

## COBB COUNTY SHERIFF'S OFFICE

### PRE-EMPLOYMENT INITIAL QUESTIONNAIRE

1. Print your full name: \_\_\_\_\_  
Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Date and Employer: \_\_\_\_\_
2. Have you been fired or asked to resign from any job in the past 7 years?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ Times Used: \_\_\_\_\_  
Date/Month/Year/Age of last use: \_\_\_\_\_
3. Have you ever used Marijuana/Hashish in any form?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ Times Used: \_\_\_\_\_  
Date/Month/Year/Age of last use: \_\_\_\_\_
4. Have you ever used illegal drugs other than Marijuana and when was the last time you used?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ Times Used: \_\_\_\_\_  
Type of Drug: \_\_\_\_\_  
Date/Month/Year/Age of last use: \_\_\_\_\_
5. Have you ever sold, traded, or given away illegal drugs?  
Yes: \_\_\_\_\_ Type of Drug: \_\_\_\_\_  
No: \_\_\_\_\_
6. Do you have a valid driver's license?  
Yes: \_\_\_\_\_ What State? \_\_\_\_\_  
No: \_\_\_\_\_
7. How many citations have been issued within the past 7 years?  
Number of citations: \_\_\_\_\_  
What State? \_\_\_\_\_

8. Do you currently have 6 or more points on your license?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

9. Has your driver's license ever been suspended or revoked?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Date and Reason: \_\_\_\_\_

10. Have you ever been arrested, charged, or convicted of a crime?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "yes", give date/place/charge/disposition: \_\_\_\_\_

\_\_\_\_\_

11. Are you currently or have you ever been affiliated with a gang?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "yes", give date/place/gang/involvement: \_\_\_\_\_

\_\_\_\_\_

**UNDER THE PENALTY OF O.C.G.A. 16-10-71, FALSE SWEARING,  
I certify that all information entered on this form pertaining to me is true,  
correct, and complete.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Disqualified

Reason \_\_\_\_\_

\_\_\_\_\_  
Testing

\_\_\_\_\_  
Deputy's Signature

\_\_\_\_\_  
Date