



Application for Employment  
Gerald A. Turlich, Jr., Sheriff  
Plaquemines Parish Sheriff's Office  
8022 Hwy. 23  
Belle Chasse, La 70037  
504-934-6776

\*\*\*Do Not Attach Resumes\*\*\*

**Print Neatly** or **Type** this application:

Completed applications must be turned in **by the APPLICANT** at the Internal Affairs Office at 8397 Hwy. 23, Ste. 102, Belle Chasse. Please do not call to check on the progress of your application. The Sheriff's Office will **notify you** when it is time to return for additional processing.

You **must** make your own copies and provide the following **photostat** copies **with** the application:

1. **Choose one**: High School Transcript, High School Diploma, GED Diploma or GED Transcript Scores

\*\*\*\*\* **Replacement Options** for required **Louisiana** High School or GED documents \*\*\*\*\*

a. High School **Transcript** replacement: **Public** and **Private** High School - (call) 877.453.2721 or visit web site [www.louisianabelieves.com](http://www.louisianabelieves.com)

b. High School **Diploma** replacement: **Public** - Contact the **School Board Office** for that High School

c. High School **Diploma** replacement: **Private** - Contact that High School

d. GED: **Diploma** or **Transcript** Scores replacement: visit web site [www.lctcs.edu](http://www.lctcs.edu) or call 225.922.2800

2. **Certified** Copy of Birth Certificate - Louisiana replacement: (call) 504.297.5180

3. Valid Driver's License - Louisiana Info: visit web site <https://omv.dps.state.la.us> or call 225.925.6146

4. Social Security Card - Info: visit web site [secure.ssa.aov/ICON/main.jsp](https://secure.ssa.aov/ICON/main.jsp) or call 1.800.772.1213

5. Any other additional education diplomas, certificates or transcripts (**if applicable**)

6. Discharge/Separation (DD214 and or NGB22) forms for each period of military service (**if applicable**)

7. Naturalization certificate if you were born outside the United States (**if applicable**)

8. Please fill out form PC-201 & PC-206 completely, attached to this application.

Leave no blanks on this application. If questions are not applicable, enter **N/A**. If questions are unknown, enter **UNK**.

\*\*\*\*\*If there is not enough room on the application for you to provide a complete answer to any of the questions, use an additional piece of paper to do so.\*\*\*\*\*

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED**

*The Plaquemines Parish Sheriff's Office is an Equal Opportunity Employer*



**Application for Employment**  
**Gerald A. Turlich, Jr., Sheriff**  
**Plaquemines Parish Sheriff's Office**  
**8022 HWY 23**  
**Belle Chasse, La 70037**  
**504-934-6776**

Name: \_\_\_\_\_  
 \_\_\_\_\_  
 Last  
 \_\_\_\_\_  
 First  
 \_\_\_\_\_  
 Middle

**GENERAL**

**DATE OF APPLICATION:** \_\_\_\_\_

**POSITION APPLYING FOR:**

DEPUTY SHERIFF       COMMUNICATIONS / OPERATOR / DISPATCHER       CORRECTIONS OFFICER

RESERVE DEPUTY       CLERICAL/ SECRETARIAL

OTHER (Please Specify): \_\_\_\_\_

I CAN PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB(S) FOR WHICH I AM APPLYING  WITH REASONABLE ACCOMMODATION(S). IF REASONABLE ACCOMMODATION IS NECESSARY, PLEASE SPECIFY:  WITHOUT

\_\_\_\_\_

\_\_\_\_\_

**PERSONAL INFORMATION**

LAST NAME:	FIRST NAME:	MIDDLE NAME:	SUFFIX:
------------	-------------	--------------	---------

NICKNAMES OR OTHER NAMES I HAVE USED OR AM KNOWN BY: (i.e. Maiden, Change of Name, Nicknames, Alias, etc.)

