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# JACKSON HOLE AIRPORT

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Dear Transportation Security Officer Applicant:

Thank you for your interest in joining the Jackson Hole Airport Board Security Screening Team. The Jackson Hole Airport has a contract with the Transportation Security Administration to provide security screening services. If you are selected as a Transportation Security Officer (TSO), you will play an important role in the overall mission of the Department of Homeland Security (DHS) by contributing to the daily security requirements at the Jackson Hole Airport. Security Screeners at the Jackson Hole Airport are not federal employees but work directly for the Jackson Hole Airport Board.

To assist you in your consideration of employment as a TSO at the Jackson Hole Airport, we have outlined some important information for your review:

The starting wage for a TSO is \$14.50 per hour. Full time, year round employees are currently eligible for full family health insurances (currently includes dental and vision coverage), Wyoming Retirement, and paid leave (personal and sick). All benefits are paid 100% by the employer.

Our officers are responsible for providing frontline security and protection for air travelers. Tasks include but are not limited to: identifying dangerous objects in bags, cargo, and/or on passengers, and preventing these objects from being transported onto aircrafts.

TSA requires that applicants meet the following criteria:

- 1) Be a United States Citizen
- 2) Have a High School Diploma or GED.
- 3) Be able to read, write and understand the English language.
- 4) Be physically capable of performing the job.
- 5) Pass a color vision test.
- 6) Be able to hear alarms generated by screening equipment.
- 7) Be registered with Selective Service as required by law [The law requires virtually all Male U.S citizens (regardless of where they live), and male immigrants residing in the U.S (permanent resident aliens), to register with in 30 days of the 18<sup>th</sup> birthday. Late registrations are accepted up to 26 years of age.]
- 8) Be available to work weekends, holidays and rotating shifts between 5:00am and 8:00pm

OPERATING UNDER AUTHORITY OF TOWN OF JACKSON AND COUNTY OF TETON

P.O. Box 159 Jackson, Wyoming 83001 (307) 733-7695 FAX (307) 733-9270

Raymond C. Bishop - Airport Director


The hiring process includes the following steps:

- 1) Credit Check: applicants will be required to submit to a credit check.
  - a. The standard for finding an applicant ineligible based on financial responsibility is based on:
    - i. Cumulative "bad debt" that exceeds \$7500 or any debt associated with a Federal and/or state tax lien, or any amount of back child support payments.
    - ii. Bad Debt is defined as past due accounts consisting of accounts placed for collection, repossessions, foreclosures, etc.
- 2) Screening Assessment Battery (SAB): applicants will be required to pass a computerized test that measures language aptitude and object recognition.
- 3) Color Vision Test: applicants must pass a color vision test.
- 4) Interview: applicants will be interviewed by a Jackson Hole Airport staff member
- 5) Fingerprints: Applicants will be fingerprinted to determine criminal history.
- 6) Preliminary Criminal History Check: applicants will be subject to a criminal history records check based on residence information.
- 7) E-QIP: Applicants will fill out an extensive on-line background investigation form to be used by TSA to administer a background investigation.
- 8) Self Certification: Applicants will sign a form certifying their physically able to perform the job.
- 9) Medical Exam and Drug Test: Applicants will have a medical exam and drug test to assure compliance with TSA standards at a medical provider of our choice.
- 10) Applicants that meet all requirements will be considered for employment.

In addition to the application, you will find two sets of release forms, one for the Jackson Hole Airport the other for TSA. Both sets need to be filled out completely and returned with the application. This will allow both the Airport and TSA to process your application.

If while considering the above information, you have questions, please contact us at 307-733-7695. Thank you for your application.

Sincerely,



Aimee Crook  
Director of Screening



# JACKSON HOLE AIRPORT BOARD

## Transportation Security Officer Employment Application

### APPLICANT INFORMATION

**Full Name:**

\_\_\_\_\_  
Last First Middle

**Physical Address:**

\_\_\_\_\_  
Street City State/Zip

**Mailing Address:**

\_\_\_\_\_  
Address City State/Zip

**Telephone Number:**

\_\_\_\_\_  
Home Cell Other

**Date of Birth**

**Social Security Number**

**E-mail Address**

**Type of Employment:**

**Full Time**

**Part Time**

**Seasonal**

Are you a citizen of the United States?

