



Sheriff Rick Felici
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Island County Sheriff's Office

JOB INTEREST FORM

Name _____ Phone # _____

Current Position _____ Level _____

Date of Availability _____

I am interested in being considered for the position of _____

I believe I am qualified for this position because of my experience in the following: _____

I understand that completion of this form does not guarantee me an interview or placement in this position. I understand that this is simply a request for contact and a way to identify myself, my accomplishments, and my value to your Department.

Signature

Date