\_\_\_\_\_

HEIGHT:	WEIGHT:	DATE OF BIRTH:    —    —
---------	---------	--------------------------

BIRTHPLACE:	HAIR COLOR:	EYE COLOR:	SEX:
-------------	-------------	------------	------

PHYSICAL ADDRESS (Street / City / State / Zip):	<b>CONTACT INFORMATION:</b> WORK: _____ PAGER: _____ MOBILE: _____ EMAIL: _____
MAILING ADDRESS (Street / P.O. Box / City / State / Zip): <input type="checkbox"/> SAME AS ABOVE	
HOME TELEPHONE NO.:	
DRIVER'S LICENSE: STATE:            NUMBER:	
SOCIAL SECURITY NO.:	
<b>LIST SOCIAL MEDIA SITES YOU HAVE ACCOUNTS ON:</b> FACEBOOK: <input type="checkbox"/> YES <input type="checkbox"/> NO TWITTER: <input type="checkbox"/> YES <input type="checkbox"/> NO ACCOUNT NAME: _____ OTHER: _____	

AM A CITIZEN OF THE UNITED STATES. • IF APPLICABLE, PLEASE SPECIFY THE COUNTRY OF YOUR CITIZENSHIP:  
 AM NOT \_\_\_\_\_

CAN  CAN NOT **SUBMIT VERIFICATION OF MY LEGAL RIGHT TO WORK IN THE UNITED STATES.**

# WORK / EMPLOYMENT HISTORY

PLEASE LIST POSITIONS, STARTING WITH YOUR MOST RECENT EMPLOYMENT AND ENDING WITH YOUR FIRST FULL-TIME, PERMANENT EMPLOYMENT.

EMPLOYER / COMPANY NAME:

MAILING ADDRESS (Street / P.O. Box / City / State / Zip):

TELEPHONE:

TYPE OF BUSINESS:

JOB TITLE / POSITION:

EMPLOYED FROM: \_\_\_\_\_ / \_\_\_\_\_ TO: \_\_\_\_\_ / \_\_\_\_\_  
MONTH / YEAR MONTH / YEAR

SUPERVISOR:

SUPERVISOR'S TITLE:

BEGINNING ANNUAL SALARY:

ENDING ANNUAL SALARY:

REASON FOR LEAVING:

**DUTIES: PLEASE LIST YOUR MAJOR JOB DUTIES AND APPROXIMATE PERCENTAGE OF TIME SPENT ON EACH DUTY.**

PERCENT OF TIME	MAJOR DUTIES

**AWARDS / COMMENDATIONS: PLEASE LIST ANY AWARDS, COMMENDATIONS, AND / OR PROMOTIONS RECEIVED IN THE PERFORMANCE OF YOUR JOB TITLES**

DATE	DESCRIPTION OF AWARD / COMMENDATION / PROMOTION

**PLEASE LIST ANY DISCIPLINARY ACTION TAKEN AGAINST YOU BY THIS EMPLOYER, AND EXPLAIN THE NATURE AND EXTENT OF THE ACTION TAKEN. ATTACH SHEET IF NEED MORE SPACE.**


# WORK / EMPLOYMENT HISTORY

PLEASE LIST POSITIONS, STARTING WITH YOUR MOST RECENT EMPLOYMENT AND ENDING WITH YOUR FIRST FULL-TIME, PERMANENT EMPLOYMENT.

EMPLOYER / COMPANY NAME:

ADDRESS:

TELEPHONE:

KIND OF BUSINESS:

JOB TITLE / POSITION:

EMPLOYED FROM:

TO:

MONTH / YEAR

MONTH / YEAR

SUPERVISOR:

SUPERVISOR'S TITLE:

BEGINNING ANNUAL SALARY:

ENDING ANNUAL SALARY:

REASON FOR LEAVING:

**DUTIES:** PLEASE LIST THE MAJOR DUTIES AND GIVE AN APPROXIMATE PERCENTAGE OF TIME SPENT ON EACH DUTY.

PERCENT OF TIME	MAJOR DUTIES

**AWARDS / COMMENDATIONS:** PLEASE LIST ANY AWARDS, COMMENDATIONS, AND / OR PROMOTIONS RECEIVED IN THE PERFORMANCE OF YOUR JOB TITLES

DATE	DESCRIPTION OF AWARD   COMMENDATION / PROMOTION

PLEASE LIST ANY DISCIPLINARY ACTION TAKEN AGAINST YOU BY THIS EMPLOYER, AND EXPLAIN THE NATURE AND EXTENT OF THE ACTION TAKEN.






