



APPLICATION

**PERSONAL HISTORY STATEMENT
PERSONAL DATA**

NAME: Kimble Christopher Lee
 Last First Middle

Social Security Number:	
Birth Date:	
Home Address:	
Home Phone Number:	
Cell Phone Number:	
E-mail Addresses:	

Other names (alias, maiden names and nicknames) by which you have been known. Please include the time period these names were used.
 Kirby 1999 - 2024

Present Marital Status: Married Single Divorced Widowed Separated

Full Name of Current and Previous Spouse(s):

First Name	Middle Initial	Last Name	Date of Birth
Tavia		Marissou-Wolf	
Samantha		Sanders	

Marriage Data: (include present and all previous marriages)

Date of Marriage:	Birth Name of Spouse:	Place of Marriage (City & State)
10/01/2018	Tavia Marissou-Wolf	
04/21/2008	Samantha Ward	

Do you object to us contacting your spouse or former spouse? Yes No

Children: (All children or step-children whether currently living with you or not. Attach additional pages if necessary)

Full Name of Child	Date of Birth	Place of Birth	SSN	Current Address

EDUCATION

Please indicate appropriate high school status:

Diploma

GED

List all high schools/universities/colleges you have attended, beginning with high school

From Mo/Yr	To Mo/Yr	School	Address	Phone	Fax
08/00	05/04	Springfield South High			
01/11	05/13	Colorado Mountain College			
05/13	05/15	Colorado State University			

Have you ever been suspended or expelled from any high school, college, university, or any formal educational institution beyond high school? Yes No

If "yes", please explain, including school(s) and date(s):

Do you currently hold a Peace Officer Certification? Yes No

If "yes", please give date completed, name and location of academy, certification number and current status (valid, inactive, lapsed, suspended, revoked, etc.):

Has the Peace Officer Standards and Training Board (or other similar authority) ever taken disciplinary action against your certification? Yes No

If "yes", please provide dates and explanation for each situation:

MILITARY AND SELECTIVE SERVICE

If you are a male born after December 31, 1959, provide the following information concerning your registration:

Selective Service No. Active Duty Date of Registration _____

If you have not registered, explain why: Active Duty Veteran

If you are a male who reached your 18th birthday between April 1, 1975 and December 31, 1977, when there was no registration required, provide the following:

Classification: N/A Date: N/A Selective Service No. N/A

Have you ever been denied entrance to any of the armed forces? Yes No
If "yes", explain on separate sheet of paper and attach to end of document.

List U.S. military service performed as a member in the Reserve/National Guard/Active Duty (Also submit your original long form DD214):

From Mo/Yr	To Mo/Yr	Active/ Reserve	Branch	Rank	Service Serial #	Type of Discharge or Separation
07/04	07/09	Active	USMC	E-4	437612889	Honorable

Are you currently participating in any U.S. Military Reserve or National Guard Program? Yes No
If "yes", please indicate branch and organization name.

List all disciplinary actions against you in military service, such as Court-Martial, Captain's Mast, Office Hours, Company Punishment or other actions covered under Article 15 of the Uniform Code of Military Justice.

Date	Specific Charge	Type of Action	Disposition

EMPLOYMENT

Please list any and all other law enforcement agencies you have applied or tested with. Please provide year, agency and place an "X" in the block indicating which area of the process you completed and whether you were disqualified or hired.

Year	Agency	Written	Physical Agility	Oral Interview	Background	Polygraph/CVSA	Psych	Medical Exam	Disqualified	Hired
24	Boulder				x					
24	Lakewood	x								
23	Arvada			x						

Beginning with your most recent employer, list all jobs, including part-time, temporary or volunteer positions you have held since age 18 or over the last ten years, whichever is less. If you had intervening periods of military service, unemployment or schooling, list those periods in sequence in the place provided at the end of this section.

