



**ELKO COUNTY SHERIFF'S OFFICE**

**SHERIFF**

**SHERIFF AITOR NARVAIZA** TEL 775.738.3421 • FAX 775.753.9845  
775 W. Silver St. • Elko, NV 89801

**Application for Employment**

Position Applying for:  
 Deputy \_\_\_\_\_  
 Reserve Deputy \_\_\_\_\_  
 Search and Rescue \_\_\_\_\_

The Elko County Sheriff's Office and the County of Elko considers applications for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of non-job-related medical condition or disability or any other legally protected status.

If you believe that you require accommodations during the selection process, please contact Armida Marin at amarin@elkocountynv.net to make appropriate arrangements

**Personal Information: Truthfully provide the following personal information.**

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
 Address: Street \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
 Telephone: Home \_\_\_\_\_ Cell \_\_\_\_\_  
 E-Mail: \_\_\_\_\_

Are you legally eligible for employment in the United States? \_\_\_\_\_

Education Level Attained:	Yes/No	Major/Field of Study	School
High School Diploma/GED:	_____	_____	_____
College Credits:	_____	_____	_____
Associates Degree:	_____	_____	_____
Bachelor Degree:	_____	_____	_____
Other: _____	_____	_____	_____

Are you a military veteran? Yes/No \_\_\_\_\_

Are you currently certified to be a Peace Officer? Yes/No \_\_\_\_\_ State: \_\_\_\_\_ Certification Number: \_\_\_\_\_

Are you conversationally fluent in any languages other than English? Yes/No \_\_\_\_\_ Languages: \_\_\_\_\_

Have you been given a job description of had the requirements of the job that you are applying for explained to you? Yes/No \_\_\_\_\_  
 Do you understand the job requirements? \_\_\_\_\_

Can you perform, with or without reasonable accommodations, the essential functions of the job that you are applying for? Yes/No \_\_\_\_\_

Do you possess a valid state issued driver's license? Yes/No \_\_\_\_\_ State \_\_\_\_\_ Driver's License # \_\_\_\_\_  
 Has your driver's license ever been suspended? \_\_\_\_\_

I certify that the information entered on this page is true and accurate to the best of my knowledge: ( \_\_\_\_\_ )

Work History: Truthfully provide the following information for your last four (4) employers, most recent first. Include Military and volunteer experience if applicable.

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_ Contact telephone number \_\_\_\_\_  
Duties: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_  
Salary: \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_ Contact telephone number \_\_\_\_\_  
Duties: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_  
Salary: \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_ Contact telephone number \_\_\_\_\_  
Duties: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_  
Salary: \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_ Contact telephone number \_\_\_\_\_  
Duties: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_  
Salary: \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

I certify that the information entered on this page is true and accurate to the best of my knowledge: ( \_\_\_\_\_ )

**Criminal History: Truthfully provide the following information regarding your criminal history.**

Have you ever committed any felonies, whether charged or not, including but not limited to?	Activity	Yes/No
	a. Murder	_____
	b. Robbery	_____
	c. Burglary	_____
	d. Kidnapping	_____
	e. Manslaughter	_____
	f. Auto Theft	_____
	g. Assault with Deadly Weapon	_____
	h. Arson	_____
	i. Illegal possession, use, sales or delivery of drugs/narcotics	_____
	j. Forgery/Fraud/Counterfeiting	_____

Have you ever committed the following criminal acts, whether charged or not?	Activity	Yes/No
	m. Domestic Violence	_____
	n. Stalking	_____

Within the past five (5) years, have you committed the following criminal acts, whether charged or not?	Activity	Yes/No
	o. Assault/Battery	_____
	p. Disorderly Conduct	_____
	q. Disturbing the Peace	_____
	r. Trespassing	_____
	s. Home Invasion	_____
	t. Theft under \$250	_____
	u. Harassment	_____

Explain any "yes" answers:

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Have you been convicted of a misdemeanor or felony crime?	Yes/No		
If yes, list convictions, dates and courts:	_____		
Charge Convicted of:	Date	Court	Disposition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I certify that the information entered on this page is true and accurate to the best of my knowledge: ( \_\_\_\_\_ )

**Acknowledgment: Initial after each item to acknowledge that you understand and agree to each statement.**

1. The information that I supplied on this application is true and accurate to the best of my knowledge. I understand that any intentional falsification, misrepresentation, or omission on this application or during any portion of the selection process for position with the Elko County Sheriff's Office may be grounds for disqualification from potential employment or if discovered after being employed, may be grounds for termination of employment. (\_\_\_\_\_)

2. I understand that that employment with the Elko County Sheriff's Office is conditional upon successful completion of competitive testing of the Nevada State POST physical fitness assessment, a standardized written law enforcement entrance exam, an oral board interview, an investigation into my personal and professional background, including but not limited to my driving history, employment history, financial history, military service record, previous education, criminal history and other background information, a truth verification examination, a psychological assessment and a medical examination, including a drug screening. (\_\_\_\_\_)

3. I give the Elko County Sheriff's Office authorization to verify the accuracy of the information contained in this employment application. I hereby release from liability the Elko County Sheriff's Office and any representatives for seeking, gathering, and using any verifying information and any other person, corporation or organization for furnishing or releasing any verifying information. (\_\_\_\_\_)

4. The Elko County Sheriff's Office does not unlawfully discriminate and I understand that no question on this application is used for the purpose of limiting or excusing any applicant from consideration from employment on any basis prohibited by local, state or federal law. (\_\_\_\_\_)

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_