

COOK COUNTY SHERIFF'S OFFICE

Applicant's Legal Name (First Name, Middle Name, Last Name) _____

Social Security Number: _____

Date of Birth _____ **Driver's License Number & State** _____

Email Address: _____ **Cell Number:** _____

Personal History Questionnaire

Cook County Sheriff's Merit Board

Cook County Administration Building – Room 1100

69 West Washington Street

Chicago, Illinois 60602

Email: Sheriff.MeritBoard@ccsheriff.org

Telephone (312) 603-0170

Fax (312) 603-9865

*Place two (2) passport
2X2 inch photos here*

*Print applicant name on
the back of each photo*

*Photos may be obtained
at Passport Photo Shops
(ie. Walgreens, CVS
Pharmacy, Jewel Osco,
Costco, etc.)*

VITAL STATISTICS AND RESIDENCE SECTION:

Please be advised that upon completion of this Personal History Questionnaire you will be required to certify that all your answers made by you on the Personal History Questionnaire, any attachments, statements, documents and all required information provided to the Cook County Sheriff's Office and Cook County Sheriff's Merit Board for your employment background and background investigation or any other phase of your pre-employment screening are true and complete to the best of your knowledge and belief. Also, that you are aware and understand that any misrepresentation(s), mis-statement(s) of material fact(s), willful omission(s) of material fact(s), or willful deception(s) will be cause for disqualification and rejection as an Applicant for employment without appeal. Additionally, that you further understand that, if appointed these aforementioned misrepresentation(s), mis-statement(s), omission(s), or deception(s) will be cause for immediate disqualification and/or immediate termination from the Cook County Sheriff's Office and Cook County Sheriff's Merit Board, without notice and without any right of appeal.

Please Note: All Applicants will be required to provide clarification or additional information during the Investigative Interview and/or Polygraph Examination process and/or other processes. At any time during the Merit Board Certification Process and/or Certification Period or if you begin employment with the Cook County Sheriff's Office, you have a continuing affirmative duty to disclose any information that has changed or is related to any response given or subject matter covered on your personal history questionnaire and related documents.

1. What is your full legal name?

2. Provide all other names you have been known by and explain why you were known by each such name. If none, please state "None".

3. What is your home address (i.e. street, city, state, zip)?

4. What is your home telephone number? _____

5. What is your cell number? _____

6. What is your work telephone number? _____

7. What is your present age? _____ Date of Birth? _____

8. Where were you born? _____

9. Are you a citizen of the United States? _____

10. If you are a naturalized citizen, give Certificate number and date of Naturalization along with copy of Certificate of Naturalization:

11. What is your marital status? ☐ Single ☐ Married ☐ Divorced

☐ Widowed ☐ Separated ☐ Civil Union

12. If you have ever been married, give the date, city and state of each of your marriages.

Month	Year	City	State

13. Provide the full maiden name of your spouse if applicable (Last Name, First Name, Middle Name):

14. Provide your spouse's date of birth.

15. Where was your spouse born (country, city, state)?

16. Provide the name and address of your spouse's employer.

17. Provide your father's place of birth (country, city, state).

18. Provide the name of your father's employer.

19. Provide your father's employer's address (Number, Street, City, State, Zip Code).

20. Provide your mother's place of birth (country, city, state).

21. Provide the name of your mother's employer.

22. Provide your mother's employer's address (Number, Street, City, Zip).

23. If you are divorced from your spouse, give the name of your former spouse presently used and date of birth, of each former spouse.

Last Name (Maiden if Applicable)	First Name	Middle Name	Date of Birth (DOB)

24. What is the present address of each former spouse (Number, Street, City, State, Zip)

25. When was the divorce granted (Month, Date, Year)? _____

26. Are you presently obligated to pay alimony? ☐ Yes ☐ No

If "YES" what amount? \$_____

27. Are you obligated to pay child support (Married or Not Married) ☐ Yes ☐ No

If "Yes" what amount? \$_____

Please note: Questions 26-28 apply to all applicants regardless of marital status.

28. Are you currently or have you ever been delinquent on alimony or child support payments?

☐ Yes ☐ No

If "Yes" explain in detail (include date, docket number, amount delinquent and circumstances).

29. If you are separated from your spouse, give the name of your former spouse presently used and date of birth.

Last Name	First Name	Middle Name	Date of Birth (DOB)

30. What is the present address of your spouse (Number, Street, City, State, Zip)?

31. Provide the date the separation occurred (Month, Date, Year).

SKILLS AND PROFICIENCY SECTION:

32. Can you use a computer? ☐ Yes ☐ No

33. List any special skills that you possess and your proficiency in each listed skill.

34. Do you speak, read, or write any foreign language? ☐ Yes ☐ No

Language	Speak	Read	Write	How Well?

If you have answered "YES" to any of the questions above and you need additional space, use the blank pages at the end of the Personal History Questionnaire to explain, giving full details, names, dates, and circumstances. Preface your response(s) with the number of the question.

VEHICLE AND DRIVER'S LICENSE SECTION:

35. What is your Driver's License Number? _____

36. What state was it issued in? _____

37. Date of Expiration? _____

38. Do you currently have a revocation or suspension? ☐ Yes ☒ No

39. Have you ever applied for or obtained a Driver's License to drive in another state? ☐ Yes ☐ No

State: _____

40. Have you ever applied for or obtained a Driver's License under another name? ☐ Yes ☒ No

Name: _____

41. Have you ever been refused a Driver's License in any state? ☐ Yes ☐ No

State: _____

42. Has your Driver's License privilege to drive ever been suspended or revoked? ☐ Yes ☐ No

If "YES", how many times? _____ Explain Why?

