



Sheriff H.W. "Billy" Hancock

Chief Deputy Denise Youngblood

## Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in the online application employment form as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed a year. Any applicant wishing to be considered for employment beyond this time period will need to complete a new application with any updated information.

I hereby understand and acknowledge that, unless otherwise defines by applicable law, any employment with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide my all rules and regulations of the employer.

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Signature

Date