# DU PAGE COUNTY SHERIFF'S MERIT COMMISSION Deputy Sheriff – Law Enforcement (Lateral) Job Opportunity Updated 2/20/2024

**IF YOU ARE CURRENTLY IN LAW ENFORCEMENT,** the DuPage County Sheriff's Merit Commission is currently accepting applications for lateral transfers to the position of Deputy Sheriff in the **Law Enforcement Bureau** of the Office of the Sheriff of DuPage County.

#### EXAMPLES OF DUTIES TO BE PERFORMED WITH OR WITHOUT REASONABLE ACCOMMODATIONS:

An employee in this class, under general supervision, preserves and protects life, property, and the rights of all citizens to live in peace; enforces the laws in a fair and impartial manner; serves and executes all legal processes; prevents crime and maintains the safety and order as well as operates in a proactive manner to prevent criminal activity; initiates and conducts investigations of criminal activity; responds to calls for service; conducts follow-up investigations; identifies and arrests criminal offenders and persons wanted on criminal warrants or Civil Court Order; assists with the prosecution of cases; patrols an assigned area for the prevention of crime and enforcement of laws and ordinances; investigates suspicious conditions, activities or persons; arrests violators of laws and ordinances; directs traffic and enforces traffic laws; searches prisoners for weapons or articles; enforces rules and regulations of the office policy and procedures; and handles other duties as assigned.

**Opportunities for future growth include:** general case detectives, forensic investigators (detectives), digital forensic detectives, canine team, tactical street team, community resource unit, CIU/PCRT Deputy, numerous collateral assignments (i.e. bomb team, SWAT, ILEAS WMD, road evidence technicians, crisis negotiators, peer support, drug recognition experts, arson investigations) and task-force assignments with the U.S. Marshall's Team, Department of Homeland Security Narcotics/Money Laundering group, and Secretary of State Auto Theft.

## YOU MUST BE CURRENTLY WORKING AS A FULL-TIME CERTIFIED POLICE OFFICER OR DEPUTY SHERIFF IN THE STATE OF ILLINOIS AND:

- Have completed either one year of full-time continuous experience or satisfactorily completed the probationary period at your current agency (if longer than one year).
- Be in good standing with your department as of the date of application as well as the date of certification by the Commission.
- Be acceptable to the Commission following an investigation and pass a background, reputation and character examination conducted by the Sheriff's Office, or an agency or company licensed to conduct background investigations, as authorized by the Sheriff's Office.
- Pass an oral interview by the Commission.

Additionally, all applicants who are appointed from the candidate list for lateral transfer to Deputy Sheriff must successfully complete a one (1) year probationary period as a Deputy Sheriff during which time they are subject to discharge and termination by the Sheriff at will.

#### TO APPLY:

- Download the application packet at <u>www.dupagesheriff.org</u>.
- Mail your completed application along with copies of your birth certificate or naturalization certificate (U.S. citizen applicants) OR Permanent Resident card and FOID card (non-citizen applicants), high school transcript, high school diploma, or General Education Development (G.E.D.) certificate, transcripts from all post-secondary educational institutions (if applicable), DD214 (if applicable), and law enforcement certificate from the State of Illinois to:
   DuPage County Sheriff's Merit Commission, 421 N. County Farm Rd., Wheaton, IL 60187

#### Starting salary is \$82,309 plus:

- \$15,000 sign-on bonus (paid in \$5,000 increments at the completion of each of the first three years of service)
- Take-home vehicle upon completion of training
- Health, dental and life insurance
- Pension and deferred compensation
- Paid vacation, holidays, and sick leave upon completion of probationary period.

Please email the Merit Commission <u>meritcommission@dupagecounty.gov</u> with any questions. The Office of the Sheriff of DuPage County is an Equal Opportunity Employer





# Instructions

- You must be 21 years or older to submit this Application.
- The application must be typewritten or clearly printed in black ink.
- Any questions that do not pertain to you please indicate with the letters "N/A," meaning "not applicable."
- If additional space is needed for any section of the application, or if you wish to furnish additional information, attach sheets of the same size as this application, and number answers to correspond to the questions.
- Birth certificates must be official, not a photocopy. Photocopies of naturalization certificates, permanent resident cards, FOID cards, and educational transcripts are acceptable.

