

**ONEIDA COUNTY
LABOR RELATIONS
EMPLOYEE SERVICES
DEPARTMENT**

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MEMORANDUM

TO: Correction Officer Applicants

FROM: Lisa Charbarneau, Employee Services Manager *W*

DATE: June 2011

RE: Eligibility List Instructions/Information

In this application packet you will find an employment application, authorization for release of information, test site form, affirmative action questionnaire, veteran preference point form; job description and a copy of the advertisement for this position.

******All applicants should complete the questions at the bottom of page 3 of the employment application.******

Please complete all forms included in this packet and **return it no later than 4:30 p.m. on Thursday, July 21, 2011** with a check for \$15.50 made payable to the Oneida County Treasurer for the written exam. The written exam is scheduled for Saturday, August 13, 2011. You may keep this memo, the job description and copy of the advertisement for your records.

The LRES Office will review all applications and determine whether each applicant has met the minimum qualifications of the position of Correction Officer. Applicants deemed qualified will receive notification and confirmation of the written exam; all other applicants will receive their testing fee back.

If you should need any assistance with this material, please contact me at 715-369-6299.

CORRECTION OFFICER

Oneida County is accepting applications for the establishment of an eligibility list for Correction Officer. These are full time positions with a 2011 starting wage of \$14.70 and an excellent fringe benefit package.

Qualified applicants must have a high school degree; knowledge of computers; keep accurate records and make detailed reports; good verbal and written communication skills; basic math skills; and make good independent decisions based on practices, rules and procedures. **Knowledge of rules, regulations and State Statutes regarding housing of prisoners as well as State Certification as a Correction Officer is preferred however can be obtained during the first few months of employment.**

Qualified applicants must take a \$15.50 written exam at their own expense. **THE WRITTEN EXAM IS SCHEDULED FOR SATURDAY, AUGUST 13, 2011.**

Applications may be obtained by contacting the Oneida County LRES Department, P.O. Box 400, Rhinelander, WI 54501 or by calling (715) 369-6154 or online at www.oneidasheriff.org or www.co.oneida.wi.gov Applications must be completed and returned to the LRES Office with a check for \$15.50 made payable to the Oneida County Treasurer at the address above no later than 4:30 p.m. on Thursday, July 21, 2011

Oneida County is an Equal Opportunity Employer.

Employing Agency _____

APPLICATION FOR EMPLOYMENT AS LAW ENFORCEMENT OR JAIL OFFICER

NOTICE: Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable). Applications which are incomplete or illegible will not be considered. If space provided is insufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions.

1. PERSONAL INFORMATION

| | | | |
|---------------------------------------|-------|----------|---------------------------------|
| Name in Full (Last, First, Middle) | | | Social Security Number |
| Address (Apartment, Street, P.O. Box) | | | Home Telephone Number () |
| City | State | Zip Code | Work Telephone Number () |

Are you over the age of 18? ? Yes ? No

Are you a United States citizen? ? Yes ? No

Do you have a valid Wisconsin driver's license? ? Yes ? No

Do you have a valid driver's license from another state? ? Yes ? No

Have you ever been convicted of a felony? ? Yes ? No

Have you completed at least 60 college credits? ? Yes ? No

If yes, please attach a separate sheet giving full information?

IMPORTANT: Administrative Rule LES 2.01(1)(e) requires that an applicant possess either a two-year Associate Degree or 60 college level credits, or meet the standard within the first five years of employment. The Law Enforcement Standards Board may waive up to 30 credits upon documentation of writing, problem solving, and other communication skills. [Waiver forms available via the Department of Justice, Training and Standards Bureau, P.O. Box 7070, Madison, WI 53707-7070, 608/266-8800.]

2. EDUCATION

| Name of School | Location | Dates | | Course Pursued | Degree, Diploma, or Credits Earned |
|-----------------|----------|-------|----|----------------|------------------------------------|
| | | From | To | | |
| High Schools | | | | | |
| College | | | | | |
| Graduate School | | | | | |

List any scholarships, apprenticeships, licenses, certifications, membership in professional organizations or other information you believe should be considered in evaluating your qualifications.

