

PHONE 712-362-2639

**DEPUTIES:**

CHIEF DEPUTY JUSTIN SCHULTES  
SERGEANT JEFF MERRILL  
TONY RUTER  
DILLON FAAS  
THOMAS SCHULTES  
CALEB CREECH  
DAVID GREENWALD

**CIVIL CLERK:**

LAURIE HARVEGO



Law Enforcement Center  
114 North 6th Street  
Estherville, Iowa 51334-2229

FAX 712-362-7271

**DISPATCHERS:**

EMILY KRAUSE  
CASIE WHITACRE  
CHRIS INMAN

**JAILERS:**

JAIL ADMINISTRATOR:  
LAURIE HARVEGO

AHREN OUELLETTE  
DALTON RUCKER

## Immediate Opening

The Emmet County Sheriff's Office is currently accepting applications for a full-time jailer. This position comes with full time employment benefits including paid vacation, holiday pay, health insurance, life insurance, sick leave and an IPERS retirement program.

Duties include but are not limited to the care, supervision and transportation of county jail prisoners.

A qualified employee must possess a high school diploma or GED, have the ability to earn and maintain certifications as required by law and department policy, have hearing within normal range, the ability to multi-task, have the ability to operate computer systems and other office equipment as well as the ability to report to work on short notice.

Additionally, a successful employee must have a safe driving record, be able to pass a background check, pre-employment physical, drug screen, interview and MMPI (Minnesota Multi-Phasic Personality Inventory) as required by law. The starting wage is \$20.01 per hour with step increases to \$20.26.

A complete description of the duties and responsibilities are available with the application on-line at [emmetcountyia.com](http://emmetcountyia.com), Facebook or at the Emmet County Sheriff's Office. The position is open until filled.

Emmet County is an EOE.

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BOB KRAUSE  
HUNTER COLLINS  
LUKE BRENNER

## General Description

### Emmet County Sheriff's Office Jailer

Duties and Responsibilities of an Emmet County Jailer include but are not limited to:

1. Be familiar with all jail rules and policies as well as all state regulations regarding care and custody of county jail inmates.
2. Maintain custody, care and safety of the inmates of the Emmet County Jail as required by law and department policy.
3. Search and process into the jail all incoming inmates for weapons and contraband.
4. Secure and record all of the inmate's valuables and personal effects.
5. Conduct personal observation checks of all prisoners, observe inmate conduct report and take action in regard to any unusual behaviors or circumstances.
6. Maintain jail cleanliness and sanitation.
7. See that necessary maintenance of the jail, its fixtures and equipment is performed.
8. See that the inmates adhere to jail rules, report and take action in regard to violations.
9. Serve three meals daily.
10. Maintain a proper inventory of supplies within the jail including meal supplies and required medications.
11. Issue supplies to inmates as needed.
12. Record and inspect incoming and outgoing mail.

13. Escort prisoners to and from court appearances as required.
14. Safely transport prisoners to and from other institutions as required.
15. Supervise and record prisoner jail visitation.
16. Release prisoners and return personal belongings as required.
17. Administer and record prisoner medical care including the dispensing of medications as required.
18. Assist with jail programs and services.
19. Maintain all required records and logs.
20. Earn and maintain all training and certifications as required by state law and department policy.

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**Authorization for Release of Personal Information**

I, \_\_\_\_\_ do hereby authorize a review of and full disclosure of all records concerning myself to the Emmet County Sheriff's Office whether the said records are a public, private or confidential nature, including criminal histories.

The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings) and other financial statements of records whenever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me; and the recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Emmet County Sheriff's Office. I also certify that any person(s) who may furnish such information in good faith concerning me shall not be held accountable for providing this information; and I do hereby release Emmet County and any and all agents or employees and the Emmet County Sheriff's Office from any and all liability which may be incurred as a result of collecting such information.

**I HEREBY SWEAR AND AFFIRM THAT EACH STATEMENT AND ALL INFORMATION IN OR SUPPLEMENTING THIS APPLICATION (PERSONAL) ARE COMPLETE, TRUE AND ACCURATELY RECORDED TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT PROVIDING FALSE OR MISLEADING AND/OR INCOMPLETE INFORMATION ON THIS APPLICATION IS GROUNDS FOR EXCLUSION FROM THE SELECTION PROCESS OR DISCHARGE IF DISCOVERED SUBSEQUENT TO EMPLOYMENT.**

A photocopy and/or copy of this release form will be valid as an original thereof, even though the said photocopy/fax does not contain an original writing of my signature.

**I have read and fully understand the contents of the "Authorization for Release of Personal Information."**

X \_\_\_\_\_

(Signature of Applicant and Date)

**EMMET COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER**

# Emmet County Iowa

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

Did you graduate? YES  NO  Degree: \_\_\_\_\_

### References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_