IMPORTANT

INCOMPLETE PAPERWORK WILL NOT BE ACCEPTED
PLEASE TURN IN ALL REQUESTED DOCUMENTS

WE NEED CLEAR COPIES OF THE FOLLOWING DOCUMENTS (1-9) WHEN YOU RETURN YOUR APPLICATION

1. Birth Certificate
2. High School Diploma or GED Certificate
3. High School Transcripts
4. College diploma (if applicable)
5. Updated Original/Sealed College Transcripts
6. DD214 Form (member 4 copy) reflecting the character of you discharge (if applicable)
7. Valid Driver’s License and Social Security Card (maybe copied on the same sheet)
8. Record of any legal name change (excluding marriage)
9. An Original & Certified 7-year driver’s license history from ALL states in which you have been licensed within the last 10 years.

If your license is from another state you must check with that state for their procedure to get your driver’s history.

It is the applicant’s responsibility to assure that all information is in their file. Missing information may cause delay or termination in the processing of their application.

Minimum requirements are at least a high school diploma or GED.

(NO EXCEPTIONS)
MUSCOGEE COUNTY PRISON
P.O Box 84041 – 7175 Sacredote Lane
COLUMBUS, GA 31908
(706) 561-3220

Warden

Rules and Regulations of the Department of Corrections
125-2-1.02 Employment (Muscogee County Prison)

No applicant who has been convicted by any state or by the Federal Government, of any crime, the punishment for which could have been imprisonment in a federal or state prison or institution or who has been convicted of sufficient misdemeanors to establish a pattern of disregard for the law shall not be considered for employment in a position that would require police powers, this shall not apply to violation of traffic laws or cases involving the operation of a motor vehicles when the applicant has received a pardon. Former inmates, parolees, former parolees, probationers or former probationers being considered for employment by any institution under the Jurisdiction of the State Board of Corrections must first be individually approved by the Director of the Department of Corrections. Effective December 11th 1977, Georgia Code and sec. 40-3509. Falsification of pertinent data shall be considered cause for denial of employment or dismissal and may result in prosecution.

Date: _____________________________

I ___________________________, have read or have had read to me the rules governing employment at the Muscogee County Prison and certify by affixing my signature that I am eligible for employment consideration.

____________________________________
Signature of Applicant

NOTARY SIGNATURE _____________________________

MY COMMISSION EXPIRES _____________________________

NOTARY SEAL
MUSCOGEE COUNTY PRISON
P.O Box 84041 – 7175 Sacredote Lane
COLUMBUS, GA 31908
(706) 561-3220

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize any officer or other authorized representative of the Muscogee County Correctional Institution bearing this release, or copy thereof, within one year of this date, to obtain any information in your files pertaining to my educational records including, but not limited to academic, achievement, attendance, athletic, personal history, and disciplinary records; medical records and credit records. Further authorization is extended to all Police Departments, Sheriff’s Departments, Juvenile Courts and Clerks of Courts, to furnish the bearer with information, reprints photographs and any other record containing information relating to criminal history or activity. I hereby direct you to release such information upon request of the bearer. I hereby release you, as the custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau of consumer reporting agency including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to validity of this release, you may contact me as indicated below.

Signature: ______________________________________________________________

Full Printed Name: ______________________________________________________

Date of Birth: _________________________________________________________

Social Security No: ______________________________________________________

Parent or Guardian: _____________________________________________________

Date: __________________________________________________________________

Current Address: ________________________________________________________

Telephone No: _________________________________________________________

Witness: _________________________________________________________________

(OFFICER)
TO WHOM IT MAY CONCERN:

I _____________________________________, having submitted an application to the Muscogee County Prison for the position of Correctional Officer, agree to participate in all phases of the applicant screening process to determine my suitability for employment.

I fully understand that a Physical Qualification Test is required and that my participation in said test is a personal choice. In doing so, I hereby relieve the Muscogee County Prison, Columbus Consolidated Government, and their representatives of any and all liability for personnel harm or injury resulting from my participation.

SIGNED _____________________________________ DATE _____________________

WITNESS _____________________________________ DATE _____________________

NOTARY SIGNATURE ___________________________________

MY COMMISSION EXPIRES ______________________________

NOTARY SEAL
February 9, 1981

Penal Institutions
Violations
GA. Law-Title 77-327-328-329.1

Penalty
GA. Law-77-9912 and Section 77-9913

77-327 Trading with convicts without permission
   It shall be unlawful for any person to trade or traffic with, buy from or sell to a convict any article without the
   knowledge and consent of the warden or his deputy in charge. (Acts 1961, pp. 45, 46.)

