

## **JOB TITLE: SHERIFF DEPUTY**

### **JOB SUMMARY**

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Under the general supervision of the Chief Deputy/Sheriff, the Sheriff Deputy exercises responsibilities for the enforcement of state and local laws relating to public safety and welfare. Responsible for protecting the life and property of the citizens in the county or area he or she is assigned to. Exercises independent judgment in dealing with dangerous or unusual situations, exercising safety practices and procedures. Works under stressful, high risk conditions. Performs investigations, responds to calls of distress, and testifies in court.

### **SCOPE OF RESPONSIBILITY**

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The intent of this job description is to provide a representative summary of the primary duties and responsibilities performed by incumbents in this position. Incumbents may not be required to perform all duties in this description, and incumbents may be requested to perform position-specific tasks other than those listed in this job description.

- Patrol assigned area and watch for suspicious activity.
- Arrest people for suspected crimes, including burglary, theft, drugs, larceny, homicide, and sexual crimes.
- Solve emergency and routine incidents.
- Conduct preliminary and follow-up investigations.
- Gather and bag evidence at crime scenes.
- Patrol buildings and ensure they are secure.
- Apprehend suspects who flee.
- Perform sobriety tests on those suspected of driving under the influence.
- Pull over speeding vehicles and issue citations.
- Interview victims and complainants.
- Prepare reports of arrests and file paperwork.
- Serve warrants, subpoenas, and other civil papers.
- Search houses and other properties for evidence.
- Assist local fire departments and emergency medical technicians.
- Perform search and rescue operations.
- Search for missing persons.
- Contact and cooperate with other law enforcement agencies in matters relating to the investigation of crimes and the apprehension of offenders.
- Provide security in county courts.
- Issue citations and warnings.
- Performs other related duties as assigned.

### **REQUIREMENTS**

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- Must be able to become licensed by the North Dakota P.O.S.T. Board and possess a current valid driver's license.
- Must be highly motivated and a self-starter.
- Must have a high level of integrity and honesty, and sustains and up-holds the law.
- Must be able to stay focused on the task while stationed in a busy environment.
- Must be punctual and reliable.
- Must be a team player who enjoys interfacing with people and is non-judgmental of others.
- Must have a positive attitude and willing to accept new responsibilities as required.
- Ability to communicate effectively in both verbal and written forms, and have strong public relations skills.
- Excellent observation skills and attention to detail.
- Strong analytical and problem-solving skills.
- Ability to prioritize tasks, delegating when appropriate.

- Ability to establish and maintain effective working relationships with county officials, county staff, and the general public.
- High school diploma or equivalent required.

## **PHYSICAL REQUIREMENTS**

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- Must be able to lift up to 50 pounds at times.
- Must be able to perform duties in a variety of weather conditions.

# **MOUNTRAIL COUNTY, ND**

## **EQUAL EMPLOYMENT OPPORTUNITY FORM**

We invite you to complete the enclosed Equal Employment Opportunity form and return it to our Title VI Coordinator in the enclosed envelope.

This information is kept separate from your application and is used for statistical purposes only.

Submission of this information is completely voluntary and will be kept confidential.

***Mountrail County Title VI Coordinator***

Enclosures



# Mountrail County Sheriff's Department

## Application for Employment

**Note to Applicant:** Thank you for your interest in employment with the Mountrail County Sheriff's Department. Mountrail County is an Equal Opportunity Employer. Applicants are considered for all positions without regard to race, color, religion, national origin, age, sex, political beliefs, disability, or status with respect to marriage or public assistance and complies with the provisions of the North Dakota Human Rights Act.

### INSTRUCTIONS

- Please print clearly or type
- Provide detail – do not use “See Resume”
- If accommodation or assistance is needed in completing this application, contact the Mountrail County Sheriff's Department at 701.628.2975
- Follow instructions carefully
- Check for accuracy/errors & signatures before submitting

Submit completed application by mail, email, in person or fax.  
**Mail:** Mountrail County Sheriff's Dept., PO Box 309, Stanley, ND 58784  
**FAX:** 701.628.3975  
**Email:** [rschumaier@co.mountrail.nd.us](mailto:rschumaier@co.mountrail.nd.us)

Position applying for:
How did you learn about this position?