43. Have you ever been arrested, stopped for, cited or charged with Driving Under the Influence of Alcohol or Drugs? ☐ Yes ☐ No

If "YES", how many times? _____ When and where?

44. Have you ever been charged with reckless driving? ☐ Yes ☒ No

45. Have you ever been involved in an accident involving death, serious injury, or hospitalization? ☐ Yes ☐ No

46. As a driver, have you ever left the scene of an accident (hit & run) without identifying yourself? ☐ Yes ☐ No

47. Do you own a vehicle, or is a vehicle registered in your name? ☐ Yes ☐ No

Year _____ Make _____ Model _____

Year _____ Make _____ Model _____

Year _____ Make _____ Model _____

Year _____ Make _____ Model _____

48. Do you have auto insurance? ☐ Yes ☐ No

Company _____ Telephone# _____

49. Do you have license plates? ☐ Yes ☐ No

State _____ Plate# _____ Expires _____

50. Do you have a municipal vehicle sticker? ☐ Yes ☐ No

City _____ Sticker# _____ Expires _____

51. Do you have any outstanding parking tickets, traffic tickets/citations? ☐ Yes ☐ No

52. Are you on a Payment Plan? ☐ Yes ☐ No

53. Amount Presently Owed: \$ _____

If you answered "YES" any question under the Vehicle & Driver's License Section that you have not provided an explanation, explain in full details (include names, dates, reason and circumstances).

Preface response with the number of the question.

If you have answered "YES" to any of the questions above and you need additional space, use the blank pages at the end of the Personal History Questionnaire to explain, giving full details, names, dates, and circumstances. Preface your response with the number of the question.

FIREARM OWNER'S IDENTIFICATION CARD (FOID):

54. F.O.I.D Card ☐ Yes ☐ No

Card# _____

55. Concealed to Carry Card ☐ Yes ☐ No

State: _____ Card # _____

56. Have you ever been denied an Illinois Firearm Owner's Identification Card (FOID) or other state(s) Firearm Owner Identification Card or Concealed to Carry Card? ☐ Yes ☐ No

If you answered "YES" to the question, explain in full details (include names, dates, reason and circumstances).

57. Has your Illinois Firearm's Owner Identification Card (FOID) or other state(s) Firearm's Owner Identification Card or Concealed to Carry Card ever been revoked? ☐ Yes ☐ No

If you answered "YES" to the question, explain in full details (include names, dates, reason and circumstances).

If you have answered “YES” to any of the questions above, and you need additional space, use the blank pages at the end of the Personal History Questionnaire to explain, giving full details, names, dates, and circumstances. Preface your response with the number of the question.

RESIDENCE SECTION:

58. List ALL previous addresses since leaving High School (start with your present address). Use the blank pages at the end of the Personal History Questionnaire if needed. Preface response with the number of the question.

ADDRESS	From month/year	To month/year	State whether you owned cpf br rented each residence cpf br living with your family cpf br with friends.	Name of owner of each residence, if the owner was other than yourself or your parents.
Number and Street			Paid to:	
City, State, Zip Code			Name	
			Address	
			Phone #	
Number and Street			Paid to:	
City, State, Zip Code			Name	
			Address	
			Phone	
Number and Street			Paid to:	
City, State, Zip Code			Name	
			Address	
			Phone	
Number and Street			Paid to:	
City, State, Zip Code			Name	
			Address	
			Phone	
Number and Street			Paid to:	
City, State, Zip Code			Name	
			Address	
			Phone	
Number and Street			Paid to:	
City, State, Zip Code			Name	
			Address	
			Phone	

FAMILY/ROOMMATE INFORMATION SECTION

59. List below **ALL** of your **Relatives** and **Roommates**, both current and former, in the following order: 1) All children, both yours and your spouse's, whether natural, step, half, foster, adopted. 2) your spouse; 3) the father(s) of your children; 4) the mother(s) of your children 5) your father; 6) your mother's maiden name; 7) your brothers, step brothers, half-brothers; 8) your sisters, step sisters, half-sisters; 9) your step father(s); 10) your step mother(s); 11) your father-in-law; 12) your mother-in-law; 13) your brothers-in-law; 14) your sisters-in-law; 15) List below **ALL** people who live with you, have lived with you or you have lived with not identified above. This includes roommates living with you or people you have lived with at any time. If a person is deceased, indicate in the "DOB" (Date of Birth) column.

[illegible]

FAMILY/ROOMATE INFORMATION SECTION (continued)

Relationship	Name (Last, First, Middle)	Address (Number, Street, City, State)	DOB	Gender	Home/Cell Phone Number

EDUCATION SECTION:

60. Do you have a high school diploma? ☐ Yes ☐ No

(Official Transcript (sealed) from your High School is required)

61. General Education Diplomas (G.E.D.)? ☐ Yes ☐ No

(Official General Education Development (G.E.D.) Test Transcript is required)

62. College or University credit hours? ☐ Yes ☐ No

(Official Transcript(s) (sealed) from any College or University you have attended are required)

63. Provide the information requested below concerning the High School you have attended:

Name of School	Address (Number, Street Name, City, State) and Telephone Number	Attended (month/year)		Did you Graduate? If "Yes" give date of Graduation

64. Provide the information requested below concerning the Colleges or Universities you have attended:

Name of School	Address (Number, Street Name, City, State) and Telephone Number	Attended (month/year)		Did you Graduate? If "Yes" give date of Graduation	Major

65. List below any correspondence, trade, or graduate schools you have attended:

Name of School	Address (Number, Street Name, City, State) and Telephone Number	Attended (month/year)		Did you Graduate? If "Yes" give date of Graduation	Major

66. Have you ever been placed on probation, suspended, or expelled from any high school, college, or university for any academic or disciplinary reason? ☐ Yes ☒ No

If you answered "YES" to the question, explain below giving full details, dates and circumstances.