77-328 Loitering near convicts after order to desist
   It shall be unlawful for any person to loaf, linger, or stand around where convicts are employed, or kept, after
   having been ordered by the warden or deputy warden in charge of said convicts to desist therefrom. (Acts 1961, pp.
   45,46.)

77-329.1 Giving convicts articles or items without consent of warden
   It shall be unlawful for any person to obtain or procure for or give to a convict a gun, pistol, or any other weapon,
   or any intoxicating liquor or Amphetamines, or Biphetamines, or any other Hallucinogenic drugs, or any drugs, or any
   other article or item, without the knowledge and consent of the warden or his deputy warden in charge. Any person who
   knowingly violates the provisions of this section shall be guilty of a felony and upon conviction hereof shall be punished
   as provided in section 77-9912. (Acts 1976, pp. 1506, 1507, eff. July 1, 1976.)

77-9912 Violations of section 77-328, relating to trading with convicts, or section 77-328, relating to loitering near
   convicts, or section 77-329.1, relating to giving convicts articles or items without consent of Warden or Deputy Warden.
   Any person violating any of the provisions of section 77-327, relating to trading with convicts, section 77-328,
   relating to loitering near convicts, or of Warden or Deputy Warden, shall be guilty of a felony and upon conviction thereof
   shall be imprisoned for not less than one nor more than five years.

I____________________________________ have had read to me and/or I have read and fully understand each of the above
laws and the penalty sections relating to Penal Institutions, and I further understand that if I violate any of the above laws
and any other laws relating to Penal Institutions that I shall be charged for the violation and prosecuted in court.

Signed: ____________________________________________

Witness: ____________________________________________

NOTARY SIGNATURE ________________________ MY COMMISSION EXPIRES ________________

NOTARY SEAL
DECLARATION

Declaration of Applicant:

I hereby certify that there are no willful misrepresentations or falsifications in the foregoing statements and answers to questions. I am aware that should investigation disclose any such misrepresentations or falsifications, my application will be rejected, or if already employed, my employment may be terminated. I also understand that a failure to answer each question will cause my application to be disqualified.

DATE: ____________________ SIGNATURE: _____________________________________

SUBSCRIBED AND DULY SWORN BEFORE ME BY THE ABOVE PERSON ON THE

_____ DAY OF ______________, YR __________ IN THE COUNTY OF ____________

AND STATE OF ________________________________

NOTARY PUBLIC ________________________________

COMMISSION EXPIRES: ___________________________

NOTARY SEAL
INSTRUCTIONS REGARDING THE INTENT AND CONTENT OF CRIMINAL JUSTICE INFORMATION

The Georgia Crime Information Center Council has promulgated rules, which require all Criminal Justice Agencies comply with the following Personnel Security Standard:

**ALL employees of Criminal Justice Agencies must sign an “Awareness Statement” regarding penalties for unlawfully accessing or disseminating Criminal History Record Information.** (GCIC Rule 140-1-.02)

The “Awareness Statement”, which must be signed by all employees of the Department of Offender Rehabilitation, printed on the reverse side of this form. Before signing it, please read carefully the following information.

Rules and Regulations of the Georgia Crime Information Center defines “Criminal History Record Information” a “Information collected by Criminal Justice Agencies on individuals, consisting of identifiable descriptions and notations arrests, detentions, indictments, accusations, information, or other formal criminal charges, and any disposition arising therefrom, including sentences, correctional supervision and releases.”

Dissemination of Criminal Record Information must be for specific purposes. These purposes are: 1) Criminal Investigation 2) Public Employment 3) Private Employment


Departmental Rule 125-1-1-.09 Records Amended. Paragraph (3) States: “Inmate records are not open to public inspection. Information relative to specific inmates will not be provided in response to outside inquiry by telephones.”

It is critical that you, an employee of a Criminal Justice Agency, understand the importance of safeguarding Criminal Justice Information and that you understand the penalties for failure to safeguard Criminal Justice Information.

**Remember the following:**

1. Improper dissemination of the information from inmates records could be considered and invasion of privacy and result in prosecution under Georgia Law 35-3-38.
2. Dissemination of Criminal History Record Information must be made only as an official duty and not in any informal or common conversion on duty or off duty with any person.
3. **All** dissemination of Criminal History Record Information must be logged.

