

**SHERIFF ELIGIBILITY APPLICATION**

1) County		2) Name Last			First			Middle						
3) Home Address Street				City		State		Zip Code		4) Social Security Number — —				
*5) Date of Birth		6) Place of Birth			7) Height		8) Weight		9) Hair Color		10) Eye Color		11) Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	

**CRIMINAL JUSTICE EXPERIENCE**

If you have less than four years full time experience as a law enforcement officer, please also complete section 15.

*12) Agency	Address	From				To			
		Mo.	Day	Year	Rank	Mo.	Day	Year	Rank

13) The above listing of criminal justice employment includes all my past criminal justice employment. Yes \_\_\_\_ No \_\_\_\_

14) Have you ever been discharged for cause from a law enforcement unit? Yes \_\_\_\_ No \_\_\_\_ If the answer is yes, give details:

\_\_\_\_\_

**ACADEMIC EDUCATION (Provide Transcripts)**

*15) College	Location	Major	Dates Attended	Degree/Credit hours

\*16) I am \_\_\_\_\_, am not \_\_\_\_\_ a citizen of the United States. Check here if on file at DPSST \_\_\_\_\_.

17) I have \_\_\_\_\_, have not \_\_\_\_\_ been convicted of a crime in this state or any other jurisdiction.

If you have been convicted of a crime, please give details below.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18) I have enclosed the following information (\* in support of items 5, 12, 15 & 16)

\_\_\_\_ Verification of U.S. citizenship                      \_\_\_\_ School transcripts  
\_\_\_\_ Verification of law enforcement employment      \_\_\_\_ Verification of birth date (birth certificate, drivers license, etc.)

19) I attest that the information contained in this application is true and correct.

Signed this \_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, in the county of \_\_\_\_\_, state of Oregon.

\_\_\_\_\_  
Candidate's Signature

**INSTRUCTIONS**

- 1. County in which candidate is seeking election or appointment.
- 2. Full name. (Type or print legibly.)
- 3. Complete home address, including zip and apartment number, if appropriate.
- 4. Social Security Number.
- \*5. Month, day, and year of birth (provide documentation).
- 6. City and State.
- 7. Express in feet and inches.
- 8. Self-explanatory.
- 9. Natural hair color.
- 10. Self-explanatory.
- 11. Male or Female.
- \*12. List, in reverse chronological order (present employer first), your past law enforcement employment.  
Please give complete mailing addresses and provide documentation.
- 13. Self-explanatory.
- 14. Self-explanatory.
- \*15. List all institutions of higher education you have attended. Official transcripts from school must be submitted to DPSST.
- \*16. Self-explanatory (provide documentation).
- 17. Self-explanatory.
- \*18. Attachments/verifications in support of items 5, 12, 15 & 16.
- 19. Please indicate day, month, year, and county at the time of signing.

**DPSST USE ONLY**

\_\_\_\_ Is eligible to be a candidate                      \_\_\_\_ Is not eligible to be a candidate