May we contact your present employer? Yes No (If "no" explain why we cannot contact)

From (Mo/Yr) 02/24	To (Mo/Yr) Current	Company/Employer Name CDOT - Ace Express	
Phone #	Fax #	Company Address	
Job Title Driver		Job Duties Driving	
Salary		Reason for Leaving Current (Please do not contact)	
Supervisor's Name Gerald Pydeski	Work Hours 9-5 pm	Address (if different)/Phone	E-mail Address

From (Mo/Yr) 01/24	To (Mo/Yr) 01/24	Company/Employer Name Empyrean Logistics	
Phone #	Fax #	Company Address	
Job Title Cash Transport		Job Duties Transporting Cash	
Salary		Reason for Leaving Unsafe work conditions	
Supervisor's Name Jose Martinez	Work Hours	Address (if different)/Phone	E-mail Address

From (Mo/Yr) 08/21	To (Mo/Yr) 08/23	Company/Employer Name Alterra Mountain CO	
Phone #	Fax #	Company Address	
Job Title Email Marketing and Mobile		Job Duties Digital Marketing	
Salary		Reason for Leaving Discharged	
Supervisor's Name Silvester Hernandez	Work Hours 9-5	Address (if different)/Phone	E-mail Address

From (Mo/Yr) 05/23	To (Mo/Yr) 08/23	Company/Employer Name Therabody	
Phone #	Fax #	Company Address	
Job Title Copywriter		Job Duties Writer and edit all sports marketing materials including email, website, app, social media, and press releases	
Salary		Reason for Leaving Job at Alterra Mountain CO	
Supervisor's Name Jay Renolyds	Work Hours 9-5	Address (if different)/Phone	E-mail Address

From (Mo/Yr) 01/18	To (Mo/Yr) 05/20	Company/Employer Name TrainingPeaks	
Phone #	Fax #	Company Address	
Job Title Copywriter		Job Duties Writing all public facing communications	
Salary		Reason for Leaving Job at Therabody	
Supervisor's Name Michelle Moore	Work Hours 9-5	Address (if different)/Phone	E-mail Address

From (Mo/Yr) 11/17	To (Mo/Yr) 01/18	Company/Employer Name Townsquare Media	
Phone #	Fax #	Company Address	
Job Title Digital Managing Editor		Job Duties Leading a team of contributors in creating digital content.	
Salary		Reason for Leaving Job at TrainingPeaks	
Supervisor's Name Justin Tyler	Work Hours 9-5	Address (if different)/Phone	E-mail Address

List all periods of military, unemployment or school here:

Reason	From	To
Military	2004	2009
School (College)	2011	2015
Unemployed (Seeking employment)	08/23	02/24

Have you ever been subjected to verbal, written or documented disciplinary or corrective action because of misconduct or unsatisfactory performance? Yes No

If "yes", please provide dates, company name and explanations for each situation.

Date	Company	Explanation
N/A		

Were you ever involuntarily terminated, asked to resign or resigned to avoid disciplinary action or investigation from a job? Yes No (If yes, please provide dates, company name and explanations for each situation.)

Date	Company	Explanation
08/23	Alterra Mountain CO	I was not performing enough (inactive). During my annual review, I was instructed to oversee more initiatives in developing email marketing campaigns and guiding workshops.

DRIVER'S LICENSE HISTORY

Do you possess a valid Colorado driver's license? Yes No If "yes", list:

License #: [REDACTED] Class: _____ Expiration: [REDACTED] _____

Please list other states where you have been licensed to operate a motor vehicle:

State	Name under which license was issued
Ohio	Christopher Kimble

Has your driver's license ever been suspended, revoked, cancelled or denied? Yes No

If "yes", provide when, where and explanations for each situation:

OVI in Ohio, 2009. Suspended for drinking in driving. Paid fines and served suspension.

List all traffic summonses/tickets you have received since age 16 or over the last ten (10) years, whichever is less (not including parking violations/tickets):

Nature of Violation	Location (City & State)	Approximate Date	Disposition
Driving 5 mph Over	Red Feather Lakes, CO	2019	Guilty

List all motor vehicle accidents you have been involved in since age 16 or over the last ten (10) years, whichever is less.

Date	Location (City & State)	Investigating Agency	Injury/Non-Injury
N/A			

CRIMINAL HISTORY

If you have ever, as an adult or juvenile, been arrested for, taken into physical custody for, been issued a misdemeanor citation for (excluding traffic citations), or convicted of any of the above crimes, please give the following information: (The fact that your record may have been sealed, expunged, released, or pardoned has specific legal implications as to how you answer this question):

Date	Agency/Location	Charge	Disposition
2011	Glenwood Springs, CO	OJ warrant issued by Garfield Co	Guilty
2013	olorado State Un, Fort Collir	FOJ) warrants x2 - Garfield Coun	Guilty
2014	Loveland, CO	ts for Possession of Marijuana x2	Guilty
2009	Enon, OH	OVI	Guilty

As an adult, have you ever been placed on probation by any court?