MILITARY SERVICE RECORD SECTION:

Applicants must provide a copy of the DD214, Reservist Separation Orders, National Guard NGB forms or an equivalent document acceptable to the Merit Board.

67. Do you have current or previous Military Service? ☐ No ☐ Yes (Copy of D.D. 214 Required)

☐ Regular ☐ National Guard ☐ Reserves ☐ Other ☐ Does Not Apply

Selective Services Information can be obtained by contacting (847) 688-6888.

Branch	Date of Entry	Date of Discharge	Type of Discharge	Rank at Discharge

68. **Total ACTIVE Duty Service:** _____ Years and _____ Months

69. List below your military specialties; that is, those activities in which you were primarily engaged while in the military service:

70. List any awards or medals you received while in the military:

71. What is your status in respect to military service (i.e. on active duty, actively drilling in reserves, drilling national guard, inactive reserve, or retired, etc.)?

72. If you are in the reserves, where do you report (Unit Title & Drill Site Address)?

73. How often do you report?

74. Name of Commanding Officer:

75. Are you registered with the Selective Service System? ☐ Yes ☐ No
(Applicable to Males under 26 years of age.)

76. What is your registration number (applicable to Male applicants – Ages 18 -25)?

No: _____ Date Registered: _____

77. Have you ever been denied enlistment or employment into any branch of the Armed Forces?

☐ Yes ☐ No

78. Please identify your Separation Code: _____

79. What is (was) your reserve obligation, unit, address and Commander's name and phone?

80. Were you ever questioned by the police or military authorities concerning any criminal activity while in the military? ☐ Yes ☐ No

81. Have you ever been reduced in pay grade or been the subject of any judicial or non-judicial disciplinary action while in the active military or National Guard? ☐ Yes ☐ No

82. Have you ever received a dishonorable or general discharge? ☐ Yes ☐ No

If you answered, "YES" to any of the above questions, explain below giving full details, dates and circumstances.

LEGAL / FINANCIAL INFORMATION SECTION:

83. Credit Report Instructions

Applicants are required to provide a full Credit Report (not just the credit scores). Pursuant to Public Law 91-508 Fair Credit Reporting Act, the Cook County Sheriff's Merit Board requires an applicant to provide a Credit Report and anyone requesting a credit report will be entitled to receive a free copy of their report from a credit reporting agency. You may contact anyone of the following acceptable agencies via internet, telephone or letter:

Annual Credit Report

Request Service	Equifax	Experian
P.O. Box 105281	P.O. Box 105873	P.O. Box 2002
Atlanta, GA 30348	Atlanta, GA 30348	Allen, TX 75013
(877) 322-8228	(800)685-1111	(888) 397-3742
www.annualcreditreport.com	www.creditreport.com	www.experiandirect.com

Please Note: You must submit your Credit Report to the Cook County Sheriff's Merit Board on the same day you are required to provide the Personal History Questionnaire and all other requested documentation.

List below your monthly expenditures which include ALL bills you owe. List the name & type of each company, firm and individual to which you are currently indebted, i.e. Mortgage, Auto Loans, Student Loans, including deferred loans, Credit Cards, Personal Loans, Cell Phones Gas, Electric, Rent, etc. Legal and financial documentation to substantiate your response may be required.

Name of Firm or Individuals	List Monthly Expenditures	Total Amount of Debt
Example: Chase Bank/Mortgage	\$2,000.00	\$200,000.00
Example: Rental Company	\$1,700.00	

Name of Firm or Individuals	List Monthly Expenditures	Total Amount of Debt

84. Do you or your spouse have any legal action pending against you? Yes ☐ No ☐

If you answered "YES" explain what action is pending:

85. Are there any unpaid judgments against you? ☐ Yes ☐ No

If you answered "Yes" explain in detail providing circumstances (include date of judgment and Court in which action was filed):

86. Are you currently delinquent in any real estate, state, or federal taxes? ☐ Yes ☐ No

If you answered "YES" explain in detail (include date and docket number):

87. Have you ever filed a petition for bankruptcy? ☐ Yes ☐ No

If you answered "YES" explain in detail (include date, docket number and discharge date):

88. Amount Presently Owed: \$_____

89. Have you or your spouse ever had wages attached or garnished? ☐ Yes ☐ No

If you answered "YES" explain in detail (include date, docket number and nature of debt):

90. Have you or your spouse ever been party to a small claims or other court action? ☐ Yes ☐ No

If you answered "Yes" explain in detail providing, names, dates, circumstances (include court in which action was filed):

91. If you should be employed by Cook County, do you anticipate receiving income from any other source?

☐ Yes ☐ No

If you answered "Yes" explain in detail (provide the identity or name of the other source, the expected number of hours per week to be worked and your expected occupation).