3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, provide dates. To furnish additional employment information, attach sheets of the same size and format as this application.

| Name and Address of Employer | Dates | Position and Kind of Work |
|--|--|---------------------------|
| Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No | From To Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Annual Salary/Wages: | Reason for Leaving |
| Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No | From To Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Annual Salary/Wages: | Reason for Leaving |
| Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No | From To Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Annual Salary/Wages: | Reason for Leaving |
| Name _____ Street _____ City, State _____ Supervisor's Name/Telephone: _____ May we contact the employer/supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No | From To Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Annual Salary/Wages: | Reason for Leaving |

4. MILITARY SERVICE

| Branch of Service | Month/Year Served | | Active Duty or Reserve | Highest Grade | Skill Specialty or Primary Duty |
|-------------------|-------------------|----|------------------------|---------------|---------------------------------|
| | From | To | | | |
| | | | | | |
| | | | | | |
| | | | | | |

List special schools attended/skills acquired during military service.

5. REFERENCES

Give three references (not relatives, or present employer; avoid listing members of the clergy).

| | |
|--------------------------------------|-----------------------------------|
| Name _____ | Number of Years Acquainted |
| Address _____ | Position/Title/Profession |
| City/State/Zip _____ | |
| Telephone Number () _____ | |
| Name _____ | Number of Years Acquainted |
| Address _____ | Position/Title/Profession |
| City/State/Zip _____ | |
| Telephone Number () _____ | |
| Name _____ | Number of Years Acquainted |
| Address _____ | Position/Title/Profession |
| City/State/Zip _____ | |
| Telephone Number () _____ | |

6. GENERAL

COMPLETE IF INSTRUCTED TO DO SO BY EMPLOYING AGENCY.

For questions A-C, attach no more than one additional page for each answer.

- A. Why have you chosen to apply for this position?
- B. Discuss things you have done which have contributed to your life experience. Remember to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.
- C. Why do you believe you could relate to and/or work with people of different races, sexes, cultures, ages, socio-economic groups, and educational levels?

APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW

Information provided and statements made as part of this application may be grounds for not employing you or for dismissing you after you begin work. All information provided and statements made are subject to verification.

CERTIFICATION

ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

Applicant's signature:

Date signed:

Under the provisions of section 19.36, Wisconsin Statutes, I request that my identity as an applicant for the position of
not be revealed without my consent or until required under law.

Applicant's signature:

Date signed:

ONEIDA COUNTY

AUTHORIZATION FOR RELEASE OF INFORMATION

(For Official use only, not to be released to unauthorized persons)

I hereby empower an employee of the Oneida County LRES or Sheriff's Departments or other authorized representative bearing this release to, within one year of its date, obtain information and records pertaining to me from any or all of the following sources:

1. Municipal, State or Federal law enforcement agencies.
2. Selective Service system.
3. Any banking institution.
4. Any place of business(for purposes of obtaining credit or employment data).
5. Credit rating bureaus or institutions maintaining individual credit rating files.
6. Any previous employer.
7. Present employer.
8. Any school, college, university or other educational institution.

I hereby release any Municipal, State or Federal law enforcement agency, individual or institution, including its officers, employees, or related personnel, any individual providing personal information, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it.

Exceptions to this blanket authorization:

1. _____
2. _____
3. _____

Date

Signature(full name)

Address (Street and number)

City

State

Zip

Witness Signature _____

***A Photocopy of this affidavit will have the same force and effect as an original.**

VETERAN PREFERENCE INFORMATION SHEET

The following information is to be used only by Veterans who are requesting that preference points be assigned under Wisconsin State Statute 230.16(7). A preference shall be given to those veterans and to those spouses of veterans who do not currently hold a permanent appointment or have mandatory restoration rights to a permanent appointment to any position. *Veteran*, for this purpose, means a person who fulfills at least one of the following requirements:

1. Served on active duty in the U.S. armed forces for at least 180 days, not including training.
2. Was discharged from the U.S. armed forces because of a disability incurred during active duty, or because of a disability that is later adjudicated by the U.S. department of veterans affairs to have been incurred during active duty.
3. Was honorably discharged from the U.S. armed forces.
4. Is eligible to receive federal veteran's benefits.

A *preference* means the following:

1. For a veteran, that 10 points shall be added to his/her grade.
2. For a disabled wartime veteran, that 15 points shall be added to his / her grade.
3. For a disabled wartime veteran whose disability is at least 30%, that 20 points shall be added to his/her grade.
4. For the spouse of a disabled wartime veteran whose disability is at least 70%, that 10 points shall be added to the spouse's grade.
5. For the remarried spouse of a veteran who was killed in action, that 10 points shall be added to the spouse's grade.
6. For the unremarried spouse of a veteran who died of a service-connected disability, that 10 points shall be added to the spouse's grade.

