



## MASON COUNTY CIVIL SERVICE COMMISSION

### Self-Report Checklist

The purpose of this checklist is to enable you to evaluate whether you meet the requirements for employment with the Mason County Sheriff's Office.

It is necessary for you to complete and sign this checklist and return it with your application. This is a supplement to your application. IT IS NOT a graded part of the examination process.

***FAILURE TO COMPLETE AND RETURN THIS FORM WILL BE CAUSE FOR DISQUALIFYING YOU AS AN APPLICANT FOR EMPLOYMENT WITH THE MASON COUNTY SHERIFF'S OFFICE.***

Please answer TRUE or FALSE to the following questions:

1. True \_\_\_ False \_\_\_ I do not have a record reflecting any adult felony convictions or a pattern of adult misdemeanor convictions.
2. True \_\_\_ False \_\_\_ My driving record does not reflect serious or repeated traffic violations.
3. True \_\_\_ False \_\_\_ I do not use illegal drugs and, if asked to, I can pass a drug test.
4. True \_\_\_ False \_\_\_ I have never been dismissed or forced to resign from any job because of dishonesty or abuse of privilege.
5. True \_\_\_ False \_\_\_ I can work shift work, rotating shifts, weekends, holidays, and/or overtime on demand basis as required.
6. True \_\_\_ False \_\_\_ I have nothing in my past that I feel may keep me from being hired if revealed.

***IF YOU CANNOT ANSWER TRUE TO THE ABOVE SIX QUESTIONS, YOU DO NOT MEET THE STANDARDS REQUIRED TO BE A CANDIDATE FOR EMPLOYMENT IN THE MASON COUNTY SHERIFF'S OFFICE.***

\_\_\_\_\_  
Applicant's Signature  
(Your typed name represents your signature)

\_\_\_\_\_  
Date