



DATE: _____

HARLAN COUNTY DEPUTY JAILER

EMPLOYMENT APPLICATION

Basic Information

Name: _____

Address: _____

Phone: (_____) _____ - _____

Are you 21 years or older? YES NO

Are you a U.S. citizen or an Alien authorized to work in the U.S.?
YES NO

Desired Employment

Position Applied For:	Date Available:	Desired Salary:
	/ /	\$. /hr

Are You Employed Now?	May We Contact Your Employer?
YES NO	YES NO

Have you ever applied at HCDC Before?	When?
YES NO	/ /

References: At Least (3) Three

Name	Address	Phone

Education

	Name and Location Of School	# Years Attended	Graduate	Degree
High School			YES NO	
College			YES NO	
GED			YES NO	

Special Skills: _____

Have You Been Convicted Of A Felony Offense Within The Last (5) Five Years? YES NO

Describe: _____

Are you in a personal relationship with an inmate who is currently being housed in this facility? YES NO

Who / Describe: _____

Former Employees

Month & Year	Name & Address	Position	Salary	Reason For Leaving

May We Contact Your Previous Employers? YES NO

U.S Military Career _____ Rank: _____

HARLAN COUNTY FISCAL COURT

PRE-EMPLOYMENT MEDICAL EXAMINATION

Department: _____

Print Name: _____
Last First Middle

Social Security #: _____ - _____ - _____ Age: _____ Sex: _____

Present Address: _____
Street City State Zip

Position Applied For: _____

DO YOU SUFFER FROM ANY OF THESE CONDITIONS?

PLEASE FILL OUT ACURATLEY	YES	NO
Asthma		
Kidney		
Tuberculosis		
Syphilis		
Gonorrhea		
Diabetes		
Nervous Stomach		
Rheumatic Fever		
Muscular Disease		
Psychiatric Issues		
Cardiovascular Disease		
Gastrointestinal Ulcers		
Head, Neck, or Spinal Injuries		
Seizures or Convulsions		
Hepatitis		
Extensive Confinement Illness or Injury		
Permanent Defect form Injury, Illness, or Disease		
Disorder from any other Disease		

If answered YES, explain on back of this page.

CONTRACT FOR HIRE



**The Harlan County Detention Center is an Equal Opportunity Employer,
As we do not discriminate on the basis of:
Race, Religion, Color, Sex, National Origin, or Disability.**

I understand and agree that the facts contained in this application are true and completed to the best of my knowledge. I further understand and agree that, if employed, falsified statements on this application shall be grounds for dismissal, at the discretion of the Jailer or his designated staff.

I understand and agree that, if hired, regardless of the date of the payment of my wages or salary, my employment may be terminated at any time without prior notice and without cause at the discretion of the Jailer or his designated staff. A six (6) month probationary period will be observed upon all new hires to evaluate potential for advancement or demotion, but I understand that my employment is for no definite period of time.

I understand and agree to follow the "Code of Ethics" addressed in the Harlan County Detention Center's policy and Procedure Manual, Section III-300 Pages 1-3, stating "all employees shall conduct their personal and professional lives in a manner that preserves the security and rights of the inmates and staff of the facility,"

I understand and agree that the Harlan Detention Center prides itself in being a NO TOLERANCE facility concerning it's "Illegal Drug Policy", and if hired, I am never to perform my duties while under the influence of any and all intoxicants or consume intoxicants while on duty, except when undergoing prescribed medical treatment. In cases of Prescribed medical treatment, I will notify the Jailer or his designated staff of the situation and detailed information of the treatment.

I understand that any employee found in possession of or under the influence of alcohol, narcotics, or any such controlled substance (on or off duty), will be terminated at the discretion of the Jailer or his designated staff. I also understand and agree that all employees are subject to random drug testing, searches of person, personal property, and personal vehicles while anywhere on the premises of the facility at any time deemed necessary at the discretion of the Jailer or his designated staff.

X

Deputy Jailer

A handwritten signature in black ink, appearing to be 'M. J.', written over a horizontal line.

I, _____

(FULL NAME / PLEASE PRINT)

_____/_____/____

DATE

As an employee of the Harlan County Detention Center, do agree comply with Standard 501 KAR 3:040 Sections (7,8) in accordance with the Harlan County policy manual III-300.

I agree to be subject to Facility Drug testing pre-hire and at any time during my employment. I agree to be subject to Polygraph Testing. I understand that my refusal to do so may result in my immediate termination of employment, at the discretion of the Jailer or his designated staff.

I agree to supply the Jailer or his designated staff with multiple, valid, current phone numbers and email addresses as a means to be contacted by the facility. When facility contact is initiated, I agree to contact the jail at the earliest time available and report to work when the need arises, at the discretion of the Jailer or his designated staff. I also agree that personal information such as phone numbers or physical addresses regarding an employee of the Detention Center is not for public or personal use, and only designated staff may use the information for facility purposes only. Failure to comply with this directive may result in termination of employment, at the discretion of the Jailer or his designated staff.

