



CHEBOYGAN COUNTY SHERIFF DEPARTMENT

DALE V. CLARMONT
SHERIFF

TIMOTHY C. COOK
UNDERSHERIFF

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Brenda Beckwith
Jail Administrator

Jodi Beauchamp
Administrative Assistant

APPLICATION FOR EMPLOYMENT WITH THE CHEBOYGAN COUNTY SHERIFF'S DEPARTMENT

LETTER OF UNDERSTANDING

Position: Deputy

Please read carefully before signing.

I understand that neither the completion of the application nor any other part of my consideration for employment establishes an obligation for Cheboygan County/Cheboygan County Sheriff's Department to hire me. If I am hired as a Deputy, I understand that I must complete and pass the Field Training Officer Program (FTO) as established by the Cheboygan County Sheriff's Department-meeting or exceeding their standards for employment.

I understand, if hired, I will be on a probationary status for 12 months. I understand that during that 12 months, at any time and for any reason, and without prior notice I can be terminated. I also understand I can terminate my employment at any time for any reason without prior notice.

I attest with my signature below that I have given to Cheboygan County/Cheboygan County Sheriff's Department true and complete information on this application. No requested information has been concealed. I authorize Cheboygan County/Cheboygan County Sheriff's Department to contact references provided for employment reference checks. I understand a thorough background check may be completed which will include interviews of present and past associates that may include teachers, neighbors, employers, government agencies and relatives. If any information I have provided is untrue, or I have concealed material information, I understand that this will result in denial of employment or immediate dismissal.

Signature:

Date:

This application is valid for 1 year from the date signed/dated above.