



# KENTON COUNTY DETENTION CENTER

Rev 11-2015

Mail Application form to: Bob Dietz  
3000 Decker Crane Lane  
Covington KY 41017  
Phone:(859)363-2421| Fax:(859)363-0425  
E-mail: [bob.dietz@kentoncounty.org](mailto:bob.dietz@kentoncounty.org)

## Employment Application

Please Print in block letters

Date: \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Maiden

Address \_\_\_\_\_  
House # & Street City State Zip Code

Previous Address \_\_\_\_\_  
House # & Street City State Zip Code

Are you at least 21 years of age? \_\_\_\_\_ Social Security # \_\_\_\_\_ Marital Status \_\_\_\_\_

Male  Female Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Are you a U.S. Citizen? \_\_\_\_\_

E-mail Address \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_  
Name Address City State Zip Phone

Position(s) Applying for \_\_\_\_\_ Part-time  Full-time

Referral  Yes  No By Whom (Name) \_\_\_\_\_ Phone \_\_\_\_\_

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### Military Experience

Branch of Service \_\_\_\_\_ Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

Type of Discharge \_\_\_\_\_ Final Rank \_\_\_\_\_

Nature of duties and/or special training received \_\_\_\_\_

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Honors or Special Awards

Employment Information (list chronologically with the most recent on top)

Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor Name & Title \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Description of work responsibilities \_\_\_\_\_

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Your Job Title \_\_\_\_\_

May we contact your employer?  Yes  No

Reason for leaving \_\_\_\_\_

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Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor Name & Title \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Description of work responsibilities \_\_\_\_\_

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Your Job Title \_\_\_\_\_

May we contact your employer?  Yes  No

Reason for leaving \_\_\_\_\_

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Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor Name & Title \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Description of work responsibilities \_\_\_\_\_

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Your Job Title \_\_\_\_\_

May we contact your employer?  Yes  No

Reason for leaving \_\_\_\_\_

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## Disciplinary Action

1. Have you ever been a party to a civil suit?  Yes  No
2. Have you ever been arrested, charged with or convicted of any crime other than a minor traffic violation?  Yes  No
3. Has any civil action ever been taken against you by any government or administrative agency?  Yes  No
4. Have you ever been dismissed or asked to resign or withdraw or placed on suspension or probation from any employer for disciplinary reasons?  Yes  No
5. Have you ever been charged with a felony?  Yes  No
6. Have you ever filed for bankruptcy?  Yes  No
7. Has your wages ever been garnished?  Yes  No

If you have answered YES to any of the above questions, briefly explain your situation. If you were charged with a criminal offense and it was dismissed, please provide documentation showing the dismissal. Please attach a statement providing detailed information for each case.

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## Education or Specialized Training

(List all High Schools, Colleges, Universities, Specialized Trainings and Certifications.)

Name of Institution	City/State	Month/Year	Degree/Major/Certification
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Activities

(List all clubs, organizations, societies, and activities in which you have or currently a member.)

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## References

Name	Address	Phone	Occupation or Business
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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## Documentation Requirements

Please provide a photocopy of your birth certificate, DD-214, High School diploma, GED diploma, certifications, college transcripts, college diploma or associate degree diploma and transcripts.

Please list documents submitted:

## Writing Assignment

(This portion is to see if the applicant can effectively communicate a story in writing. The only thing that will be considered is the sentence structure, punctuation, spelling and clarity.)

Please choose a topic below:

- How has your family upbringing affected your views in life?
- What is the biggest risk you have ever taken?
- Describe a place or environment where you are perfectly content. What do you do or experience there, and why is it meaningful to you?

Kenton County Detention Center  
3000 Decker Crane Lane  
Covington KY 41017  
(859)363-2400

Personal Inquiry Waiver Authority for Release of Information

To: Concerned Person or Authorized Representative of Any Organization,  
Institution or Repository of Records

Re: \_\_\_\_\_  
Last name First name Middle Name Date of birth

Social Security #: \_\_\_\_\_ Sex  Male  Female Race \_\_\_\_\_

I respectfully request and authorize you to furnish the Kenton County Detention Center or an authorized representative of the Kenton County Detention Center any and all information or records that you have concerning my work, school, military, reputation, financial and credit status. Please include any and all medical, physical and mental health records including all information of a confidential or privileged nature, and photostats of same if requested. This information is to be used to assist the facility in completing a background history for confidential use by the

**Kenton County Detention Center.**

I hereby release you, your organization or others from any liability of damage which may result from furnishing the information requested above.

I, \_\_\_\_\_, hereby certify that to the best of my knowledge, that the information  
Print Name  
provided by me on this application is complete. I understand that any misrepresentation or material omission may be cause for rejection of my application and termination of my employment.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date