### GENERAL INFORMATION

NAME (LAST, FIRST, MIDDLE)		DATE OF BIRTH (MM/DD/YYYY)
PHYSICAL ADDRESS (NUMBER/STREET)		
CITY		STATE/ZIP
MAILING ADDRESS (IF DIFFERENT)		CITY/STATE/ZIP
TELEPHONE NUMBER	ALTERNATE NUMBER	EMAIL ADDRESS
Have you been previously employed by the County of Mountrail?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you related to a member of the Mountrail County Board of Commissioners or County Employee?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, to whom?		
Can you provide proof, <i>if hired</i> , that you are eligible to work in the United States?		<input type="checkbox"/> Yes <input type="checkbox"/> No

### VETERAN'S PREFERENCE

<b>Veteran Eligibility:</b> You must be a United States resident and have served in the active military forces during a period of war or received the armed forces expeditionary or other campaign service medal during an emergency condition, and must have been released under other than dishonorable conditions. Do you claim preference as a:	
Veteran	<input type="checkbox"/> No <input type="checkbox"/> Yes – Attach DD-214, Report of Separation.
Disable Veteran	<input type="checkbox"/> No <input type="checkbox"/> Yes – Attach DD-214 & Letter less than 1 year old from Veteran's Admin. Indicating disability
Spouse of Disabled Veteran	<input type="checkbox"/> No <input type="checkbox"/> Yes – Attach copy of marriage certificate, DD-214 & Letter less than 1 year old from Veteran's Administration Indicating disability.
Spouse of Deceased Veteran	<input type="checkbox"/> No <input type="checkbox"/> Yes - Attach copy of marriage certificate, DD-214, & veteran's death certificate.

# Mountrail County Sheriff's Department Application for Employment

## EDUCATION

Did you graduate from High School or receive a GED Certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No			
School Name & Address	Course of Study	Did you Graduate; # of Hours earned per Semester/ Quarter	List Diploma or Degree

## TRAINING/SKILLS

Computer skills, related volunteer experience, and other education/training skills:
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## LICENSE OR CERTIFICATION

License/Certification	State	Profession	License/Certification #	Expiration Date

For the DEPUTY position **ONLY**, please provide the following information:

Do you have a current Driver's License?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you received any moving violations within the last three years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please explain: _____		

Please indicate valid driver's license(s) held:  A  B  C  D  M

# Mountrail County Sheriff's Department Application for Employment

## DEPUTY POSITION

Are you willing to work nights?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you willing to work weekends?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you willing to work holidays?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently licensed as a peace officer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you received any training or do you have any experience in the area of Law Enforcement? If YES, please provide training details and dates:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you received medical training (CPR, First Aid, First Responder, etc...)? If YES, please provide training details and dates:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever pled or been found guilty of a misdemeanor or felony, including a felony charge that was later dismissed under a deferred imposition of sentence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## DISPATCH POSITION

Are you willing to work nights/overnights?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you willing to work weekends?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you willing to work holidays?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you received medical training (CPR, First Aid, First Responder, etc...)? If YES, please provide training details and dates:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever pled guilty or been found guilty of a misdemeanor or felony, including a felony charge that was later dismissed under a deferred imposition of sentence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## EMPLOYMENT/PROFESSIONAL REFERENCES

Please list as references, three people that have knowledge of you and your qualifications. People must have known you for at least five years.		
Name	Address (include City, State, Zip)	Phone Number (include Home, Work & Cell)

# Mountrail County Sheriff's Department

## Application for Employment

### EMPLOYMENT HISTORY

Start with your current or last job – include armed forces and self-employment

- Any change of your job title under the same employer should be considered a separate position
- Use a separate sheet of paper for any additional employment history

