





Sheriff David M. Lucas

Belmont County Sheriff's Office

68137 Hammond Road . St. Clairsville, Ohio 43950

~ Emergency: 911 ~

Sheriff's Office: 740.695.7933 • Dispatcher: 740.695.2212 • Fax: 740.699.2582

Jail: 740.695.5124 • Jail Fax: 740.695.4781

March 19, 2018

Dear Law Enforcement Personnel:

Jamboree in the Hills 2018 will be here before you know it! July 18th thru July 22nd!

Continued this year:....if you worked last year (JITH 2017), you only have to complete the Personal Information Form (PIF) and attached paperwork. These forms will be on our website under: "Worked JITH 2017 Forms".

Wages this year are \$30.00 per hour.

To work JITH 2018 you will need to supply the following for yourself:

Flashlight

Ball Cap (LE)

Rain Gear

Reflector Vest for Traffic Details

Water, Food and other personal comfort items.

All forms MUST be completed and returned to: Kitty Jo Paboucek

All forms **MUST** be received by this office by <u>June 22, 2018</u> to be considered to work this year's event. You can email completed packets/documentation to: <u>jith.kjp@gmail.com</u> or fax completed packets/documentation to 740-695-9662. Packets/Documentation may also be mailed to:

Belmont County Sheriff's Office Attn: Kitty Jo Paboucek 68137 Hammond Road St. Clairsville, OH 43950

If any deputy wants to work JITH 2018 that did not work 2017; please refer them to our website:

www.belmontsheriff.com

Respectfully,

Kitty Jo Paboucek
Belmont County Sheriff's Office

YOU MUST INCLUDE THE FOLLOWING DOCUMENTATION

WHEN YOU SUBMIT YOUR HIRING PACKET:

- LETTER FROM YOUR SUPERVISOR PERMITTING YOU TO **WORK THIS DETAIL**
- A COPY OF YOUR DRIVER'S LICENSE
- A COPY OF YOUR SOCIAL SECURITY CARD

PLEASE COMPLETE (INCLUDING SIGNATURES) ALL PAPERWORK.

ALL forms in packet MUST be completed.

MAKE SURE TO INCLUDE PAYMENT FOR T-SHIRTS IF YOU ARE ORDERING

Call if you have any questions:

Kitty Jo Paboucek: 740-695-7933, Ext. 115

STATE OF OHIO, COUNTY OF BELMONT, SS: IN THE COURT OF COMMON PLEAS

IN KE:	Oath of
	As Special Commission Deputy Sheriff of Belmont County, Ohio, for the period beginning July 18, 2018 and ending
	July 22, 2018
	ОАТН
STATE C	OF OHIO
COUNTY	OF BELMONT, to-wit:
I,	
1,	(PRINT YOUR NAME)
do solemn	ally swear that I will support the Constitution of the United States
	ea and the Constitution of the State of Ohio, and that I will
	honestly and impartially perform all the duties incumbent upon
	cial Commission Deputy Sheriff of Belmont County, Ohio, so help
me God.	
	(Your Signature) Special Commission for Jamboree in the Hills 2018
	Special Commission for Jamboree in the Ithis 2016
Sworn to	before me the said
	m/her subscribed in my presence this 18 th day of July, 2018.
-	
	Sheriff

E IN THE HILLS 2018 – EMPLOYEE WORK SCHEDULE
WORK S
MPLOYEE
S 2018 - E
THE HILL
JAMBOREE IN

NAME:		SSN		
(Last) ADDRESS:	(First)	(M.I.)		
(Street) PHONE NUMBERS:		(City) (State)	ate) (Zip)	
Home:	Law Enforcement Employer:	/er: Work #:	#	
Cell:	Notify in Case of Emergency:		Emergency#	
Work:	Fax# to receive Schedule:	:E-Mail		
Will you be camping: Yes	s No Type/Size of Camper:	110		
EMPLOYEES PLANNI	EMPLOYEES PLANNING TO CAMP MUST BE ON SITE FOR CAMPER PLACEMENT BY 10a-1pm on 7/9/2017	FOR CAMPER PLACEMENT E	3Y 10a-1pm on 7/9/2017	1 1
191 HE	LIST THE TIMES WHEN YOU ARE AVAILABLE TO WORK AT THE JAMBOREE IN THE HILLS (DO NOT LIST TIMES WHEN YOU ARE ENGAGED IN YOUR REGULAR EMPLOYMENT) LEAVE LAST TWO COLUMNS BLANK	U AKE AVAILABLE TO WORK AT THE JAMBOREE IN S WHEN YOU ARE ENGAGED IN YOUR REGULAR EMPLOYMENT LEAVE LAST TWO COLUMNS BLANK	N THE HILLS	
DATES	This Section Only TIME AVAILABLE TO WORK JITH	(For Administrative Use Only) ASSIGNED TIME	(For Administrative Use Only) ASSIGNED POST	
SUNDAY (July 15)				
MONDAY (July 16)				
TUESDAY (July 17)				
WEDNESDAY (18)				
THURSDAY (July 19)				
FRIDAY (July 20)				
SATURDAY (July 21)				
SUNDAY (July 22)				