92. Have you or your spouse ever had any of your property, including automobiles, repossessed?

☐ Yes ☐ No

If you answered "YES" explain in detail:

GANG AFFILIATION / CRIMINAL ORGANIZATION SECTION:

93. Are you or have you ever been a gang member, or been affiliated with, or associated with a gang, gang member or criminal organization (i.e. Association can be defined as social interaction, participation in a group or group activity)? ☐ Yes ☐ No

If you answered "YES" explain below providing names, dates and circumstances.

Knowingly omitting information or providing false information shall be grounds for termination. At any time during the Merit Board Certification Process and/or Certification Period or if you begin employment with the Cook County Sheriff's Office, you have a continuing affirmative duty to disclose any information that has changed or is related to any response given or subject matter covered on your personal history questionnaire and related documents.

94. Have you ever been a member of a gang or known criminal organization, ever associated with a gang or criminal organization or ever been involved in gang activity or criminal organization? ☐ Yes ☐ No
- If you answered "YES", explain below providing names, dates and circumstances.

95. Do you have or have you ever had any tattoos? ☐ Yes ☐ No

If you answered "YES", describe the tattoos in detail, the location(s) and what the tattoo(s) represent to you?

96. Do you have, or have you ever had, any tattoos or other body markings that are signs representative of any gang, gang membership or gang affiliation? ☐ Yes ☐ No

If you answered "YES", explain below providing names, dates and circumstances.

97. Do you currently or have you ever associated with a convicted felon or lived with a convicted felon?

☐ Yes ☐ No

If you answered "YES", explain below providing names, dates and circumstances.

98. Are you a terrorist or have you ever been involved in a terrorist organization?

☐ Yes ☐ No

If you answered "YES", explain below providing names, dates and circumstances.

99. Do you know any person that is a terrorist or associated with a known terrorist organization?

☐ Yes ☐ No

If you answered "YES", explain below providing names, dates and circumstances.

COURT / POLICE INTERACTION SECTION:

100. Have you ever been arrested? ☐ Yes ☐ No
101. Have you ever been convicted of a crime and/or entered a plea of guilty to a crime in any court of law? ☐ Yes ☐ No
102. Have you ever had a Warrant for your arrest, a Failure to Appear, or a Summons for anything? ☐ Yes ☐ No
103. Have you ever been arrested for domestic violence? ☐ Yes ☐ No
104. Have you ever appeared in court on a criminal matter or any other reason? ☐ Yes ☐ No
105. Have you ever been a subject of an Order of Protection, or have you ever filed an Order of Protection against anyone? ☐ Yes ☐ No
106. Regardless of who was at fault, have you ever been involved in or accused of having a physical altercation? ☐ Yes ☐ No
107. Have you ever been involved in a violent crime as a suspect, witness, victim, etc., involving a shooting, a stabbing, involving death, serious injury, or hospitalization? ☐ Yes ☐ No
108. Have you ever been questioned by the police regarding a criminal investigation? ☐ Yes ☐ No
109. Have you ever given testimony in criminal court as a defendant? ☐ Yes ☐ No
110. Have you ever received a municipal or ordinance citation ie. disorderly conduct, urinating in public, underage drinking, drinking in public, having an open container of alcohol, zoning, safety or building regulations etc. ☐ Yes ☐ No
111. Have you ever been the victim of a crime? ☐ Yes ☐ No
112. Have you ever visited an inmate/detainee in-person or on-line at the Cook County Department of Corrections? ☐ Yes ☐ No
113. Have you ever visited an inmate/detainee in-person or on-line at any other county, city, state or federal correctional facility (in/out of state)? ☐ Yes ☐ No
114. Do you currently or have you ever associated with anyone who has been incarcerated? ☐ Yes ☐ No

If you answered "Yes" to any questions in the Court/Police Interaction Section, provide an explanation, giving full details, names, dates and circumstances. Preface your response with the number of the questions.

If you have answered “YES” to any of the questions above, and you need additional space, use the blank pages at the end of the Personal History Questionnaire to explain, giving full details, names, dates, and circumstances. Preface response with the number of the question.

EMPLOYMENT HISTORY SECTION:

Employment verification letters must be provided for all employments including present employment and must include: Employer Name, Position Title, Start Date and End Date (if applicable). Employment verification letters must be on original letterhead from the employer including a signature and business telephone number.

If you answered “YES” to any of the questions below, explain in detail at the end of the Personal History Questionnaire, providing names, dates and circumstances. Preface each response with the number of the question.

115. Have you ever been terminated (fired/discharged) or asked to resign, or resigned in lieu of termination, from any job or position including a volunteer position? ☐ Yes ☐ No

116. Do you currently have or have you ever had any professional license ie. Health Care License, Real Estate Broker License, Business License, Law License, etc.)? ☐ Yes ☐ No

Professional License type: _____ License # _____

117. Have you ever had a professional license and/or business license suspended or revoked? ☐ Yes ☐ No

118. Have you ever been suspended by an employer, or received a formal written reprimand? ☐ Yes ☐ No

119. Do you object to working nights or on a rotating shift with different days off? ☐ Yes ☐ No

120. Have you ever had an extended leave of absence from an employer for any reason other than medical or earned vacation i.e., leaves of absence to go to another employer or agency, serving a suspension or lay off, etc.? ☐ Yes ☐ No

121. Have you ever been employed under another name? ☐ Yes ☐ No

122. Have you ever been disciplined or discharged from any employment specifically for insubordination, absenteeism, tardiness, work performance or other work related concerns? ☐ Yes ☐ No