PERSONAL INFORM	IATION					
Name:				So	cial Security No:	
Last Name		First Name	Middle	e Name		
Address:						
Street/Apt	. No.	City	/Village	State	Zip Code	County
Home Phone: (	)			Work Phone:	( )	
Cell Phone: (	)		E-N	lail Address:		
Driver's License No.:			State	Class		
	sed any surnames names were used.	other than that sta If you have ever lo	ted above, st egally change	ate during what pe ed your name, give	e, furnish maiden name eriod and under what c e date, place, and cour	ircumstances these t:
	lf '	ʻno," you are NO <sup>-</sup>	T eligible to	submit this Appli		
I am a citizen of the L			-			
Are you legally autho	rized to under feder	al law to work in th	ne United Sta	tes? 🗌 No 🗌 Ye	es	
Do you currently pose	sess a valid FOID c	ard? 🗌 No 🗌 Ye	s FOID Car	d Number		
Chronologically list A	LL residences in the	e past 3 years.				
Dates: From (Mo/Yr):	To (Mo.Yr):	Street Address		Apt. No.	City	State

SPECIAL TRAINING/ED	SPECIAL TRAINING/EDUCATIONAL HISTORY					
Circle Highest	High School	College			raduate	
Grade Completed:	9 10 11 12	13 14 15 16		12 M.	A. PhD.	
School	Name	Years Attended From To	Graduate	Majors	Degrees/ Certs.	Credit Hours
High School			Yes / No			
College			Yes / No			
College			Yes / No			
Other			Yes / No			
Other			Yes / No			
Post Graduate			Yes / No			
Additional Training:		Length of Service:		Dates:		

Were you ever expelled, or dismissed, or suspended for more than 10 days from a school during your scholastic career?

$\square$	No [	Υ	es	lf "v	es."	please	provid	e the	follov	wina:
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School

Date of Discipline

Action Taken

Professional registrations, licenses, and/or certificates received, including certifying authority, location and date(s) received:

#### PLEASE ATTACH A PHOTOCOPY OF YOUR HIGH SCHOOL TRANSCRIPT, HIGH SCHOOL DIPLOMA, OR GENERAL EDUCATIONAL DEVELOPMENT (G.E.D.) CERTIFICATE, AS WELL AS PHOTOCOPIES OF TRANSCRIPTS FROM ALL POST-SECONDARY INSTITUTIONS.

#### EMPLOYMENT HISTORY

Please list all current and previous employers, starting with your current employer. If you are not currently employed, start with your most recent employer. Account for all periods of unemployment. (Be sure to include military experience, if applicable.) For the purpose of the background investigation, do we have your permission to contact your current employer?

🗌 Yes 🗌 No

	position listed below, attach copies of all written employe	
а.	Employed from (Month/Day/Year)	Employed to (Month/Day/Year)
	Employer Name:	
	Address:	Telephone: ()
	Your Job Title:	
	Immediate Supervisor's Name & Title:	
	Immediate Supervisor's Telephone & Email:	

Employer Name:		. Employed from (Month/Day/Year)		Employed to (Month/Day/Year)
Address:		Employer Name:		
Immediate Supervisor's Name & Title:				
Immediate Supervisor's Name & Title:		Your Job Title:		
c.       Employed from (Month/Day/Year)       Employed to (Month/Day/Year)         Employer Name:				
Employer Name:		Immediate Supervisor's Telephone	& Email:	
Address:	C.	Employed from (Month/Day/Year)		Employed to (Month/Day/Year)
Your Job Title:		Employer Name:		l
Immediate Supervisor's Name & Title:		Address:		Telephone: ()
Immediate Supervisor's Telephone & Email:		Your Job Title:		
ve you ever been dismissed or asked to resign from any employment or position you have held?		Immediate Supervisor's Name & Ti	tle:	
ve you ever been dismissed or asked to resign from any employment or position you have held?		Immediate Supervisor's Telephone	& Email:	
ployer: Reason: you have any sources of income, business or other interest, which may conflict with your employment as a Page County Deputy Sheriff?  Yes  No	nployer:	:	Reason: _	
you have any sources of income, business or other interest, which may conflict with your employment as a Page County Deputy Sheriff?				
Page County Deputy Sheriff? Yes No	nployer:	:	Reason: _	
ecify conflict:	nployer: nployer:	: 	Reason: Reason: _	
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<ul> <li>a. Have you ever served on active duty in the Armed Forces of the United States? Yes No</li> <li>b. Branch of military service:</li></ul>	nployer: nployer: you ha Page C ecify cc LITARY a. b. c. d. e. f.		Reason: Reason: or other interest, which ma No No y in the Armed Forces of ear): From No © Ready © S nse by a court martial or in No ormer © None If you	ay conflict with your employment as a

# REFERENCE AND SOCIAL ACQUAINTANCES

	Name:	
•		(Last, First, Middle)
	Home/Cell Phone: ()	Business Phone: ()
	Years Acquainted:	Occupation:
-	Name:	(Last, First, Middle)
	Address:	· · · · · · · · · · · · · · · · · · ·
	Home/Cell Phone: ()	Business Phone: ()
	Years Acquainted:	Occupation:
-	Name:	(Last, First, Middle)
	Address:	
	Home/Cell Phone: ()	Business Phone: ()
	Years Acquainted	Occupation:

# COURT RECORD

a.	Have you ever been convicted of any felony or misdemeanor, including driving while under the influence	ence of alcohol or drugs,
	driving while license suspended or revoked, leaving the scene of an accident, or reckless driving?	🗌 Yes 🗌 No

# (Note: Except for a domestic violence conviction, a criminal conviction will not in itself disqualify your application from further consideration.)