NAME & ADDRESS OF CURRENT EMPLOYER						
TYPE OF BUSINESS				NAME OF SUPERVISOR		
TELEPHONE	FULL-TIME	PART-TIME	VOLUNTARY	FROM (MM/YYYY)	TO (MM/YYYY)	
YOUR JOB TITLE				MONTHLY START SALARY		MONTHLY END SALARY
YOUR DUTIES AND RESPONSIBILITIES						
MAY WE CONTACT YOUR CURRENT EMPLOYER FOR A REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable						
REASON FOR LEAVING OR REASON FOR CONSIDERING LEAVING CURRENT EMPLOYMENT						
NAME & ADDRESS OF EMPLOYER						
TYPE OF BUSINESS				NAME OF SUPERVISOR		
TELEPHONE	FULL-TIME	PART-TIME	VOLUNTARY	FROM (MM/YYYY)	TO (MM/YYYY)	
JOB TITLE				MONTHLY START SALARY		MONTHLY END SALARY
YOUR DUTIES AND RESPONSIBILITIES						
MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable						
REASON FOR LEAVING						
NAME & ADDRESS OF EMPLOYER						
TYPE OF BUSINESS				NAME OF SUPERVISOR		
TELEPHONE	FULL-TIME	PART-TIME	VOLUNTARY	FROM (MM/YYYY)	TO (MM/YYYY)	
JOB TITLE				MONTHLY START SALARY		MONTHLY END SALARY
YOUR DUTIES AND RESPONSIBILITIES						
MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable						
REASON FOR LEAVING						

# Mountrail County Sheriff's Department

## Application for Employment

### EMPLOYMENT HISTORY Continued

NAME & ADDRESS OF EMPLOYER						
TYPE OF BUSINESS				NAME OF SUPERVISOR		
TELEPHONE	FULL-TIME	PART-TIME	VOLUNTARY	FROM (MM/YYYY)	TO (MM/YYYY)	
YOUR JOB TITLE				MONTHLY START SALARY	MONTHLY END SALARY	
YOUR DUTIES AND RESPONSIBILITIES						
MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable						
REASON FOR LEAVING						
NAME & ADDRESS OF EMPLOYER						
TYPE OF BUSINESS				NAME OF SUPERVISOR		
TELEPHONE	FULL-TIME	PART-TIME	VOLUNTARY	FROM (MM/YYYY)	TO (MM/YYYY)	
JOB TITLE				MONTHLY START SALARY	MONTHLY END SALARY	
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REASON FOR LEAVING						
NAME & ADDRESS OF EMPLOYER						
TYPE OF BUSINESS				NAME OF SUPERVISOR		
TELEPHONE	FULL-TIME	PART-TIME	VOLUNTARY	FROM (MM/YYYY)	TO (MM/YYYY)	
JOB TITLE				MONTHLY START SALARY	MONTHLY END SALARY	
YOUR DUTIES AND RESPONSIBILITIES						
MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable						
REASON FOR LEAVING						

# Mountrail County Sheriff's Department

## Application for Employment

### Acknowledgement

<b>Initials</b>	<b>Please read carefully and acknowledge with your Initials</b>
	I acknowledge that, if requested, I will undergo drug testing.
	I acknowledge that investigations/inquiries deemed necessary to establish my character, general reputation and work performance history may be conducted.
	I acknowledge that, if hired, I may be required to attend training in other parts of North Dakota for varying lengths of time.
	I acknowledge that, if hired, I may be required to work nights/overnights, weekends and holidays.
	<b>Deputy position ONLY</b> I acknowledge that, if hired, I must pass a health assessment (physical) at a health care provider of my choice.
<p>I certify that all information contained in this application and any attachments is true and complete to the best of my knowledge. I understand that any willful misrepresentation, false statement, or omission by me in the application or interview process will be cause for rejection of my application or termination of my employment. I authorize investigation of all statements made on this application and any attachments, and I release all persons, companies, and organizations from liability for providing or receiving such information. Any offer of employment I may receive from the Mountrail County Sheriff's Department is contingent upon successful completion of any pre-employment screening process, which might include background and drug screening. I further understand that this employment application and other employment related documents are not contracts of employment; and, that any oral or written statements to the contrary are hereby expressly disavowed.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%; text-align: center;"> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/>             Applicant Signature         </div> <div style="width: 45%; text-align: center;"> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/>             Date         </div> </div>	