123. Have you ever been disciplined or discharged from any employment for theft, including an over-ring or under-ring, theft of time or overtime? ☐ Yes ☐ No

124. Have you ever taken anything from anyone including former or current employers (ie. office supplies, food, tools, cash, property, etc.)? ☐ Yes ☐ No

125. If you have worked in law enforcement, have you ever been named in a civil suit related to your law enforcement duties? ☐ Yes ☐ No

126. Will any of your current or past employers give you an unfavorable recommendation? ☐ Yes ☐ No

127. Do you have any reason to be concerned about an investigation into your employment history? ☐ Yes ☐ No

128. Do you know of anything that would hinder you from employment with a law enforcement agency or prevent you from performing the job of a Correctional Officer, i.e. such as working weekends and/or nights, breaking up an altercation, carrying a gun, and /or taking a human life, if necessary, etc.? ☐ Yes ☐ No

If you have answered “YES” to any of the questions above, and you need additional space, use the blank pages at the end of the Personal History Questionnaire to explain, giving full details, names, dates, and circumstances. Preface response with the number of the question.

Knowingly omitting information or providing false information shall be grounds for disqualification and/or termination. If and when you begin employment with the Cook County Sheriff's Office, you are hereby notified that you have a continuing affirmative duty to disclose any information

EMPLOYMENT HISTORY SECTION:

129. Have you previously submitted an application for employment with the Cook County Sheriff's Office or any other city, county, state, or federal law enforcement agency? ☐ Yes ☐ No
130. Have you ever been administered a polygraph examination? ☐ Yes ☐ No

If "YES" provide information below:

[illegible]

131. List below ALL employers or places of employment, both full-time and part-time, seasonal or other employment that you have had since leaving high school. Include any periods of self-employment. Provide employment even if the employment was for a one (1) day period or any employment you were paid cash.

Begin with your present place of employment or last place of employment and then list your previous employers. All sections must be complete. Also, fill in periods of unemployment; include reasons for unemployment and start date and end dates and include any Military Service and/or dates you attended school.

Listed below are five (5) options available to provide employment verification for the last five (5) years of employment including present employment.

Employment Verification Letters

Employment Verification Letters must be provided for the last five (5) years of employment including present employment and must include the Employer's business name, your name, position title, start date, and end date (if applicable). You are required to provide verification of employment on the company's original letterhead and the Employment Verification Letter must include an authorizing signature and business telephone number. Your employer may prefer to forward the Employment Verification directly to the Cook County Sheriff's Merit Board via U.S. Mail, fax or email. If your employer chooses to fax or email, the original Employment Verification Letters must be provided to the Cook County Sheriff's Merit Board Office.

The Work Number

Some employers utilize the Work Number; if you request the Employee Data Report for personal purposes and not employment verification you may be able to obtain the Report free of charge. If you contact the Work Number to obtain Employment Verification, there is a nominal fee that you will be charged.

Employment Self-Service (ESS)

Your employer may utilize Employment Self-Service (ESS) which provides employees with current payroll and benefits-related information, including current pay information and date of hire. ESS is only capable of providing information from January 9, 2014, to present.

Self Employment

For Self-Employment you are required to provide a valid city and state business licenses, corporation documents or sole proprietor documents and 1040 forms for the past two (2) years.

Out of Business

If your employer is no longer in business, you will be required to provide an Internal Revenue Report, W-2 form or pay check voucher.

PLEASE NOTE: Applicants are responsible for obtaining employment verification letters, the Merit Board Investigators will NOT obtain employment verification letters for any Applicants. If an Applicant provides documentation in lieu of Employment Verification Letters to substantiate employment verification ie. Work Number Report, Internal Revenue Report, W-2 form, or paycheck voucher that includes salary history the Applicant will be required to redact salary history, hourly rate, etc. prior to submitting the documentation.

Begin with your present place of employment or last place of employment and then list your previous employers. **All sections must be complete.** Also, fill in periods of unemployment; include reasons for unemployment and start date and end dates and include any Military Service and/or dates you attended school. An explanation must be provided for leaving employment in the "Reason for Leaving" box.

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
		Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired	

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
		Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired	

EMPLOYMENT HISTORY SECTION CONTINUED:

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired		

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired		

EMPLOYMENT HISTORY SECTION CONTINUED:

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired		

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired		

EMPLOYMENT HISTORY SECTION CONTINUED:

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
		Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired	

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
		Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired	

EMPLOYMENT HISTORY SECTION CONTINUED:

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
	Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired		

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
	Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired		

EMPLOYMENT HISTORY SECTION CONTINUED:

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
		Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired	

Total Time Employed	Name of Employer	Address of Employer	
From Date	Type of Business	Job Title	Telephone Number of Employer/EMAIL
To Date	Full Name of Immediate Supervisor	Description of Duties	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
		Reason for Leaving (check the applicable box and provide a specific explanation underneath) <input type="checkbox"/> Terminated <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned <input type="checkbox"/> Resigned in lieu of Termination <input type="checkbox"/> Retired	

EMPLOYMENT REFERENCE SECTION:

132. List the information requested below for three (3) employment references. List only those individuals who you have worked with that can attest to your skills and abilities as a worker excluding relatives.