I agree that part of my employment at this facility not only includes my scheduled days of work but require me to be made available and accessible if called upon during my scheduled days off, due to the average work schedule of an employee entailing only six (6) months out of the calendar year, and the overall importance the operation of the facility includes. Failure to do so may include termination of employment at the discretion of the Jailer or his designated staff.

I agree to arrive to work and clock in no earlier than ten (10) minutes before shift starting time, and no later than two (2) minutes after my designated starting time. If an event transpires that may result in my tardiness, I agree call the Facility informing designated staff of the event and an estimated time of arrival. Failure to do so or excessive tardiness may result in disciplinary actions at the discretion of the jailer or his designated staff.

I agree to report to work in the full uniform set forth by the Jailer or his designated staff.

I agree to report to work with a professional appearance, groomed and hygienic.

I agree to report to work with a professional attitude and approach my daily duties with a deliberate understanding of the importance the job Deputy Jailer entails.

I agree that my disregard or refusal to sign this document signifies a conscience act of noncompliance to the policies under the current Jailer and His Administration. Failure to sign the "Contract For Hire" documents will result in an end to any consideration as a new hire at the Harlan County Detention Center. Once employed, staff may be subject to signing a revised version of the "Contract for Hire" documents for each fiscal year. Failure to do so will result in termination of employment.

X

Deputy Jailer



X

BJ Burkhart, Jailer

IMPORTANT: READ THE FOLLOWING

Section 501 KAR 3:040 - Personnel

Section 6. Code of Ethics.

- (1) The jailer or jail administrator shall make a written code of ethics available to each employee.
- (2) The written code of ethics shall be incorporated in the jail's policy and procedures manual and shall include the following:
 - (a) An employee shall not:
 - 1. Exchange a personal gift or favor with a prisoner, prisoner's family, or prisoner's friend;
 - 2. Accept any form of bribe or unlawful inducement.
 - 3. Perform duties under the influence of an intoxicant or consume an intoxicant while on duty.
 - 4. Violate or disobey an established rule, administrative regulation, or lawful order from a superior.
 - 5. Discriminate against a prisoner on the basis of race, religion, creed, gender, national origin, or other individual characteristic.
 - 6. Employ corporal punishment or unnecessary physical force.
 - 7. Subject a prisoner to physical or mental abuse.
 - 8. Intentionally demean or humiliate a prisoner.
 - 9. Bring a weapon or an item declared as contraband into the jail without proper authorization.
 - 10. Engage in critical discussion of jail employees or a prisoner in the presence of another prisoner.
 - 11. Divulge confidential information without proper authorization.
 - 12. Withhold information which threatens the security of the jail, jail employees, visitors, or the community.
 - 13. Through negligence or intentionally, endanger the well-being of self or another.
 - 14. Engage in a business or profitable enterprise with a prisoner.
 - 15. Inquire about, disclose, or discuss details of a prisoner's crime other than as may be absolutely necessary in performing official duties.
 - 16. Enter into an intimate, personal relationship with a prisoner while the prisoner is incarcerated at the same jail that the employee is employed by; or
 - 17. Enter into an intimate, personal relationship with a former prisoner of the jail within six (6) months of that prisoner's release; and
 - (b) An employee shall:
 - 1. Comply with established rules, administrative regulations, and lawful orders from a superior.
 - 2. Treat each prisoner in a fair, impartial manner; and
 - 3. Report a violation of the code of ethics to the jailer.
- (3) A violation of the code of ethics shall be made a part of the employee's personnel file.

501 KAR 3:040

9 Ky.R. 637; eff. 3-2-1983; Am. 13 Ky.R. 677; eff. 11-11-1986; 19 Ky.R. 1846; 2619; eff. 6-7-1993; 26 Ky.R. 159; 27 Ky.R. 81; eff. 7-17-2000; 31 Ky.R. 1547; 1790; eff. 5-26-2005; 34 Ky.R. 1173; 1958; eff. 3-7-2008; 37 Ky.R. 2492; 38 Ky.R. 571; 479; eff. 11-4-2011; 42 Ky.R. 1937; eff. 3-4-2016.

STATUTORY AUTHORITY: KRS 196.035, 197.020, 441.055

I, _____ / ____ / ____
 (FULL NAME / PLEASE PRINT) DATE

Confirm that I have read, understood, and agree to adhere to the above **Code of Ethics** set forth in KRS.
 I also confirm that I have received a copy of and will read and adhere to the
 Harlan County Detention Center's Policy and Procedure Manual

X

Deputy Jailer

X

Witness / Supervisor