YES  NO

Can you submit verification of citizenship as required on INS form I-9?

YES  NO

Can you show proof of age? (Drivers License, Birth Certificate)

YES  NO

Can you perform all job functions specified on the attached job description, with or without reasonable accommodation?

YES  NO

Can you perform all of the tests/demonstrations/interviews required in the hiring process, with or without reasonable accommodation?

YES  NO

Do you object to working weekends?

YES  NO

Do you object to working rotating shifts?

YES  NO

Do you object to working holidays?

YES  NO

### EDUCATION

**High School**

**Address**

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

**College**

**Address**

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

**Other Education/Courses**

**Address**

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



# JACKSON HOLE AIRPORT BOARD

## EMPLOYMENT HISTORY

List the places that you have worked (most recent first) in the last 10 years.

**Name of Employer:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
Street City State/Zip

**Your Position:** \_\_\_\_\_ **Name of Supervisor:** \_\_\_\_\_

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**Name of Employer:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
Street City State/Zip

**Your Position:** \_\_\_\_\_ **Name of Supervisor:** \_\_\_\_\_

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**Name of Employer:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
Street City State/Zip

**Your Position:** \_\_\_\_\_ **Name of Supervisor:** \_\_\_\_\_

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**Name of Employer:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
Street City State/Zip

**Your Position:** \_\_\_\_\_ **Name of Supervisor:** \_\_\_\_\_

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**Name of Employer:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
Street City State/Zip

**Your Position:** \_\_\_\_\_ **Name of Supervisor:** \_\_\_\_\_



# JACKSON HOLE AIRPORT BOARD

## RESIDENCE HISTORY

List the physical address of the places that you have lived (most recent first) in the last 10 years.

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State/Zip County

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**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State/Zip County

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**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State/Zip County

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**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State/Zip County

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**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State/Zip County

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**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State/Zip County

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**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State/Zip County



# JACKSON HOLE AIRPORT BOARD

## OFFICE SKILLS

**TYPING:**      Years of experience:      Words per Minute:

**COMPUTER:**      Years of experience:      PC or Macintosh?

List all software programs with which you are proficient:

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## REFERENCES

Please do not list relatives or former employers

**Name:**      **Occupation:**

**Address:**      **Phone Number**

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**Name:**      **Occupation:**

**Address:**      **Phone Number**

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**Name:**      **Occupation:**

**Address:**      **Phone Number**

## MILITARY SERVICE

**Branch:**      **From:**      **To:**

**Rank at Discharge:**      **Type of Discharge:**

## OTHER

Please list any languages, other interest, hobbies, special talents, or additional remarks that would be helpful in evaluating your qualifications:

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# JACKSON HOLE AIRPORT BOARD

May we ask your present employer for a reference? YES  NO

Hire may be subject to DOT drug and alcohol testing, including pre-employment drug testing. If hired for a position that requires drug and alcohol testing, will you submit to these tests? YES  NO

How did you hear about this job? Newspaper  Radio  Job Service  Friend  Other

**EMPLOYEES OF THE JACKSON HOLE AIRPORT BOARD ARE "EMPLOYED AT-WILL" AND CAN BE TERMINATED AT ANY TIME, FOR ANY REASON, OR NO REASON, AS LONG AS IT IS NOT DISCRIMINATORY**

I hereby certify that to the best of my knowledge and belief the answers given by me to the foregoing questions and all statements made by me in the application are correct.

If employed, I agree that all material created and produced whether in written, graphic or broadcasting form, all inventions new or changes in processes developed during my employment are the exclusive property of the company to use and/or sell and that subsequent to my employment with this company I will not disclose, use or reveal any confidential information related to the company without first obtaining written consent from an officer of the company.

I hereby apply for employment upon the basis and understanding that such employment may be terminated at any time upon notice given to me personally or sent to my last known address.

I consent to **JACKSON HOLE AIRPORT BOARD** obtaining such personal and job related information as required in connection with this application for employment.

