



In order to process your application, you must complete this form and return it and other requested information to the **MULTNOMAH COUNTY DEPARTMENT OF COMMUNITY JUSTICE, ATTN: VOLUNTEER & INTERN COORDINATOR, 501 SE HAWTHORNE BLVD, SUITE 250, PORTLAND, OREGON, 97214.**

The information furnished on this form is confidential. The existence of negative or derogatory information does not necessarily bar you from employment or volunteer work within or for the Department of Community Justice (DCJ). Please be aware that successfully passing this background investigation applies only to this position and that additional background investigations may be necessary for other positions in DCJ. **Please type or legibly print your responses using black ink.**

**CERTIFICATION**

I hereby certify that all statements made in this application or appended to it are true and correct to the best of my knowledge. I am aware that withholding pertinent information or information found to be materially (grossly) inaccurate will be cause for refusing further consideration of my application, or will constitute grounds for my termination if I am employed. I understand that I have the right and the responsibility to review any or all of the criminal and/or driving history filed with the Oregon State Police to ensure its accuracy and to seek remedies through the Oregon State Police if it is not.

I understand that the contents and findings of the background investigation are confidential, and will only be used for the purpose of background investigations for full time, part time, or volunteer employment with DCJ. I further understand that neither I nor any persons outside of a law enforcement background investigation process will be granted access to all or any part of the results of this investigation. With the above statements in mind, I hereby waive any and all rights that my representatives or I may have to read, review, or in any way gain knowledge of the content of the completed investigation.

**AUTHORIZATION TO RELEASE INFORMATION**

Having made application with DCJ, I hereby authorize an investigation of my record including job performance and my reason for leaving, my academic record and criminal history by DCJ, or another police agency authorized to conduct their application investigation, to ascertain any and all information which may concern my behavior and character, whether same is of record or not, and release your organization and all persons from any charge because of furnishing said information. If I am a current or previous employee of Multnomah County I hereby give permission to make copies of any evidence of discipline or performance evaluations in my County personnel file.

Name: _____ <i>(Please type or print)</i>	Referred by: _____ <i>(If applicable)</i>
Signed: _____ <i>(Please sign to indicate you have read and understand this page)</i>	Date: _____

**1. PERSONAL HISTORY – INFORMATION REQUESTED FOR REQUIRED CRIMINAL RECORDS CHECK**

Full Current name (First, Middle, Last)		Social Security Number	
List all names you have used in the past or by which you were known. Explain fully when it was used and why. Include maiden name, nicknames and aliases.		Drivers' License Number	
		State Where Issued	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single		Expiration Date	
		List other states where you have been licensed to drive.	
I identify my gender as...	Eye Color	Hair Color	Race
<input type="checkbox"/> Man			
<input type="checkbox"/> Woman			
<input type="checkbox"/> Genderqueer/Non-Binary			
<input type="checkbox"/> _____ (fill in the blank)			
Height	Weight	Date of Birth	Place of Birth (city, state)

**2. RESIDENCE AND CONTACT INFORMATION**

Home or Cell Telephone		Work Telephone		Email Address (if available)	
Number and Street		City		State	
				Zip Code	
List any other cities, states and countries in which you have lived since age 18:					

**3. MOTOR VEHICLES HISTORY**

a. Has your driver's license ever been suspended or revoked?  Yes  No

**If yes, explain fully (state where licensed, approximate date, reason for suspension):**

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b. **List any traffic-related incident in which you had contact with a police officer in the last ten years, including traffic tickets.** Also, list any other traffic violations that may not have involved contact with a police officer (e.g., violations from photo technology). List all such matters even if not formally charged, had no court appearance or found not guilty or matter settled by payment of fine.

Date	Location	Charge	Final Disposition	Police Agency

c. In the last ten years have you been involved in an accident that was your fault?  Yes  No

If yes, provide details:

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#### 4. LEGAL HISTORY (Non-Traffic)

a. **Since age eighteen** have you ever been arrested or charged with any non-traffic related violation or crime?  Yes  No

b. **List any incident in which you had contact with a police officer.** List all such matters even if not formally charged, had no court appearance or found not guilty or matter settled by payment of fine.

Date	Place	Charge	Final Disposition	Police Agency

c. Have you ever filed or been the subject of any restraining order, protective order, stalking order or had a charge of contempt of court filed against you?  Yes  No

d. Have you ever been placed on Probation/Parole/Post Prison Supervision as an adult?  Yes  No

e. Are you currently or have you ever been a party in a civil lawsuit (e.g., small claims actions, dissolutions, child custody, paternity, support, etc.)?  Yes  No

f. Have the police ever been called to your home for any reason?  Yes  No

g. Have you or your spouse/partner ever been referred to Child Protective Services?  Yes  No

h. Have you ever fraudulently received welfare, worker's compensation or other public assistance?  Yes  No

If you answered yes to any of the above questions, provide details (when, where, circumstances):

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i. Do you currently live with anyone who is or has been on Parole/Probation/Post Prison Supervision and/or who has been incarcerated?  Yes  No

If yes, provide their full name and the circumstances (dates, what they were convicted of and where they are/were on Parole/Probation and/or where incarcerated).

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j. Have you in the past or do you currently have any friends or family members who are/were either on Parole/Probation/Post Prison Supervision or were/are incarcerated?  Yes  No

If yes, provide their full name and the circumstances (dates, what they were convicted of and where they were/are on Parole/Probation and/or where incarcerated).

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**5. DRUG INVOLVEMENT**

a. Have you ever used drugs or narcotics for any reason except as prescribed by your doctor?  Yes  No  
b. Have you ever manufactured, sold or delivered a controlled substance or illegal drug?  Yes  No

If you answered yes to either of the above questions, provide the circumstances (dates, substance, how often).

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**6. PREVIOUS MULTNOMAH COUNTY EMPLOYMENT**

a. Are you currently, or have you ever been, employed by Multnomah County? Yes  No   
b. If yes, provide details (when, which department) of all such periods of employment:

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**7. REFERENCES** (List 2 people, related to employment or education whom you have known one year or more)

NAME	Complete ADDRESS	PHONE	RELATIONSHIP

**For questions, please contact: Stephanie Bolson**  
**Phone: (503) 988-5634 / Fax: (503) 988-4132**  
[stephanie.bolson@multco.us](mailto:stephanie.bolson@multco.us) / [www.multco.us/dcj/dcj-volunteers](http://www.multco.us/dcj/dcj-volunteers)