

COWLITZ COUNTY SHERIFF'S OFFICE

APPLICATION FOR LATERAL ENTRY

PERSONAL

Name:		Last	First	Middle
Other names you have used or been known by (including nicknames).				
List address at which you can be contacted.		City	State	Zip code
Address				
List phone numbers at which you can be contacted.				
Day ()		Night ()		
Birth Date (Month/Day/Year)		Place of Birth (City & State):		E-Mail Address:
Social Security #		U.S. citizenship is required for this position. Proof is required that you are a legal resident of this country. Can you provide such documentation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
For purposes of identification, please provide the following:				
Height		Weight		Hair Color
				Eye Color
Driver License #		State		Expiration Date
Other states where you have been licensed:				
Scars, tattoos, or other distinguishing marks:				

FORMAL EDUCATION

High School:

<input type="checkbox"/> Graduated <input type="checkbox"/> GED	Name/Location of School	Year of Graduation/Completion
<input type="checkbox"/> Graduated <input type="checkbox"/> GED	Name/Location of School	Year of Graduation/Completion
<input type="checkbox"/> Graduated <input type="checkbox"/> GED	Name/Location of School	Year of Graduation/Completion

Please submit a copy of your diploma or GED certificate with this application.

(Optional) Is your college degree:

- Two-year, Law Enforcement/Criminal Justice
- Two-year, other major _____
- Four-year, Law Enforcement/Criminal Justice
- Four-year, other major _____

LAW ENFORCEMENT EDUCATION/EXPERIENCE

Please note: this information, in part, will be used to score your application.

1. Do you hold a current commission with a law enforcement agency in the State of Washington? Yes No

2. Have you graduated from the WSCJTC Academy? Yes No

Date of graduation: _____

3. Have you successfully challenged the WSCJTC Academy and passed the examination?

Yes No If yes, give date: _____

4. Do you hold a current commission with a law enforcement agency in another state? Yes State Name: _____ No

5. Have you graduated from a law enforcement academy in another state? Yes No

Date of graduation: _____ Location: _____

4. List other law enforcement schools (of more than two days duration) you have attended.

School or Training	Address	City, State, Zip	Date(s)

Attach documentation of all law enforcement, WSCJTC or Federally sponsored training you have completed that is at least 16 hours in duration. Include the training agency, course title, documentation of completion and hours involved. Do not include basic police academy classes or mandatory training such as BAC, firearms, first aid, etc. Acceptable documentation includes: copy of WSCJTC training records; certified copy of your agency's training records; course certificate.

LAW ENFORCEMENT EDUCATION/EXPERIENCE (Continued)

5. List any special law enforcement-related skills and qualifications you may have, including foreign language skills:

6. List all law enforcement experience, both in this state and elsewhere. Indicate each position and rank you held, as well as the dates.

Department	Address
Date of Employment/Date You Left Employment	Supervisor
Rank Held/Job Description	
Reason for Leaving	

Department	Address
Date of Employment/Date You Left Employment	Supervisor
Rank Held/Job Description	
Reason for Leaving	

LAW ENFORCEMENT EDUCATION/EXPERIENCE (Continued)

Department	Address
Date of Employment/Date You Left Employment	Supervisor
Rank Held/Job Description	
Reason for Leaving	

Department	Address
Date of Employment/Date You Left Employment	Supervisor
Rank Held/Job Description	
Reason for Leaving	

7. Have you ever held a permanent promotional or appointed position in a law enforcement agency? Yes No
 If yes, list highest rank attained and reason for leaving.

Department	Address
Date Promoted	Supervisor
Rank Held	<input type="checkbox"/> Appointed Position <input type="checkbox"/> Tested Position
Reason for Leaving	

LAW ENFORCEMENT EDUCATION/EXPERIENCE (Continued)

8. Have you ever held a promotional position on a provisional or probationary basis?
 Yes No

If yes, list the highest rank attained and your reason for leaving the position.

Department	Address
Date Promoted	Supervisor
Rank Held	<input type="checkbox"/> Appointed Position <input type="checkbox"/> Tested Position
Reason for Leaving	

9. Have you received any commendations, awards or letters of appreciation pertaining to your job performance from supervisors or citizens? Yes No
 If yes, list them below. Also supply copies if possible.

10. Have you ever been the subject of a disciplinary action, including oral reprimands, as a result of your job performance? Yes No
 If yes, please list each incident. Provide copies of written reprimands, if possible.

11. What was the date of your first application for employment with a law enforcement agency?

Please provide name and address of that agency:

LAW ENFORCEMENT EDUCATION/EXPERIENCE (Continued)

12. Have you ever been a successful or unsuccessful candidate for any other law enforcement or public safety position? Yes No

If "Yes, Please give details (include date, agency name, city, state, position applied for, name used, and test results).
