## **OFFICE OF THE SHERIFF**



25 S. Martin Luther King, Jr. Avenue Waukegan, Illinois 60085

MARK C. CURRAN, JR.
SHERIFF
DAVID HARE
UNDERSHERIFF

(847) 377-4000 (847) 360-5796 FAX

To: Prospective Auxiliary Deputy Candidate

From: Auxiliary Deputy Unit Commander

Subject: Pre-application Questionnaire

Welcome to your first step in exploring the possibilities of joining one of Illinois' unique organizations. The Lake County Sheriff's Auxiliary Deputy Unit is a volunteer organization. Even so, not everyone can be a Auxiliary Deputy. This type of unpaid work is not for everyone. But if you meet the basic qualifications, have the drive, dedication and ambition, you can be a member of this elite organization.

Applications for membership are accepted year round. However, the Recruit Basic Training Course (the prescribed course of instruction) is conducted in the fall. The dates are to be determined, but typically begin in December.

Listed below are the minimum qualifications, requirements and important information about the unit that is necessary for the prospective candidate to know in order to be considered for a position within the unit. Please read and check off the statements below. Sign and date this form and turn it in with your completed application.

The Lake County Sheriff's Auxiliary Deputy Unit is a volunteer organization and does not receive compensation for duties performed.
The Unit is unarmed and carries no weapons.
You must be a legal resident of Lake County, Illinois in order to be a member of the unit.
You must have a minimum of a High School/GED diploma.
You must be a minimum of 21 years old.
You must be a Citizen of the United States.
You must not have a criminal record.
Auxiliary Deputies are expected to contribute a minimum of 150 hours of actual duty (not including meetings or training) over the course of a year.

	Most of the duties performed by Auxiliary Deputies are conducted on weekday evenings, weekends and on holidays.				
	<ul> <li>Auxiliary Deputies are often required to be in uniform and related equipment that ways upwards of 20 pounds for long periods of time in all types of weather.</li> </ul>				
	<ul> <li>Auxiliary Deputies must be capable of lifting, carrying, and moving equipment weighing up to 25 pounds on a regular basis.</li> </ul>				
	Auxiliary Deputy Candidates are required to attend a prescribed course of instruction as determined by the Sheriff of Lake County.				
	<ul> <li>Training typically commences in December, ending in April. Training classes are normally held either Friday night or Saturday during the day. However, training may occur on other days as dictated by instructor availability.</li> </ul>				
	• Certain aspects of the training course are physically demanding and require strenuous exertion.				
	<ul> <li>All candidates are required to be exposed to OC (pepper) spray during the training course.</li> </ul>				
	The unit is limited to 50 members. Once completing the required course of instruction, the Auxiliary Deputy Candidate will be placed on an eligibility list (ranked based on academic performance).				
	When pulled from the eligibility list, the Auxiliary Deputy Candidate is sworn in as a Probationary Auxiliary Deputy for a one-year period.				
	Once successfully completing all training and the one-year probationary period, candidates are considered full Auxiliary Deputies.				
If you have any questions, please feel free to contact me. Completed applications may be sent to the below address.					
1301 Nor	Deputy Unit Commander th Milwaukee Avenue e, Illinois 60048				
App	licant's Printed Name Applicant's Signature Date				



## **Application for The Lake County Sheriff's Auxiliary Deputy Unit**

## **COMPLETE OR CHECK AS REQUIRED**

Personal Info	rmation										
Name:											
	First	Middle			Last			E-N	Mail		
Address:						( )	-		/	/	
	Street	City		State Zip	Code	Home / Cell	Phone	<del></del>	Date c	of Birth	
Person To		_				( )	-				
Contact In Emergency:	Name:		Addre	SS:		Phone	):		Relation	onship:	
Education (C	heck Highest Level Con	npleted)									
Hig	h School/GED 🛚		Colle	ge 🖳 .		Gra		School			
Name ar	nd Location of Schools	Attended	College ☐ Dates Attended		Majo	Major Subject(s)		Degree or Certificate and			
			From	То			I	Date of G	raduat	tion	
High School											
College(s)											
Business, Tecl	hnical or Certificate Progr	ams									
Professional R	egistrations(s), and/or Ce	rtificate(s) relate	d to law er	nforcement	, public s	safety or emergenc	y man	agement (	(includ	e dates):	
List three refe	erences (not related to y	ou) who are qu	alified to	give an op	inion of	your character a	and ab	ilities:			
Name:	А	ddress:				Phor	ne#_	( )			
Name:	Д	ddress:				Phor	ne#	()		-	
Name:	Д	ddress:				Phor	ne # _	( )		_	

EXPERIENCE - Please account for all employment within the last eight years, beginning with your current or most recent employer. In addition, please indicate any other experience that you feel is relevant to the position for which you are applying (e.g. volunteer experience, military experience, etc.) Attach an additional sheet if extra space is needed. NOTE: All sections of this application must be completed even if resume is attached.

