

While the investment in time and effort on the part of a Reserve Officer is great, the benefits gained in self-image, enhanced ability to deal with diverse people and situations, and increased awareness of community are well worth the sacrifice. The Harrison County Reserve Division is invaluable to the operation of the Sheriff's Office. The officers provide extra manpower when needed, assist on special details, and enhance the ability of the Sheriff's Office to provide the best service possible to the citizens of Harrison County. We are very proud of our actions and the contribution that we give to the community.



The Sheriff's Office establishes minimum training requirements for all of its employees. Reserve Officers are expected to meet the same qualifications as full time Officers. They participate in monthly training and have the opportunity to attend many special training sessions in law enforcement topics.



Come stand and serve your community as an active member of the Harrison County Law Enforcement Community.

Harrison County Sheriff's Department
1445 Gardner Lane NW Suite 100
Corydon, IN 47112

Phone #812-738-2195

Administrative Office Hours:

8:00am - 4:00pm

Website:

<http://www.hcsdin.net/>

HARRISON COUNTY POLICE DEPARTMENT RESERVE OFFICER RECRUITMENT



Harrison County Police Department is looking for a few good individuals with the time, commitment, and desire to serve their community as Reserve Police Officers.

Second to None

The Harrison County Sheriff's Department Reserve Division has been serving the community of Harrison County, Indiana since 1983. It is comprised of volunteers who are sworn officers empowered by the Sheriff of Harrison County to help preserve law and order in the county.

A Reserve Officer is qualified to perform patrol duties, having full law enforcement authority. The division is authorized to have up to 20 Reserve Officers. Reserves are road qualified to work court security, security/traffic at special events, e.g., parades, charity runs, and dignitary visits, etc., provide literature and information to citizens at the County Fair or other special assignments as designated by the Sheriff.



What are the requirements of a Reserve Officer?

Reserve Officers are required to work a minimum of 16 hours a month. The officer will also have to complete a 40 hour pre-basic training course. After certification by the senior officer, Division Commander, and the Sheriff, the Reserve Officer is considered an event ready officer. The Reserve Division has a mandatory meeting on the 1st Sunday of every month. The meeting starts at 6 pm, goes for approximately 2 hours. All officers must be able to attend these meetings.

Reserve Officers are responsible for attending the provided mandated training through out the year.

Reserve Officers must be committed to serve in a professional manner as a representative of HCPD.

What equipment must I purchase?

The Reserve body has some of the needed equipment available. However, the applicant is responsible for purchasing any equipment not available.

How do I become a Reserve Officer?

To be a Reserve Officer an individual must be at least 21 years of age, have a valid Indiana driver's license, high school diploma (or equivalent) no criminal record (minor traffic violations are exempt), and be a resident of Harrison County or surrounding counties. Candidates must pass a background investigation consisting of criminal, credit, and character evaluations as well as pass polygraph testing, drug testing, and a staff interview.



Interested individuals should complete a Reserve application and mail or drop them off at the Sheriff's Department. Applications can be obtained at the Sheriff's Department or printed off the HCSO Website.

**HARRISON COUNTY SHERIFF'S
DEPARTMENT**



EMPLOYMENT APPLICATION
AN EQUAL OPPORTUNITY EMPLOYER

HARRISON COUNTY
SHERIFFS DEPARTMENT
INFORMATION SHEET

1. COMPLETING YOUR APPLICATION:

- a. THE APPLICATION SHOULD BE COMPLETE AND ACCURATE BEFORE SIGNING. INCOMPLETE APPLICATIONS CANNOT BE ACCEPTED. Any misrepresentations, falsifications or material omissions in any form may result in the County's exclusion of the individual from further consideration for employment, or if the person has been hired, termination of employment.
- b. Your SOCIAL SECURITY NUMBER MUST BE INCLUDED for record control purposes. Federal law requires that all employed persons have a Social Security Number.
- c. To receive APPROPRIATE CREDIT, include a copy of your diploma, transcript, certificate or license as directed on the application.

2. MINIMUM OR SELECTION REQUIREMENTS

- a. YOUR APPLICATION WILL BE ACCEPTED ONLY IF IT CLEARLY SHOWS YOU MEET THE REQUIREMENTS. The information you provide will determine your eligibility and is subject to verification at any time.
- b. You must be at least 21 years of age at the time of appointment unless otherwise stated. The Federal Age Discrimination in Employment Act (ADEA) of 1967, as amended, prohibits discrimination on the basis of age for any individual over age 40.

3. EQUAL EMPLOYMENT OPPORTUNITY/NON-DISCRIMINATION POLICY

- a. It is the policy of the County of Harrison County to provide equal opportunity in employment to all employees and applicants for employment and to prohibit discrimination in employment because of race, religion, color, sex, age, national origin, disability, military status or any other classification protected under applicable law. This policy applies to all terms, conditions and privileges of employment, including, but not limited to, hiring, promotion, transfer, compensation, benefits, layoff, recall, employee facilities, discharge and retirement.
- b. It is the policy of Harrison County not to discriminate against a qualified individual with a disability in: job, application procedures, the hiring, advancement, or discharge of employees, employee compensation, job training and other terms, conditions and privileges of employment. It is the intent of this County to comply with all applicable requirements of the Americans with Disabilities Act (ADA).

4. AUTHORIZED ALIEN STATUS AND CITIZENSHIP

- a. All new hires must cooperate with the County in its compliance with the Immigration Reform and Control Act of 1986 and in verifying employment eligibility. New employees shall complete an I-9 form and show proof of identity and employment eligibility within the first three (3) days of employment. Employees who refuse to or are unable to supply the documentation necessary to prove that they are American citizens or aliens authorized to work in this country will be terminated. If a person is not able to perform the essential functions of a job, even with reasonable accommodations, then the person is not qualified for the position. The County will reasonably accommodate persons with a disability.