Yes No If "yes", please give details to include when, where, and why:

Please list any other crimes you may have committed, REGARDLESS of whether stopped, arrested, and/or convicted, to include what, when, where, how, and why: (attach additional pages as necessary)

Driving without a license when I first moved to Colorado, 2011.

PROFESSIONAL REFERENCES

Please provide a minimum of four (4) references (*not relatives, social acquaintances or significant others or their relatives*) who would be able to comment on your character, experience, personality and other qualities related to this job. These references should not be the same as in the employment section. Please provide complete, accurate information.

Name Sean Murphy	Phone (home) [REDACTED]	Phone (work)
Address		City/State/Zip [REDACTED]
E-mail Address [REDACTED]	Acquaintance (how do you know them?) [REDACTED]	

Name Richard Salas	Phone (home) [REDACTED]	Phone (work)
Address		City/State/Zip [REDACTED]
E-mail Address [REDACTED]	Acquaintance (how do you know them?) [REDACTED]	

Name Jeff Blum	Phone (home) [REDACTED]	Phone (work)
Address		City/State/Zip [REDACTED]
E-mail Address [REDACTED]	Acquaintance (how do you know them?) [REDACTED]	

Name Brandon Pearman	Phone (home) [REDACTED]	Phone (work)
Address		City/State/Zip [REDACTED]
E-mail Address [REDACTED]	Acquaintance (how do you know them?) [REDACTED]	

GENERAL INFORMATION

This position involves shift work. A new employee could be assigned any shift during the probationary period. In addition, you may be required to work overtime and must be available for emergency call-in overtime. Under current scheduling practices you will have three days off per week and you will work a high percentage of holidays, weekends and may not be able to get time off for personal events like anniversaries, birthdays, etc. Are you willing to work all hours of the day, all days of the week, holidays, special family occasions, and overtime when assigned? Yes No

Do you belong to any organization or do you adhere to any belief(s) that in any way:

Would limit or prohibit your use of weapons or firearms? Yes No

Would restrict or prohibit you from working on particular days or during particular hours? Yes No

Would restrict you from conforming to agency grooming standards? Yes No

If "yes", please explain in detail on an attached page.

LETTER OF UNDERSTANDING

I am applying for a position with the Summit County Sheriff's Office. I understand that there are certain requirements I must meet before I can be accepted into this position. I understand that I must participate in and cooperate with an initial interview conducted by a deputy or representative of the Summit County Sheriff's Office.

I understand that I must cooperate and submit to an extensive background investigation, which consists of the following areas of concern at a minimum:

- Review of my completed Personal History Statement
- Thorough criminal background check
- Thorough examination of prior employment
- Examination of my driving record
- Examination of my personal credit/financial report

I understand that as part of this process I will participate in an Oral Interview Board, which will evaluate my potential suitability for employment. This in turn will be followed by my completion of all of the following tests:

- Standard medical examination
- Psychological evaluation
- Polygraph evaluation

The aforementioned tests will be administered in a manner selected by the Summit County Sheriff's Office. I understand that the results of the tests are the property of the Summit County Sheriff's Office and that I will not receive copies of the reports nor any information contained in them, except as it may relate to a serious condition discovered by the examining physician.

A final decision as to my suitability for employment will be made by the Summit County Sheriff's Office Command Staff after all tests, in light of the requirements of the job, along with the previous information have been reviewed.

I agree to assist in the expedient conclusion of these reviews, tests and examinations. I understand that successful completion of this process does not guarantee employment with the Summit County Sheriff's Office, only that I will be considered for positions as they become available, pursuant to established rules and regulations of the Summit County Sheriff's Office. I have read and understand the content and purpose of this Letter of Understanding. I agree to abide by these requirements as a condition of employment with the Summit County Sheriff's Office.

Signature of Applicant



I acknowledge this is accepted as a digital signature

CERTIFICATION of TRUTHFULNESS

I hereby declare that all statements and information provided to the Summit County Sheriff's Office in this Personal History Questionnaire, as well as any other statements and information provided for my pre-employment background investigation or any other phase of my pre-employment screening, are true and complete to the best of my knowledge and belief.

I understand that any miss-statement of material fact, willful omission of material fact, or willful deception, will be cause for disqualification and rejection as a candidate for employment, without appeal.

I further understand that these aforementioned miss-statements, omissions, or deceptions are also grounds for termination after employment, without notice and without any right of appeal.

Signature of Applicant  *I acknowledge this is accepted as a digital signature*

Printed Name Chris Kimble

Dated this 24 day of April, 2024.