To receive preference as defined above, you *must be certified by the Oneida County Veteran Service Office.* You must submit this request for Veteran Preference points to THE VETERAN SERVICE OFFICER AT BOX 400, RHINELANDER WISCONSIN, 54501.

PLEASE DO NOT RETURN THE "VETERAN PREFERENCE REQUEST FORM" WITH YOUR APPLICATION PACKET. SEND THIS FORM DIRECTLY TO THE VETERAN SERVICE OFFICER AT THE ADDRESS ABOVE.

VETERAN PREFERENCE REQUEST FORM

I hereby request Veteran Preference points under Wisconsin State Statute 230.16(7) as follows: (circle applicable categories)

1. Served on active duty in the U.S. armed forces for at least 180 days, not including training.
2. Was discharged from the U.S. armed forces because of a disability incurred during active duty or because of a disability that is later adjudicated by the U.S. department of veteran's affairs to have been incurred during active duty.
3. Was honorably discharged from the U.S. armed forces.
4. Is eligible to receive federal veteran's benefits.

DATE OF ENTRY INTO SERVICE: _____

DATE OF SEPARATION: _____

BRANCH OF SERVICE: _____

TYPE OF DISCHARGE: _____

*(Attach a copy of your form DD214)

I hereby certify that I do not currently hold a permanent appointment or have mandatory restoration rights to a permanent appointment to any position. I also certify that the answers and information provided by me are true and correct without omissions of any kind. I authorize all governmental agencies to give to Oneida County any information requested regarding my service record. Furthermore, I hereby forever release, discharge and covenant not to sue any person or organization for any result of providing, obtaining or acting upon such information.

Signature _____

Date: _____

The Wisconsin Personnel Partners will administer the examination. The cost to you for the exam is \$15.50. A personal check, cashier's check or money order, made payable to "ONEIDA COUNTY TREASURER", must accompany this completed application.

Applicants who wish to use a transfer exam score from the Wisconsin Personnel Partners; formerly the Wisconsin City and County Testing Service may do so if the written exam was completed within the prior six months. The prior test date and potential employer must be listed below. The cost to you for each transfer exam score is \$8.00. A personal check, cashier's check or money order, made payable to the Oneida County Treasurer must accompany this request.

Applicants who wish to take the exam at a location outside the State of Wisconsin, must call 1-608-266-1088 to arrange for the alternate test site. The cost for this option is an additional \$25.00 (plus \$15.50 test fee).

All payments must be received at the Oneida County Labor Relations Employee Services Department, with completed application and required forms, no later than **4:30 p.m. on Thursday, July 21, 2011**. Any required payments received after this date will not be registered for the exam.

PLEASE SELECT THE LOCATION AT WHICH YOU WOULD LIKE TO TAKE THE EXAMINATION FOR THIS POSITION ON SATURDAY, AUGUST 13, 2011

| | | | | | |
|----|-------------|-------|----|------------------|-------|
| AD | Ashland | _____ | MW | Milwaukee | _____ |
| EC | Eau Claire | _____ | PL | Platteville | _____ |
| GB | Green Bay | _____ | RH | Rhineland | _____ |
| FD | Fond du Lac | _____ | RL | Rice Lake | _____ |
| KE | Kenosha | _____ | SU | Superior | _____ |
| LC | LaCrosse | _____ | WS | Wausau | _____ |
| MD | Madison | _____ | WR | Wisconsin Rapids | _____ |

SOCIAL SECURITY NUMBER IS REQUIRED: _____

FOR TRANSFER OF PRIOR EXAM SCORE:

DATE OF EXAM: _____

EMPLOYER EXAM TAKEN FOR: _____

ONEIDA COUNTY AFFIRMATIVE ACTION INFORMATION

The State of Wisconsin permits us to ask applicants to voluntarily disclose certain information, provided it is used for statistical purposes only. Therefore, in order for us to measure the progress of our Affirmative Action Program as established by our County Board of Supervisors, we ask that you disclose the following information. Upon receipt to the Labor Relations Office, this sheet will be detached from your application form, and kept confidential.