Certain Criminal History Record Information is not available to all Agencies. One example of this is Offender Information. A first Offender disposition is not a conviction and upon completion of sentence, the offender is exonerated of the offense, under Georgia Law. First Offender Information cannot be given to some Agencies/persons who can receive other types of Criminal History Record Information. If a First Offender has completed his probation or jail sentence prior to July 1, 1978, Law Enforcements, Corrections, Prosecutors, Courts, Probation, and Pardons and Parole can be given his First Offender Record. If any offender is on probation or in jail, all of the above agencies can be given his First Offender Record. If a First Offender satisfactorily completed his probation or jail sentence after July 1, 1978, only the agencies listed can receive his information. Under **no** circumstances can First Offender Information be given to **any** other agency or to public or private employers or to Non-Criminal Justice Agencies.

Questions regarding the release of the Criminal History Record Information should be directed to your supervisor or to the Deputy Commissioner of your Division.
Access to Criminal Justice Information, as defined in GCIC Rule 140-1-.02 (amended), and dissemination of such information is governed by state and federal laws and by GCIC Rules. Criminal Justice Information cannot be accessed or disseminated by any employee except as directed by superiors or as authorized by approved standard operating procedures.

State law (Georgia Laws 1973, p. 1314, as amended) provides specific criminal penalties for unlawfully accessing or disseminating Criminal History Record Information (defined in GCIC Rule 140-1-.02). The Georgia Code states:

35-3-38. Penalties for violations

(a) Any person who knowingly requests, obtains, or attempts to obtain criminal history record information under false pretenses, or who knowingly communicates or attempts to communicate criminal history record information to any agency or person except in accordance with this article, or any member, officer employee or agent of the center, the council, or any participating agency who knowingly falsifies criminal history record information or any records relating thereto shall for each such offense, upon conviction thereof, be fined not more than $5,000.00, or imprisoned for not more than two years, or both.

(b) Any person who communicates or attempts to communicate criminal history record information in a negligent manner not in accordance with this article shall for each such offense, upon conviction thereof, be fined not more than $100.00, or imprisoned not more than ten days, or both.

(c) Any person who knowingly discloses or attempts to disclose the techniques or methods employed to ensure the security or privacy of information or data contained in criminal justice information systems except in accordance with this article shall for each such offense, upon conviction thereof, be fined not more than $5,000.00, or imprisoned not more than two years, or both.

(d) Any person who discloses or attempts to disclose the techniques or methods employed to ensure the security and privacy of information or data contained in criminal justice information systems in a manner not permitted by this article shall for each such offense, upon conviction thereof, be fined not more than $100.00, or imprisoned not more than ten days, or both.

I acknowledge that I have received instructions about the intent and content of federal and state regulations concerning the security and privacy of criminal justice information. I further acknowledge that I have read and understand the above section of the Georgia Law.

Print: __________________________________________
Signed: __________________________________________ Date: ____________________________________

SEE REVERS SIDE OF THE PAGE BEFORE SIGNING

FORWARD A COPY OF SIGNED FORM TO DEPARTMENTAL PERSONNEL OFFICER
NCIC/GCIC REQUEST

PLEASE PRINT CLEARLY

Date: __________________________ Position Applied for __________________________

FULL NAME: ________________________________________________________________
(First)     (Middle)     (Last)
List any other names you have ever used. Include a brief explanation in parenthesis for each name listed (i.e., alias, maiden name, nickname, previous marriage, etc.)

__________________________________________________________
__________________________________________________________
__________________________________________________________

Social Security Number ___________________ Race _________________ Sex ____________

Date of Birth ____________________________ Place of Birth _________________________

Height ______________ Weight ___________ Eyes _______________ Hair ______________

Driver’s License Number _____________________________________ State ______________

List below all the cities and states you have lived in. Be sure to include those cities where you attended school or where you were stationed or TDY in the military.

CITY/STATE      CITY/STATE

_____________________________________ _____________________________________
_____________________________________ _____________________________________
_____________________________________ _____________________________________
_____________________________________ _____________________________________

-----------Department Use Only----------

No Local Record ________ Local Record Attached _______ NCIC/GCIC Attached________

Driver’s History Attached ____________________________ Comments ______________________________

PLACE STAMP BELOW
I, ______________________________, do hereby swear or affirm that I have never enlisted nor served in any of the military forces of the United States or in any foreign military service. I further swear or affirm that I have never served in any branch of the United States Reserve Forces or in any State National Guard.