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

\_\_\_\_\_  
Date



# JACKSON HOLE AIRPORT BOARD

## FAIR CREDIT REPORTING ACT AUTHORIZATION

Fair Credit Reporting Act of 1970, as amended

PLEASE TAKE NOTICE THAT ONE OR MORE CONSUMER CREDIT REPORTS MAY BE OBTAINED FOR EMPLOYMENT PURPOSES PURSUANT TO THE FAIR CREDIT REPORTING ACT, AS AMENDED, 15 U.S.C., §1681, ET SEZ. SHOULD A DECISION TO TAKE ANY ADVERSE ACTION AGAINST YOU BE MADE, BASED EITHER IN WHOLE OR IN PART ON THE CONSUMER CREDIT REPORT, THE CONSUMER REPORTING AGENCY THAT PROVIDED THE REPORT PLAYED NO ROLE IN THE AGENCY'S DECISION TO TAKE SUCH ADVERSE ACTION.

Information provided by you on this form will be furnished to the consumer reporting agency in order to obtain information in connection with an investigation to determine your (1) fitness for employment, (2) clearance to perform contractual service for the Federal Government, and/or (3) security clearance or access. The information obtained may be disclosed to other Federal agencies for the above purposes and in fulfillment of official responsibilities to the extent that the law permits such disclosure.

I hereby authorize the Jackson Hole Airport Board to obtain such report(s) from any consumer/credit reporting agency for employment purposes.

Signature (sign in ink)		Full Name (print legibly)	
Date Signed	Date of Birth (mm/dd/yyyy)	Social Security Number	
Current Address (Street, City)		State	Zip Code
If at current address less than 2 years, please enter former address (Street/City/State/Zip)			

### Privacy Act Statement

**Purpose:** Your Authorization, including your Social Security number, is needed to permit JHAB to obtain a copy of your credit report. Your credit report will be used to determine your suitability for employment in the position for which you are being considered. Completing this authorization, including providing your Social Security number, is voluntary; however, failure to do so may affect your employment prospects, eligibility for continued employment, ability to obtain a security clearance or work on a government contract.

**Routine Uses:** Information you provide will be disclosed to consumer reporting agencies for the purpose of obtaining your credit report. This information may also be disclosed to JHAB contractors when necessary to perform a function or service related to this record for which they have been engaged.



# JACKSON HOLE AIRPORT BOARD

## AUTHORIZATION FOR RELEASE OF INFORMATION

Carefully read this authorization to release information about you, then sign and date it in ink.

I authorize the Jackson Hole Airport Board (JHAB), through its employees, agents, or contractor, to obtain any information relating to my activities from criminal justice agencies, credit bureaus, consumer reporting agencies, collection agencies, or other relevant sources of information. This information may include, but is not limited to, any criminal history record information, and financial and credit information.

I understand that the purpose of this authorization is to permit JHAB to conduct a background investigation for the purpose of making a determination of suitability or eligibility for employment and/or a security clearance, or for work on a government contract. I authorize the custodians of records and other sources of information pertaining to me to release such information upon request of JHAB, or its contractor, regardless of any previous agreement to the contrary. I understand that the information released by custodians of records and other sources of information is for official use and only for the purposes stated above. This information may be redisclosed by JHAB only as authorized by law.

Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with JHAB, whichever is sooner.

Signature (sign in ink)		Full Name (print legibly)		Date Signed
Other Names Used			Social Security Number	
Current Address (Street, City)	State	Zip Code	Home Telephone Number (Including Area Code)  (     )	

### Privacy Act Statement

**Purpose:** Your Authorization and this information, including your Social Security number, is needed to permit JHAB to complete a background investigation to establish that applicants and incumbents either employed by JHAB or working under contract are suitable for the job and/or eligible for a public trust or sensitive position, and/or a security clearance. Completing this authorization, including providing your Social Security number, is voluntary; however, failure to do so may affect your employment prospects, eligibility for continued employment, ability to obtain a security clearance or work on a government contract.

**Routine Uses:** Information you provide and copies of this form may be disclosed to any potential source from which information is requested in the course of this background investigation to the extent necessary to identify you, inform the source of the nature and purpose of the investigation, and to identify the type of information requested. This form may also be disclosed the JHAB contractors when necessary to perform a function or service related to this record for which they have been engaged.



## Fair Credit Reporting Act Authorization

**INSTRUCTIONS:** Carefully read this authorization to release information about you, then type or print legibly and complete all applicable sections. Return original completed form to TSA Office of Security, Personnel Security Division.