If "yes," list all such matters.

Date	Place and Department	Charge	Disposition	Details		
b. Has your	b. Has your driver's license ever been revoked or suspended?					

## ORGANIZATION MEMBERSHIP

List your professional or trade organization memberships:

Name of Organization	City and State of Organization	Dates	List Position and Activity

#### SPECIAL QUALIFICATIONS AND SKILLS

a. Do you have foreign language ability? 🗌 Yes 🗌 No If yes, indicate your proficiency ("slight," "good," or "fluent") in the following aspects of each foreign language.

Name of Language	Speak	Understand	Read	Write

b. List any special skills you possess:

c. List any special equipment you are able to use:

ALL APPLICANTS – Clip two full-face photographs of yourself, not larger than  $2\frac{1}{4}$ " X  $2\frac{1}{2}$ " here. Print your name, plainly on the back of the photographs. The photographs must have been taken not more than three (3) months prior to the date of this application.

APF	APPROVAL FOR BACKGROUND INVESTIGATION/POLYGRAPH EXAMINATION					
a.	Have yo	u previously	/ submitted an	pplication for employment with the DuPage County Sheriff's Office?		
	🗌 Yes	🗌 No	Date:	Result:		
b. date	of applica	ation:		mployment with any other police agency?	ıd	

Result or status of application: \_\_\_\_

I understand that I may be requested, and hereby agree, to submit to a polygraph examination during the processing of my application, and if hired, subsequent to employment, to assist in determining my suitability for employment or to resolve issues directly related to my employment.

I understand that all appointments are probationary for a period of one (1) year, during which I must demonstrate my fitness for continued employment with the DuPage County Sheriff's Office. I also understand that, in many areas of the Sheriff's Office, it is necessary to establish regular night and midnight shifts, in view of which I must be completely available for any shift or assignments, as the need might arise. I further understand that any appointment will be contingent upon the results of a complete investigation.

I have personally read and answered each and every applicable question herein and do solemnly swear or affirm that each and every answer is full, true, and correct. I understand that the discovery of any falsity or discrepancy in this Application may result in its not being accepted or, if hired as a Deputy Sheriff, subject me to dismissal proceedings.

I do hereby agree to submit to a polygraph (lie detector) examination background investigation during the processing of my application and authorize a full background investigation and consent to the release of necessary information. I will not seek to hold any person liable who furnishes information in connection with this Application, regardless of whether I am hired.

Print Name:

Date:

Applicant's Signature:

The DuPage County Sheriff's Department is an Equal Opportunity Employer.

Any employee or applicant who feels they are the subject of discrimination may make a complaint to ICJIA at

https://icjia.illinois.gov/about/publications/civil-rights-discrimination-complaint-form/ or the Office for Civil Rights (OCR) at https://civilrights.justice.gov/report/?utm\_campaign=d43e2eb1-f108-4164-adcd-3cd945a58093 or the EEOC at https://www.eeoc.gov/federal-sector/filing-

formal-complaint

PERSONAL INQUIRY-AUTHORITY FOR RELEASE OF INFORMATION				
Applicant's Name:	FOR OFFICE USE ONLY To:			
Date of Birth:				
Social Security No				
Driver's License No State:				

I am applying for a position with the DuPage County (Illinois) Sheriff. The DuPage County Sheriff's Merit Commission is charged under Illinois law with evaluating my application and determining my fitness for candidacy for such position.

In connection with my application, I am requesting and authorizing you to furnish the DuPage County Sheriff's Merit Commission with any and all information - laudatory, negative, or otherwise - that you may have concerning my employment record and reputation.

Specifically, I authorize you to furnish all information pertaining to awards, commendations, recommendations, evaluations, reports, disciplinary actions, written reprimands, documented verbal warnings and internal investigations, regardless of whether such is confidential or privileged, which is contained in my personnel file. Please include photocopies of such whenever possible.

The above information is to be used to assist in determining my qualifications and fitness for the position I am seeking with the Sheriff's Office.

I hereby release and waiver all claims and causes of action against you, your organization, it's agents and employees, as well as the County of DuPage, DuPage County Sheriff's Office and DuPage County Sheriff's Merit Commission, from any liability or damage which might result from furnishing or review of the requested information.

Print Name:	Date:	
Applicant's Signature:		