5. RECORD OF CONVICTIONS

- a. A full disclosure of all convictions is required. Failure to disclose convictions will result in disqualification. Not all convictions constitute an automatic bar to employment. Factors such as your age at that time of the offense(s), and the recency of offense(s) will be taken into account, as well as the relationship between the offense(s) and the job(s) for which you apply. **ANY CONVICTIONS OR COURT RECORDS WHICH ARE EXEMPTED BY A VALID COURT ORDER DO NOT HAVE TO BE INCLUDED.**

* Placement of an employment application with the County does not mean that an applicant will be interviewed. Equal consideration will be given to all applicants based on qualifications listed for the job.

*Applications will be retained in active files for six (6) months or for the duration of applicant recruitment lists when used.



Harrison County Sheriff's Department
 1445 Gardner Lane NW Suite 1000
 Corydon, IN 47112

Personal Information					
Last	First	MI	Mobile Phone #	Home Phone #	SSN #
Street Address			City	State	Zip Code
E-Mail Address					
Are you entitled to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO		Are you 18 yrs of age or older <input type="checkbox"/> YES <input type="checkbox"/> NO		If Yes, Date of Birth	
Do you possess a valid driver's license? <input type="checkbox"/> YES <input type="checkbox"/> NO		License Number		State	
Have you been convicted of a misdemeanor / felony or have been incarcerated in connection with a misdemeanor / felony in the past 7 years? <input type="checkbox"/> YES <input type="checkbox"/> NO			If Yes, please explain:		
Military Service? <input type="checkbox"/> YES <input type="checkbox"/> NO		Branch:	Are you a veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO		War:
What position are you applying for?			How did you hear about this position?		
Expected Hourly Rate		Expected Weekly Earnings		Date Available	

Prior Work Experience						
	Current or Most Recent		Prior		Prior	
Employer						
Address						
City, State, Zip						
Telephone						
Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position / Job Title						
Pay						
Reason for Leaving						
May We Contact?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Education							
	Name / Location	Last Year Complete				Degree	Major or Emphasis
High School		9	10	11	12		
College / University		1	2	3	4		
Trade School							
Other							
List any applicable special skills, training or proficiencies							

Personal References - References may not be relatives, paramours, or previous employers			
	Reference #1	Reference #2	Reference #3
Name			
Address			
City, State, Zip			
Telephone			

Disclaimer

By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.

Signature

Date

**HARRISON COUNTY SHERIFF'S DEPARTMENT
AUTHORIZATION TO RELEASE INFORMATION**

I, _____, respectfully request and authorize you to furnish the Harrison County Sheriff's Department any and all information that you may have concerning me, my work record, my reputation, my financial and credit status. Please include any and all medical, physical, and mental records or reports, including all information of a confidential or privileged nature, and photocopies of same if requested. This information is to be used to assist the Department in determining my qualifications and fitness for the position I am seeking with the Harrison County Sheriff's Department.

I hereby release you, your organization or others from any liability or damage which may result from furnishing the information requested above.

Date of Release

Printed Full Name

Signature

Date of Birth

Social Security Number

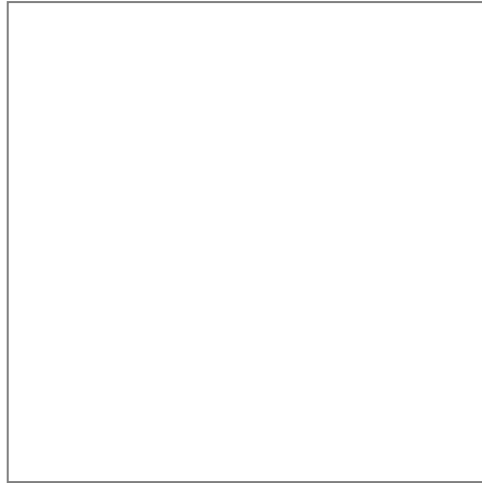
Driver's License Number

State

Note: THIS FORM MAY BE RETAINED IN YOUR FILES.

PHOTOGRAPH:

Please provide a photograph of yourself. The photograph must be front view, head and shoulder, two and one half inch square, and have been taken within the last six months. The picture should be mounted securely in the box provided.



License:

A copy your license should be mounted securely in the middle of the space provided below.

EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE

The following voluntary information is requested for the County of Harrison County to evaluate its hiring practices required by law for the State and Federal Government. This form will be detached from the employment application. This information will be confidential and will **NOT** be used to make a decision about your employment.

A. Please mark the group that best describes your race/ethnicity.

A. _____ White

B. _____ Black/African American (Not of Hispanic Origin)

C. _____ Hispanic/Latino (Mexican, Puerto Rico, Cuban, Central or Southern American, or Spanish culture or origin)

D. _____ American Indian (subject to verification)

E. _____ Asian or Pacific Islander (excluding Filipino)

F. _____ Filipino

B. Gender

A. _____ Male

B. _____ Female

C. _____ Disabled—A person with a disability is an individual who: (1) has a physical or mental impairment or medical condition that limits one or more life activities, such as walking, speaking, breathing, performing manual tasks, seeing, hearing, learning, caring for or oneself or working; (2) has a record or history of such impairment or medical condition; (3) is regarded as having such an impairment or medical condition.

Date of Birth: _____ Name: _____