Address:  Employer's Business:  Supervisor's Name:  Supervisor's Title:	Describe your Duties:
er: Supervisor's Name:	
Supervisor's Title:	
Firm Name:	Job Title:
Address:	Describe your Duties:
Employer's Business:	
er Supervisor's Name:	
Supervisor's Title:	
Firm Name:	Job Title:
Address:	Describe your Duties:
Employer's Business:	
er: Supervisor's Name:	
Supervisor's Title:	
Firm Name:	Job Title:
Address:	Describe your Duties:
Employer's Business:	
er: Supervisor's Name:	
Supervisor's Title:	
	Employer's Business:  Supervisor's Name: Supervisor's Title: Firm Name: Address: Employer's Business: Supervisor's Name: Supervisor's Title: Firm Name: Address: Employer's Business: Supervisor's Title: Firm Name: Address: Employer's Business: Supervisor's Name:

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Street  City  State  City  State  City  State  City  State  City  State  Social Server Address:  City  State  City  City  State  City  City  State  City  State  City  City  State  City  State  City  City  State  City  City  State  City  City  State  City  State  City  State  City  State  City  City  State  City  State  City	ame:	-
In order to comply with federal regulations in the area of Equal Opportunity Employment, employers must have data available on applicant flow patterns (41 CFR 60-2.12, 60-741.5, 60-250.5). For this reason, we would appreciate your voluntary cooperation in providing the following information. This information will be treated confidentially and will not result in adverse treatment of any individual. This information may be provided to government officials investigating our contract compliance status.    Male   Black, African-American   American Indian or Alaskan Native   Have you ever been employed by Lake County?		curity #
In order to comply with federal regulations in the area of Equal Opportunity Employment, employers must have data available on applicant flow patterns (41 CFR 60-2.12, 60-741.5, 60-250.5). For this reason, we would appreciate your voluntary cooperation in providing the following information. This information will be treated confidentially and will not result in adverse treatment of any individual. This information may be provided to government officials investigating our contract compliance status.    Male   Black, African-American   American Indian or Alaskan Native   Have you ever been employed by Lake County? If yes:    Date   Department   Position   Date   Department   Position   Passes   Date   Department   Passes   Date   Department   Position   Passes   Date   Department   Passes   Date   Da	ddress	/ /
Opportunity Employment, employers must have data available on applicant flow patterns (41 CFR 60-2.12, 60-741.5, 60-250.5). For this reason, we would appreciate your voluntary cooperation in providing the following information. This information will be treated confidentially and will not result in adverse treatment of any individual. This information was be provided to government officials investigating our contract compliance status.    Male   Black, African-American   American Indian or Alaskan Native   Have you ever been employed by Lake County?		Date of Birth
□ Male □ Black, African-American □ American Indian or Alaskan Native □ Female □ Hispanic □ White, Caucasian □ Asian or Pacific Islander □ In compliance with the Americans with Disability Act of 1990, please complete. a. I have read and understand the essential functions of the job as described on the posted position description? □ Explain: □ Date Department Position □	O ap re fo wi be	rill — —
White, Caucasian		
In compliance with the Americans with Disability Act of 1990, please complete.  a. I have read and understand the essential functions of the job as described on the posted position description?  Explain:  b. Do you need any assistance or auxiliary aids in applying for the job?  Explain:  Do you need any assistance or auxiliary aids to perform the job?  C. Do you need any assistance or auxiliary aids to perform the job?  Advertisement or Article (please give name of pulp).		le a
for the job? Explain:  No  No  No  No  No  No  No  No  No  N	cc	ir to an
c. Do you need any assistance or auxiliary aids to perform Yes the job?	b.	
	C.	
		lication)
Veteran?	3 Ve	
Dates of Enlistment		

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Yes No

ORAL INTERVIEW							
Date	ate Reviewer Name Comments						
	REFERENCE CHECK						
Date	Name of Reference	Checked By Comments					
	BACKGROUND INVESTIGATION						
Date	Type Background Check	Comments					

LAKE COUNTY IS AN EQUAL OPPORTUNITY-AFFIRMATIVE ACTION EMPLOYER. WOMEN, MINORITIES AND INDIVIDUALS WITH DISABILITIES ARE ENCOURAGED TO APPLY. NO APPLICANT FOR EMPLOYMENT SHALL BE DISCRIMINATED AGAINST BECAUSE OF AGE, RACE, COLOR, RELIGION, SEX, MARITAL STATUS, NATIONAL ORIGIN, OR DISABILITY.

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