1. Title of position(s) you are applying for: _____

2. Sex:
 - Female
 - Male

3. Date of Birth: _____

4. Ethnic Origin (please check one)
 - White
 - American Indian/Alaska Native
 - Black
 - Asian/Pacific Islander
 - Hispanic

5. I learned of this position through (Check all that apply)
 - Recruiting Bulletin (where?) _____
 - Sheriff Dept Website
 - County Website
 - Visit to Labor Relations Office
 - Job Service or other employment agency
 - Newspaper – please specify _____
 - Other source – please specify _____

Oneida County Job Description

Job Title: Corrections Officer
Department: Sheriff
Reports To: Lead Corrections Officer
FLSA Status: Nonexempt
Prepared By: Sheriff Jeffrey J. Hoffman
Prepared Date: May 2009
Approved By: Lisa Charbarneau
Approved Date: May 2009
Reviewed Date: _____

SUMMARY Under the direct supervision of the Lead Correction Officer, the Correction Officer shall be responsible for carrying out the everyday operations and security of the jail. Duties are performed in accordance with State Statutes, department rules, policy and procedures, and standard operating policy. Work may be performed on rotating shifts.

ESSENTIAL DUTIES AND RESPONSIBILITIES include the following. Other duties may be assigned.

Ascertain that commitments and arrests of individuals to be detained in jail are in proper order.

Properly books all prisoners upon their arrival at the jail, including performing a personal search, logging into the computer all personal belongings and securing the same, logging in inmate identifying information, fingerprinting and photographing the inmate, issuing clothing, bedding and other supplies. Performs medical screening, suicide screening and follows policy for approval and distribution of medications. Perform alcohol breath tests as needed and confining the inmate as may be required.

Escorts inmates between cells to programming and visiting, keeping inmates segregated according to classification. May assist Deputy Sheriffs in transporting inmates.

Makes and logs periodic cell checks and checks cell blocks for cleanliness and contraband.

Administers discipline and enforcement of all rules and regulations among the prisoners.

Responsible for the cleanliness and sanitation of the jail; assigns, supervises and inspects the work of inmates engaged in on-site clean-up.

Maintains various jail records and logs including visitation log, medical log, keeping track of inmate mail, keeping log of shift events and preparing written reports; performs upkeep of jail records and filings.

Performs all duties to ensure the safety and security of the inmates.

Delivers medications to inmates and contacts proper medical staff regarding inmates medical concerns according to policy and procedure.

Supervises the comings and going of Huber inmates; performs strip searches, recording and storing goods and valuables received and issuing brown-bag lunches. Verifies work release schedules.

Maintains communication between shifts and keeps supervisor informed of any problems, complaints or infractions of rules and/or regulations.

Oversees the distribution of meals by inmate workers; maintains meal counts and forwards to Jail Administrator.

Uses verbal skills, assigned weapons, handcuffs and other restraints, and physical force to maintain discipline and order among prisoners.

Ability to use all issued equipment such as handcuffs, batons, O.C. Spray, Electronic Control Device (ECD) and the SBCA (self contained breathing apparatus).

Any other duty as assigned.

QUALIFICATIONS To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Knowledgeable of computer hardware, software and accessories.

Knowledgeable of rules, regulations and State Statutes regarding housing of prisoners.

Ability to detect and recognize potential hazards and dangers to the facility and safety of the inmates.

Must be able to keep accurate records and make detailed reports.

Ability to follow oral and written instructions or directions.

Ability to attend various training schools and pass/maintain required certifications.

Ability to maintain effective working relationships.

EDUCATION and/or EXPERIENCE

High school degree.

LANGUAGE SKILLS Must possess good verbal and written communication skills.

MATHEMATICAL SKILLS Good basic mathematical skills.

REASONING ABILITY Ability to evaluate situations, based on training/experience and policy/procedures and make good decisions.

CERTIFICATES, LICENSES, REGISTRATIONS

*State Certification as a Corrections Officer.

*CIB/TIME system

*Breath Examiner Specialist

Valid Wisconsin Drivers License

*Certifications must be obtained during probation period.

PHYSICAL DEMANDS

Ability to operate computer keyboard/typewriter, restraint devices, assigned weapons, two-way radios, camera, calculator.

Ability to coordinate eye, hands, feet, and limbs in performing skilled movements such as baton and riot gear.

Ability to exert mildly heavy physical effort including lifting, carrying, pushing and pulling.

Ability to stoop, kneel, crouch and crawl.

Ability to exert extreme physical force to restrain and subdue persons.