

**APPLICATION FOR MEMBERSHIP OF CLARE COUNTY SHERIFF'S
DEPARTMENT MOUNTED DIVISION**

The County of Clare is an equal opportunity employer and shall consider all qualified applicants for all positions without regard to race, color, sex, religion, national origin, age height, weight, marital status, veteran status, handicap, or protected category.

**YOU MUST ANSWER ALL QUESTIONS COMPLETELY, FAILURE TO DO SO WILL RESULT IN REJECTION OF YOUR APPLICATION
AND YOU WILL NOT BE CONSIDERED FOR THE MOUNTED DIVISION.**

Date of Application

Last Name	First Name	Middle Name
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Street Address	City	State	Zip Code
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Telephone Number(s)	Social Security Number	Driver's License No.
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Are you at least 18 years of age? _____ Yes _____ No

Are you currently a member of any other mounted org? _____ Yes _____ No

Will you submit to a drug screening test? _____ Yes _____ No

Have you ever been employed by the County of Clare? _____ Yes _____ No

If Yes, _____

Position

Department

Dates

Reason for leaving _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? _____ Yes _____ No

Proof of citizenship or immigration status will be required upon membership acceptance.

Have you been convicted of a felony or have felony charges pending? _____ Yes _____ No

If Yes, please explain _____

EDUCATION

High School Diploma or equivalent? _____

Describe any specialized training, apprenticeships, internships, skills, licenses, certificates, CPR, first aid, and extracurricular activities that pertain to the position(s) for which you are applying.

List any or all horse experience, and special horse qualifications you and your horse may have.

Do you own a horse and equipment? _____ Yes _____ No

Do you have transportation (Trailer/Truck) for you horse? _____ Yes _____ No

PERSONAL REFERENCES

(Do not include relatives or employers)

Name	Address	Telephone
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1)

2)

3)

Signature: _____

Date: _____

X

X