Name (Last, First, Middle)	Complete Address (include Number, Street, City, State and Zip Code)	Business and Cell Telephone Number, Email Address	Occupation (identify whether they were a Supervisor or Co-Worker)	Years Known

PERSONAL REFERENCE SECTION:

133. List the names and other information requested of three (3) character references. These references should be people who can provide past and current information about you. Do not include relatives, persons in the same household or neighbors.

Name (Last, First, Middle)	Complete Address (include Number, Street, City, State and Zip Code)	Business and Cell Telephone Number, Email Address	Occupation (identify whether they were a Supervisor or Co-Worker)	Years Known

PRISON RAPE ELIMINATION ACT SECTION:

In accordance with the Prison Rape Elimination Act Standard 115.17 Hiring and Promotion Decisions, please answer the following:

134. Have you engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility, or other facilities providing residential care (as defined in 42 U.S.C. 1997)? ☐ Yes ☐ No
135. Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats or force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☐ Yes ☐ No
136. Have you been civilly or administratively adjudicated (the formal giving or pronouncing of a judgment or decree in a court proceeding) to have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution, including being subject to a Civil No Contact Order? ☐ Yes ☐ No
137. Have you been civilly or administratively adjudicated (the formal giving or pronouncing of a judgment or decree in a court proceeding) to have engaged or attempted to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, including being the subject to a Civil No Contact Order? ☐ Yes ☐ No
138. Have you been accused of any acts of Sexual Harassment during your previous employment(s)? ☐ Yes ☐ No

If you answered “Yes” to any questions above, provide an explanation, giving full details, names, dates and circumstances. Preface your response with the number of the questions.

If you have answered “YES” to any of the questions above, and you need additional space, use the blank pages at the end of the Personal History Questionnaire to explain, giving full details, names, dates, and circumstances. Preface response with the number of the question.

Knowingly omitting information or providing false information shall be grounds for disqualification and/or termination. At any time during the Merit Board Certification Process and/or Certification Period or if you begin employment with the Cook County Sheriff's Office, you have a continuing affirmative duty to disclose any information that has changed or is related to any response given or subject matter covered on your personal history questionnaire and related documents.

Please utilize the space below to answer any questions or to provide any additional information (dates, names, circumstances) to questions which you found that there was not adequate space provided. Preface each response with the question number and page number when writing the answer or providing information. At any time during the Merit Board Certification Process and/or Certification Period or if you begin employment with the Cook County Sheriff's Office, you have a continuing affirmative duty to disclose any information that has changed or is related to any response given or subject matter covered on your personal history questionnaire and related documents.

Instructions: Applicants are required to have the Personal History Questionnaire notarized below.

This Certification is to be signed in the presence of a Notary Public.

Letter of Understanding and Certification and Penalty and Pre-Employment Investigation and Discovery Waiver

I, _____, am applying for the position of Correctional Officer with the Cook County Sheriff's Office. I understand that there are certain requirements I must meet before I can be accepted into this Correctional Officer position. I understand that I must submit to an extensive background investigation by the Cook County Sheriff's Merit Board which consists of, but not limited to, the following areas of concern:

Criminal Background Investigation	Examination of Driving Record
Examination of Employment History	Interview with Background Investigator
Examination of Educational Background	Polygraph Examination
Examination of Military Service Record if applicable	
Review of my completed Personal History Questionnaire	
Any other examinations, tests or processes the Merit Board deems necessary	

The Cook County Sheriff's Merit Board will evaluate the results of the background investigation and will make a decision as to your certification eligibility for employment. If you become certified, the certification will last for a two (2) year period. This certification is **NOT** a guarantee of employment, nor a conditional offer of employment. I understand that the results of the tests are the property of the Cook County Sheriff's Merit Board, and that I will not receive copies of the reports, findings, examinations nor any information contained in them.

After you have successfully completed the Cook County Merit Boards Certification process your file will be delivered to the Cook County Sheriff's Human Resources Office.

Certification and Penalty

I, _____, do hereby certify that I personally completed this Personal History Questionnaire. I further certify that all answers made by me on the Personal History Questionnaire, any attachments, statements, documents and all required information provided to the Cook County Sheriff's Office and Cook County Sheriff's Merit Board for my employment background and background investigation, or any other phase of my pre-employment screening are true and complete to the best of my knowledge and belief. I am aware and understand that any misrepresentation(s), mis-statement(s) of material fact(s), willful omission(s) of material fact(s), or willful deception(s) will be cause for disqualification and rejection as a Applicant for employment without appeal. I further understand that, if appointed these aforementioned misrepresentation(s), mis-statement(s), omission(s), or deception(s) will be cause for immediate disqualification and/or immediate termination from the Cook County Sheriff's Office and Cook County Sheriff's Merit Board, without notice and without any right of appeal. At any time during the Merit Board Certification Process and/or Certification Period or if you begin employment with the Cook County Sheriff's Office, you have a continuing affirmative duty to disclose any information that has changed or is related to any response given or subject matter covered on your personal history questionnaire and related documents.

Pre-Employment Investigation and Discovery Waiver

As an applicant to the Cook County Sheriff's Office, I recognize that an employing law enforcement agency has a legal, as well as moral, obligation to make every reasonable effort to ensure that persons employed by the Cook County Sheriff's Office conform to the very highest standards.

Therefore, I release and hold harmless the Cook County Sheriff's Office, the Cook County Sheriff's Merit Board and their officers, agents, or assigns now and in the future, from any claim or damages in law of inequity on behalf of myself, my heirs and assigns, for their refusal to make available any and all of the information contained in this pre-employment investigation, including, but not limited to, the identity(i.es) of any person(s) and / or organizations which may have supplied information in the course of this investigation, as well as the substance of any information supplied.