	<input type="checkbox"/> AM <input type="checkbox"/> AM NOT	REGISTERED FOR THE SELECTIVE SERVICE.	DO YOU HAVE ANY VISIBLE TATTOOS?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> AM <input type="checkbox"/> AM NOT	A REGISTERED VOTER OF _____ PARISH.		
MY CREDIT HISTORY		<input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT	BEEN CONSIDERED SATISFACTORY IN THE PAST & I	<input type="checkbox"/> HAVE <input type="checkbox"/> HAVE NOT
	<input type="checkbox"/> DO <input type="checkbox"/> DO NOT	HAVE RELIABLE TRANSPORTATION TO WORK.		
EMPLOYMENT WITH THE PLAQUEMINES PARISH SHERIFF'S OFFICE ENTAILS WORKING <b>8 OR 12 HOUR SHIFTS</b> DEPENDING UPON DIVISION YOU WILL BE ASSIGNED TO. YOU MAY BE WORKING OVERTIME, WORKING ON HOLIDAYS, WEEKENDS AND NIGHTS. FURTHER, <b>HURRICANE DUTY IS MANDATORY..</b>				
<b>PLEASE EXPLAIN ANY RESTRICTION ON YOUR ABILITY TO WORK THESE HOURS AND SCHEDULES OR NATURAL PLEASE EXPLAIN ANY RESTRICTION ON YOUR ABILITY TO WORK THESE HOURS AND SCHEDULES. FURTHER, DISASTERS; SUCH AS HURRICANES:</b>				
I AM AVAILABLE TO BEGIN WORK ON:				

## TRAINING AND EDUCATION

NAME, ADDRESS, CITY, STATE, ZIP CODE OF LAST HIGH SCHOOL ATTENDED:

I RECEIVED A <input type="checkbox"/> DIPLOMA <input type="checkbox"/> GED            IN THE YEAR OF: _____	IF YOU <b>DO NOT HAVE A HIGH SCHOOL DIPLOMA OR GED</b> , YOUR APPLICATION WILL NOT BE PROCESSED.
--	--

PROFESSIONAL / BUSINESS / TECHNICAL INSTITUTES & COLLEGES/ UNIVERSITIES ATTENDED AND **ATTACH HIGH SCHOOL / GED DIPLOMA.**

NAME OF INSTITUTION AND LOCATION	DATES ATTENDED (Month / Year)	GRADUATE (Yes or No)	TYPE OF DEGREE EARNED	TITLE OF PROGRAM OR FIELD OF STUDY
	From:    / To:        /	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	From:    / To:        /	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	From:    / To:        /	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	From:    / To:        /	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	From:    / To:        /	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	From:    / To:        /	<input type="checkbox"/> YES <input type="checkbox"/> NO		

**PROFESSIONAL LICENSES / CERTIFICATIONS.**

TYPE OF LICENSE / CERTIFICATION	DATE ORIGINALLY LICENSED / CERTIFIED	EXPIRATION DATE	NAME OF LICENSING / CERTIFYING AUTHORITY

**The Plaquemines Parish Sheriff's Office is an Equal Opportunity Employer**





**CERTIFICATION  
ACKNOWLEDGEMENT OF CONDITIONS FOR EMPLOYMENT  
AND AUTHORITY TO RELEASE INFORMATION**

The Plaquemines Parish Sheriff's Office recruits, hires, trains, and promotes all persons without regard to race, color, sex, religion, national origin, marital and familial status, political belief, and physical and mental disability, except in those instances where physical and mental abilities are a bona-fide occupational qualification, and accommodation would constitute an undue hardship to the Sheriff's Office. It is further the policy of the Sheriff's Office to base all decisions on employment so as to further equal employment opportunity.