All Schedules must have a <u>letter attached from your Supervisor</u> permitting you to work this Extra Detail New Hire Schedules received without copies of <u>Driver's License & Social Security Cards</u> will have payroll held.



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(*, 19,00										
March 19, 201	.8									
Dear Officer:										
black BDU Pan other sizes see	ts when working e form - per shirt a	Venue. Please and the numbe	enclose \$7.00 (S	, M or L) or \$9 (rder form below) with XL, XXL) or \$10 (XXXL) — king any other area, you					
				e shirts. If payin	g by check, make check					
payable to Bel	mont County She	riff's Office (BC	SO).							
	er sizes see form - per shirt and the number of shirts needed. If you are working any other area, you be required to be in your dress uniform. ase use the order form below and enclose the money for the shirts. If paying by check, make check able to Belmont County Sheriff's Office (BCSO). Please return this order page and money with your employment packet If writing a check, make out to: Belmont County Sheriff's Office									
Please	return this or	der page an	nd money wit	h your empl	oyment packet					
Charles of December 1 for the Charles of Cha										
Your Name:			Home Office:							
	rts (Mark Sizes be									
Shirts:	How many	·/		σσσαι φ						
Small		@¢0.00 aaab	VVI area		G(0.00 I					
		@\$8.00 each	_							
Medium		@\$8.00 each			@\$11.00 each					
Large	_	@\$8.00 each	4X Large		@ \$12.00 each					
XLarge		@\$9.00 each	5X Large	2	@ \$12.00 each					

Enclosed



Personal Information Form

Date: (Check One) New Information Change/Update Information											
Legal Name* (Last, First, MI)		PERSO	ONAL IN	FORM	ATION	Glast Aris					
					Name (Last	, rirst, IVII)					
Last 4 Digits of SSN Birth Date							***************************************				
Marital Status** ☐ Single ☐ Marr	☐ Married ☐ Separated ☐ Divorced ☐ Wildowed ☐ Domestic P.						Domestic Partner				
Citizenship				Visa Type Visa Numb					Visa Expiration Date		
ADDRESS/PHONE INFORMATION											
ADDRESSIPHONE INFORMATION please note that your paycheck will be mailed to the mailing address provided below Home Address											
2 ^{ne} Address Line	T-17		· · · · · /· · · · · · · · · · · · · ·							The same of the sa	
City			· · · · · · · · · · · · · · · · · · ·				,				
	·	•					State		Zlp Code		
Mailing Address		11									
2 nd Address Line (Mailing)											
City (Mailing) Zip Code (Mailing)						(Malling)					
Home Phone Number	none Number	E-mail Address									
EMERGENCY CONTACT INFORMATION											
First and Last Name Relationship Phone Number Alternate Phone Number											
First and Last Name	Relationship Pho			Phone	hone Number Alternate Phone Nu			ite Phone Number			
LICENSES/CERTIFICATIONS											
Name of Licensing Institution License/Ce						the explanation with the same ways or a grown it was a second with		Service services in a service	Issued	Expiration Date	
					· · · · · · · · · · · · · · · · · · ·		***********				
EDUCATION											
Name of Institution		Degre	Degree		Major			GPA M		/Year Graduated	
							*************	_			
I certify that the information herein is true and correct to the best of my knowledge.											
Signature Date											

Box.com: Please submit via box.com for processing.

 $\textbf{Questions?} \underline{ \ \, \text{HRISseasonal@livenation.com}}. \ \, \text{Please do NOT submit paperwork through} \underline{ \ \, \text{HRISseasonal@livenation.com}}. \\$

^{*} Name/Social Security Number changes require a copy of a social security card. Please attach.

^{**}A change in marital status may change your eligibility to your current benefits. If your state or federal tax information has changed, please update your State Tax and W-4 Form. These forms can be found on the Live Nation Intranet site under the Human Resources New Hire Paperwork section.