I hereby waive my right, now and in the future, to examine, review, or otherwise discover the contents of this investigation and all related documents, thereto.

Please note: Applicants are required to have the Personal History Questionnaire notarized below. This Certification is to be signed in the presence of a Notary Public.

Applicant's Legal Name (First Name, Middle Name, Last Name) (printed)

Signature of Applicant

Date

Subscribed and Sworn to before me the _____ day of _____, 20____.

Notary Public_____



Telephone: 312-603-0170
Fax: 312-603-9865
Email: Sheriff.MeritBoard@ccsheriff.org

COOK COUNTY
SHERIFF'S MERIT BOARD
69 West Washington - Suite 1100
Chicago, IL 60602

AUTHORIZATION TO RELEASE INFORMATION

I, _____, an applicant for the position of Correctional Officer with the Cook County Sheriff's Office (CCSO), understand and acknowledge that the Cook County Sheriff's Office and the Cook County Sheriff's Merit Board need to thoroughly investigate my personal and employment histories to evaluate my qualifications to hold the position for which I have applied. It is in the public's interest that all relevant information concerning my personal and employment histories be disclosed to Cook County Sheriff's Office and the Cook County Sheriff's Merit Board.

NOTE TO EMPLOYERS: 745 ILCS 46/10 entitled "No liability for providing truthful information" state the following:

Any employer or authorized employee or agent acting on behalf of an employer who, upon inquiry by a prospective employer, provides truthful written or verbal information, or information that it believes in good faith is truthful, about a current or former employee's job performance is presumed to be acting in good faith and is immune from civil liability for the disclosure and the consequences of the disclosure.

The presumption of good faith established in the Section may be rebutted by preponderance of evidence that the information disclosed was knowingly false or in violation of a civil right of the employee or former employee.

I do hereby authorize any representative of the Cook County Sheriff's Office bearing this release to obtain any information in your files pertaining to my employment records and direct you to release such information upon request of the bearer. I also authorize a review of, and full disclosure of all records and any part thereof, concerning myself by and to any duly authorized agent of the CCSO, whether said records are of a public, private or confidential nature. The intent of this authorization is to give my consent for full and complete disclosure.

This authorization is not to include any medically related history or Worker's Compensation Act or Worker's Occupational Diseases Act claims; notwithstanding and HIPAA waivers that may be contained within any file associated with my employment by your agency.

I reiterate and emphasize that the specific intent of this authorization is to provide full and free access to my employment background and employment history for the specific purpose of pursuing a background investigation that may provide pertinent data for the CCSO to consider in determining my suitability for employment.

I consent to your release of any and all public and private information that you may have concerning me including, but not limited to the following:

- Employment and pre-employment information, including, but not limited to, background reports and efficiency/performance ratings, attendance records, but excluding information relating to medical conditions and medical history (unless a conditional offer of employment has been made);
- Any internal affairs investigations and discipline, whether founded or unfounded, sustained or not sustained or any finding including any files deemed to be confidential and/or sealed complaints or grievances filed by or against me;
- The records or recollections of attorneys at law or other counsel, whether representing me or any other person in any case, either criminal or civil, in which I presently have, or have had an interest, excluding any medical malpractice or worker's compensation claims;
- Personal background and reputation information;
- Military service records;

- Educational records;
- Financial and/or credit records including loans, commercial or retail credit histories (including credit reports and/or ratings); and bankruptcies;
- Any and all records maintained by any criminal justice or correctional agency including incident reports, arrest records, traffic citations and criminal history information, or any records maintained by an employer regarding any civil actions filed against me for alleged wrongdoing within the scope of my employment; and
- Any information contained in investigatory files.

I hereby release you, as the custodian of such records, your investigation, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages or whatever kind, which may at any time result to me, my heirs, my family, or associates because of compliance with this authorization to release information or any attempt to comply with it. I direct you to release such information upon request of the duly authorized representative of the Cook County Sheriff's Office and Cook County Sheriff's Merit Board regardless of any agreement I may have previously made to the contrary. For and in consideration of the Cook County Sheriff's Office and Cook County Sheriff's Merit Board acceptance and processing of my employment application, I agree to hold the organization, its agents, and employees harmless from any and all claims and liability associated with my employment application, or in any way connected with decision whether or not to employ me with the CCSO, including any liability or damage pursuant to any state or federal laws.

I understand that should information of a serious criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities. I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access of and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Cook County Sheriff's Office and Cook County Sheriff's Merit Board in conjunction with employment procedures. I also understand that by signing this release, I specifically waive any written notice to me of the disclosure of any disciplinary report, letter of reprimand, or other disciplinary action as required by the Illinois Personnel Record Review Act – 820 ILCS 40/7.

A photocopy, scanned or FAX copy of this release will be valid as an original thereof, even though said copy, scan or FAX copy does not contain an original writing of my signature. Should there be any question as to the validity of this release, you may contact me at the address listed below.