I am applying to the Plaquemines Parish Sheriff's Office for employment. To determine my eligibility for employment and for security clearance purposes, I hereby authorize and request that solicited entities or individuals furnish to the Plaquemines Parish Sheriff's Office any and all information, whether written or non-written, including opinions, that these entities and/or individuals may have or acquire concerning information given on this application form, as well as information regarding my character, reputation, and suitability for employment.

I hereby release, hold harmless, and indemnify from any and all liability, the Plaquemines Parish Sheriff's Office, employees of the Plaquemines Parish Sheriff's Office, and the individuals, agencies, and/or entities who receive and supply information as noted above.

I certify that all statements made on this employment application are true and complete to the best of my knowledge. I understand that information on this application will be subject to investigation and verification, and that any misrepresentation or material omission may cause my application to be delayed, rejected, disqualified, and/or subject me to dismissal from employment from the Plaquemines Parish Sheriff's Office.

I understand that nothing in this application or in the granting of an interview creates a contract between the Plaquemines Parish Sheriff's Office and myself for either employment or for providing any benefits. No promises have been made to me, and I understand that no such promise or guarantee is binding upon the Sheriff's Office unless made in writing by the Sheriff of Plaquemines Parish, and signed by me. If an employment relationship is established, I acknowledge that I will be required to submit to, and successfully complete a drug test, in depth criminal records check, financial background investigation, and a thorough physical examination including a medical history check to determine if I can perform the essential functions of the position for which I am applying with or without reasonable accommodations. I further understand that failure to comply with the prerequisites of employment, after the conditional offer of employment is accepted by me, will be treated as a rejection of the offer of employment.

I acknowledge that no consideration has been furnished to the Sheriff's Office for my employment other than my services, and I understand that employment with the Plaquemines Parish Sheriff's Office is strictly at will employment, and that I have the right to terminate my employment at any time, with or without cause, and that the Plaquemines Parish Sheriff's Office has the same right, as well as the right to transfer me to any division, department, section, or shift that the Sheriff or his designee so chooses and at his sole discretion.

A photostatic copy of my signature shall be accepted as an original authorizing any person, firm, or organization to release any information to the Plaquemines Parish Sheriff's Office regarding the verification of information provided herein.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

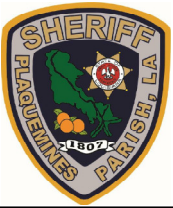
\_\_\_\_\_  
Printed: First, Middle, and Last Name

RECEIVED BY: \_\_\_\_\_

Name

Position

Date



# Plaquemines Parish Sheriff's Office

## Pre-Polygraph Questionnaire

- | <b>Yes</b>               | <b>No</b>                |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Have you ever been arrested?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Have you ever been convicted of a felony?                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Have you been truthful about your drinking and gambling habits?                |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Have you ever tried/used marijuana? <b>If Yes</b> , when month/year ____/____. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Have you ever tried/used any illegal drugs other than marijuana?               |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Have you ever committed any undetected crimes?                                 |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Have you ever been fired or asked to resign from a job?                        |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Have you ever stolen any merchandise from an employer?                         |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Have you ever stolen any money from an employer?                               |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Have you ever stolen anything of great value?                                 |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Are you aware of any inaccuracies on your application?                        |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Have you deliberately lied on any of these questions?                         |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Have you ever sold any type of illegal drug?                                  |

I HEREBY DECLARE THE INFORMATION PROVIDED BY ME IN THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT FALSIFICATION OF THIS INFORMATION IS GROUNDS FOR REFUSAL TO HIRE OR, IF I HAVE BEEN HIRED, GROUNDS FOR TERMINATION.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*The Plaquemines Parish Sheriff's Office is an Equal Opportunity Employer*