Information provided by you on this form will be furnished to a consumer reporting agency in order to obtain information in connection with an investigation to determine your (1) fitness for Federal employment, (2) clearance to perform contractual service for the Federal Government, and/or (3) security clearance or access. The information obtained may be disclosed to other Federal agencies for the above purposes and in fulfillment of official responsibilities to the extent that the law permits such disclosure.

I hereby authorize TSA to obtain such report(s) from any consumer reporting agency for employment purposes.

<b>Full Name</b>		<b>Maiden Name</b>	
<b>Social Security Number</b>	<b>Are you a U.S. Citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Permanent Resident Number (if applicable)</b>	
<b>Date of Birth (mm/dd/yyyy)</b> / /	<b>Place of Birth (City/State)</b>	<b>Country of Birth</b>	
<b>Current Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<i>If at current address less than 2 years, please enter former address.</i>			
<b>Former Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Signature (sign in ink)</b>		<b>Date Signed (mm/dd/yyyy)</b> / /	

**Note:** Please take notice that one or more consumer credit reports may be obtained for employment purposes pursuant to the Fair Credit Reporting Act, as amended, 15 U.S.C., § , et seq. Should a decision to take any adverse action against you be made based either in whole or in part on the consumer credit report, the consumer reporting agency that provided the report played no role in the agency's decision to take such adverse action.

**PRIVACY ACT STATEMENT:** Authority: 49 U.S.C. § 114 (n); 15 U.S.C. § 1681b; E.O. 9397. **Principal Purpose(s):** To obtain a copy of your credit report in order to determine your suitability for employment in the position for which you are being considered. **Routine Use(s):** This information will be shared with consumer reporting agencies for the purpose of obtaining your credit report, or for routine uses listed in the applicable system of records notice. **Disclosure:** Disclosure of the requested information is voluntary in the sense that no criminal penalties will follow from a failure to provide the information. However, failure to provide the requested information may affect your employment prospects, eligibility for continued employment, ability to obtain a security clearance, or ability to work on a government contract. Disclosure of your SSN is also voluntary, but failure to provide your SSN may result in a delay in determining your suitability for employment.



**Transportation  
Security  
Administration**

**Authorization for Release of Information**

**INSTRUCTIONS:** Carefully read this authorization to release information about you, then type or print legibly and complete all applicable sections. Return original completed form to TSA Office of Security, Personnel Security Division.

I authorize the Transportation Security Administration (TSA), through its employees, agents, or contractors, to obtain any information relating to my activities from criminal justice agencies, credit bureaus, consumer reporting agencies, collection agencies, or other relevant sources of information. This information may include, but is not limited to, any criminal history record information, and financial and credit information.

I understand that the purpose of this authorization is to permit TSA to conduct a background investigation for the purpose of making a determination of suitability or eligibility for employment and/or a security clearance, or for work on a Government contract. I authorize the custodians of records and other sources of information pertaining to me to release such information upon request of TSA, regardless of any previous agreement to the contrary. I understand that the information released by custodians of records and other sources of information is for official use by the Federal Government only for the purposes stated above. This information may be re-disclosed by the Government only as authorized by law.

Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with the Federal Government, whichever is sooner.

<b>Full Name</b>	<b>Other Names Used</b>			<b>Social Security Number</b>
<b>Current Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Contact Number</b>
<b>Signature (sign in ink)</b>			<b>Date Signed (mm/dd/yyyy)</b>	
			/ /	

**PRIVACY ACT STATEMENT:** Authority: 49 U.S.C. § 114 (n); E.O. 9397. **Principal Purpose(s):** To establish that applicants and incumbents either employed by TSA or working under contract are suitable for the job and/or eligible for a public trust or sensitive position, and/or a security clearance. **Routine Use(s):** This information may be shared with to any potential source from which information is requested in the course of this background investigation to the extent necessary to identify you, inform the source of the nature and purpose of the investigation, and to identify the type of information, or for routine uses listed in the applicable system of records notice. **Disclosure:** Disclosure of the requested information is voluntary in the sense that no criminal penalties will follow from a failure to provide the information. However, failure to provide the requested information may affect your employment prospects, eligibility for continued employment, ability to obtain a security clearance, or ability to work on a government contract. Disclosure of your SSN is also voluntary, but failure to provide your SSN may result in a delay in determining your suitability for employment.