONTINUED

If you answer YES to any of the following questions, please explain fully on the back of this page.

	YES	NO
11. Have you ever been charged with driving under the influence of alcohol or drugs?		
12. Have you ever been convicted of or pled nolo contendere to the charge of driving under the influence of alcohol or drugs?		
13. Have you ever been involved in any hit and run accident?		
14. Have you ever been involved in any serious traffic offense? (Including, but not limited to, reckless driving, laying drags, DUI/DWI, vehicular homicide, etc.)		
15. Have you ever left the scene of an accident without giving assistance?		
16. Have you ever been involved in any traffic-related lawsuits, whether you were the plaintiff or the defendant?		
17. Have you ever been involved in a traffic accident which resulted in a serious injury or fatality?		

DRUG USE

1. Please answer each line truthfully. The use of, or experimentation with, a particular drug(s) may not necessarily mean automatic disqualification. In the table provided, indicate when you first tried the drug(s) listed, when you last used the drug(s) listed, and the approximate number of times used.

DRUG	DATE FIRST USED	DATE LAST USED	NUMBER OF TIMES USED
MARIJUANA			
HASHISH			
ANGEL DUST/PCP			
ICE			
ECSTASY/MDMA			
COCAINE			
CRACK COCAINE			
HEROIN			
LSD/ACID/BLOTTER			
CRANK			
MUSHROOMS/PEYOTE			
MORPHINE			
MESCALINE/CACTUS			
OPIUM			
PSILOCYBIN			
QUAALUDES			
SPEED (specify type)			
Downers/Barbiturates			
VALIUM			
STEROIDS			
CRYSTAL			
STP			
Any other illegal drug (specify)			

DRUG USE CONTINUED

If you answered YES to any of the following questions, please explain fully on the back of this Page.

	YES	NO
2. Have you ever been involved in the sale, distribution, or growing of marijuana?		
3. Have you ever been involved in the sale, distribution, or manufacture of cocaine or any other illegal drug?		
4. Have you ever been involved in the manufacture of any type of drug or narcotic? (including prescription drugs)		
5. Have you ever taken a drug prescribed for another person?		

ALCOHOL USE

1. Do you drink alcoholic beverages? YES NO
If yes, how much and how often? _____
2. List the approximate date you were last intoxicated (drunk): _____
3. Since the age of seventeen, have you ever been arrested because of an alcohol-related Offence? This includes, but is not limited to DUI/DWI, Public Drunk/Intoxication, Disorderly Conduct, Minor in Possession of Alcohol, etc.? YES NO
If yes, explain fully on the back of the page.

GAMBLING

1. Circle any of the following you have gambled on in the last TEN (10) years.

CARDS	HORSES	DOGS
DICE	LOTTERY	LOTTO
NUMBERS	SPORTING EVENTS	SLOT MACHINES
OTHER		

List the extent of your gambling on any of the above you have circled or listed.

2. Do you have any gambling debts? YES NO
If yes, explain fully on the back of the page.
3. Have you ever borrowed money to gamble? YES NO
If yes, explain fully on the back of the page.

MISCELLANEOUS QUESTIONS

1. Have you ever had a pilot's license? YES NO
 If yes, is it current? YES NO
 If no, explain:

- Is your F.A.A. physical current? YES NO
 If no, explain:

List your total fixed wing flight time hours: _____

List your total rotary flight time hours: _____

- Have you ever been involved in an air-related incident? YES NO
 If yes, explain fully on the back of this page.

Have you ever been charged with Flying an Aircraft Under the Influence of Alcohol or Drugs or of violation of any federal aviation regulation (FAR), or any federal or state Statute pertaining to the ownership, maintenance, or operation of an aircraft?

- YES NO
- If yes, explain fully on the back of this page.

2. Have you ever applied for a permit to carry a weapon? YES NO
 If yes, was the permit granted? YES NO

Date permit granted: _____

Which agency granted the permit? _____

Location of agency granted permit: _____

If permit to carry a weapon was not granted, explain fully your answer on the back of this page.

3. Do you possess any other professional license? YES NO
 If yes, complete table below:

TYPE OF LICENSE	DATE RECEIVED	STATE OF LICENSE	STATUS OF LICENSE

MISCELLANEOUS QUESTIONS CONTINUED

If you possess a professional license, has it ever been revoked or suspended for any reason?

YES NO

If yes, explain fully on the back of the page.

4. Do you know of anything that might prevent you from obtaining the position you have applied for?

YES NO

If yes, explain fully on the back of the page.

5. Is there any reason why you cannot work flexible, rotating shifts as they are related specifically to your job assignment or duties?

YES NO

If yes, explain fully on the back of the page.

6. Have you purposely omitted any information from your employment application, resume, this document, or any other document you have submitted?

YES NO

If yes, explain fully on the back of the page.

7. Were you able to understand all of the questions in this document?

YES NO

If no, explain fully on the back of the page.

8. ESSAY:

On the next page, you will have space to write an essay. This essay should consist of approximately one hundred (100) words and should fit on one page. The topic of the essay is "THE REASON I WANT TO BECOME A CORRECTIONAL OFFICER."

PLEASE WRITE LEGIBLY AND BE CONSCIOUS OF SPELLING AND GRAMMAR, GOOD LUCK!

THE REASON I WANT TO BECOME A CORRECTIONAL OFFICER:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SWORN STATEMENT

I hereby swear that all statements made in this questionnaire are true and complete. I also understand that any misstatements of material facts will subject me to disqualification and termination of the application process or employment and could result in criminal prosecution under OCGA 16-10-20.

SIGNATURE OF APPLICANT

Lt. Audrey Henderson

INVESTIGATOR

DATE

DATE

NOTARY PUBLIC