________________________________
Signature of Applicant

________________________________
Notary Public

________________________________
My commission Expires

________________________________
Date

***If you have prior or present military service please initial below indicating you have reviewed this page ____________.
To: Warden  
Muscogee County Prison/CCG

I, the undersigned fully understand that should I fail to complete satisfactorily The Basic Training Course, Classroom Instruction and Quality with Firearms, “Standard Pistol Course of the Department of Corrections; I shall not be granted permanent status and shall be terminated for failure and/or inability to comply with the training standards to become a qualified Correctional Officer of the Columbus Consolidated Government.

The above training standards include Correctional Officers employed by other city-operated departments such as Civic Center, Metra, Public Services, Parks And Recreation, and ect. are assigned with state inmates.

Witness: _____________________________ Trainee’s Signature: ____________________________

Date: ________________________________

Notary Signature: ______________________________

My Commission Expires: ______________________________

Notary Seal:
I, _______________________________ as a Correctional Officer of the City of Columbus, Georgia Muscogee County, do solemnly swear that during my employment as such, I will do the best of my skill and ability, faithfully discharge all the duties required of me, and execute the orders of my superior officers, and in all cases conform to and enforce the rules and regulations of the Georgia State Board of Corrections, and the rules and regulations of the Corrections Department of Columbus, Georgia. I will enforce the laws of the state of Georgia and the ordinances of the City of Columbus, Georgia governing the Corrections Department. “I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States of America and the state of Georgia and that I will faithfully discharge the duties of my office conscientiously and without malice or partiality, to the best of my ability. So help me God.”

Witness: _______________________________

Signature: _______________________________

Date: _______________________________

Notary Signature: _______________________

My Commission Expires: ___________________

Notary Seal:
Public Safety Reimbursable Moving Expense Guidelines

Sworn Public safety officers relocating to the Columbus area that meet the following criteria are eligible for reimbursement of actual relocation expenses of up to $1000. Because these payments are subject to IRS rules and audits, receipts must be submitted and expenses outside of these guidelines are not reimbursable.

Moving Distance: Your new CCG job location must be at least 50 miles from your former home.

Eligible Expenses: For your expenses to be reimbursable they must be reasonable for the circumstances of your move and consistent with the following guidelines.

1. Personal vehicle mileage is payable at the current CCG reimbursement rate for a single one-way trip to your new Columbus area address from your former address by the most direct route. This reimbursement is available for a maximum of 2 personally owned vehicles that are actually driven from your old to your new home. Mileage is not payable for a towed vehicle. Fuel expenses are included in the mileage rate and not reimbursable.

2. Meals at the current CCG per diem rate and lodging are payable/reimbursable based upon the following table. Lodging is reimbursable for a maximum of $120 per day including taxes.

<table>
<thead>
<tr>
<th>Mileage from former address</th>
<th>Number days per diem</th>
<th>Number days lodging</th>
</tr>
</thead>
<tbody>
<tr>
<td>50 to 99</td>
<td>0.5</td>
<td>0</td>
</tr>
<tr>
<td>100 to 299</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>300 to 499</td>
<td>1.5</td>
<td>1</td>
</tr>
<tr>
<td>500 to 699</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>700 to 899</td>
<td>2.5</td>
<td>2</td>
</tr>
<tr>
<td>900 or more</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

3. Professional moving fees are reimbursable for the full amount of charges up to the $1000.00 maximum.

4. Moving equipment and packing materials charges including a moving truck rental/mileage fees, fuel for moving truck, trailer, vehicle trailer, hand or appliance truck, furniture pads, boxes, etc. rented/purchased from a moving equipment company (moving truck fuel may be purchased anywhere).

5. For new employees that are not traveling by personal vehicle and/or rented moving equipment the cost of a single one-way trip to Columbus by common carrier is reimbursable for the employee and all her/his dependent, up to the $1000.00 maximum.

6. Relocation expenses not reimbursable (but that may be tax deductible-see IRS Publication 521) include: the expense of selling a home or breaking a lease, purchasing or renting a new residence, security deposits (rental and utility), storage charges, license or tag fees, taxes, pre-move house hunting expenses, return trips to former residence and any eligible expenditure or combination of eligible expenditures that exceeds $1000.00.

If you have any questions about what is reimbursable expense contact your department’s relocation coordinator or the Human Resources Department at (706) 653-4059.