I further understand that I waive any right or opportunity to read or review any and all information provided in the background investigation report prepared by the CCSO or its attachments and that all information and documents provided to the Cook County Sheriff's Office and Cook County Sheriff's Merit Board become the property of the Cook County Sheriff's Office and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents/employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or any attempt to comply with this request. By signing below, I certify that I have had adequate time to review this entire form and have read and clearly understand its purpose. _____ (initial)

Full Name (printed)		Former Names	
Date of Birth		Last 4 digits of SS#	
Address	City	State	Zip Code
Home/Cell Telephone Numbers		Work Number	
Signature of Applicant		Date	
Witness Signature (Family Member or Friend)		Date	



Applicant's Name: _____ Date: _____

Please be advised you are required to provide the Cook County Sheriff's Merit Board with the following documents identified below on your scheduled appointment date. However, if you have completed the Personal History Questionnaire and are in possession of the required documents prior to your scheduled appointment date, please contact the Merit Board @ Sheriff.MeritBoard@ccsheriff.org for an earlier appointment date.

- _____ **Original** Completed **Personal History Questionnaire**.
- _____ **Original** **Authorization to Release Information and Waiver**, signed by a witness (family or friend).
- _____ **Original** Certified by a Notary Public, **Letter of Understanding and Certification and Penalty and Pre-Employment Investigation Discovery Waiver**.
- _____ **Employment Verification Letters**, on original letterhead and signed by the Human Resources Department for the last five (5) years of employment including your present employer. The letter must include your Employer's business name, your name, your position title, your start date and end date(if applicable), an authorized signature and a business telephone number. The employer may also forward the employment verification letter directly to the Cook County Merit Board via U.S. Mail, fax or email. If your employer utilizes The Work Number, you must contact The Work Number as an employee and obtain the Employee Data Report; there may be a nominal fee, which you are responsible for. If you contact The Work Number and indicate you are requesting an Employee Data Report for yourself the fee may be waived if only one (1) request is made per year. Note: Some employers provide Employment Self- Service (ESS). ESS provides employees with current payroll and benefits-related information, including current pay information (ESS documents are only available for employment from January 9, 2004 to present) and dates of hire. If any of your past employers are no longer in business, you are required to provide other proof of employment, such as Employment Self-Service (ESS), The Work Number, Federal/State Tax Forms and paycheck stubs or the Internal Revenue Service Wage and Income Transcript. If you were self- employed at any time, you must provide a valid city and state business license, corporation documents or sole proprietor documents AND W-2 form(s) for two (2) years.
- _____ **Credit History Report** (Note: You must provide the original full credit report and your credit score).
WWW.EXPERIANDIRECT.COM OR WWW.CREDITREPORT.COM OR WWW.ANNUALCREDITREPORT.COM
- _____ **Original** Two (2) front view (head), 2X2 inch **Photographs** of yourself; both photos must be new, in color and clear (no hat, no sunglasses) – an example would be a passport photo.
- _____ Your **Valid Driver's License** and one (1) legible photocopy. Note: Your Driver's License should reflect your legal name and should reflect your current address.
- _____ Your valid **State Identification Card** and one (1) legible photocopy, if applicable.
- _____ Your valid **Firearm Owners Identification Card (F.O.I.D.)** and one (1) legible photocopy, if applicable. WWW.ISPFSB.COM
- _____ **Original** **Social Security Card** and one (1) legible photocopy.
- _____ **Original** **Certified Birth Certificate** and one (1) legible photocopy - if from a foreign nation and not in English, you are required to provide translated document from an authorized translator. Note: If your name has changed from the name on your Birth Certificate, you are required to provide an original/Certified Marriage Certificate(s) and/or original, court documentation reflecting your legal name change.
- _____ **Original** **Certified Marriage Certificate(s)** and one (1) legible photocopy, if applicable-if from a foreign nation and not in English, you are required to provide a translated document from an authorized translator.
- _____ A legible photocopy of your **Legal Divorce Documentation**, if applicable - if from a foreign nation and not in English, you are required to provide a translated document from an authorized translator.
- _____ **Original** **Legal Name Change(s) Documentation** and one (1) legible photocopy, if applicable - if from a foreign nation and not in English, you are required to provide a translated document from an authorized translator.
- _____ **Original** **Naturalization Certificate** and one (1) legible photocopy, if applicable - if you obtained citizenship through your parents(s) naturalization, you must provide the Original Application Form listing you as a dependent and one (1) legible photocopy AND your certificate of citizenship.
- _____ **Official** **High School Transcript** (sealed), from your High School or sent electronically from the High School directly to the Merit Board email @ Sheriff.MeritBoard@ccsheriff.org - if from a foreign nation and not in English, you are required to provide a translated document from an authorized translator.
- _____ **Official** **General Education Development (G.E.D.) Transcript**.
- _____ **Official** **College/University Transcript(s)** (sealed), from any College or University you have attended or sent electronically from the College/University directly to the Merit Board email @ Sheriff.MeritBoard@ccsheriff.org - if from a foreign nation and not in English, you are required to provide a translated document from an authorized translator.
- _____ **Original** **DD214**, Page 4 and one (1) legible photocopy, if applicable. Your DD214 can be validated by the Veteran's Affairs Office on the 16t floor of 69 W. Washington.
- _____ **Selective Service Card** and one (1) legible photocopy, if applicable (male applicants 18-25 years of age). WWW.SSS.GOV
- _____ A legible photocopy of your **Motor Vehicle Insurance Card(s)**, if applicable.
- _____ A legible photocopy of your **Vehicle Registration(s)**, if applicable.
- _____ **Original** **Legal Documentation** and one (1) legible photocopy regarding unpaid judgments, bankruptcy (including Discharge or Debt), small claims garnishments or any other pending legal action against you.

Investigator's Name: _____ Date: _____