

IDAHO DEPARTMENT OF CORRECTION
Conditional Offer of Employment
(New Hires and Rehires – Probation and Parole Officers)

I understand that the Idaho Department of Correction (IDOC) is offering me the position cited below conditional upon the results of my fingerprint scan, drug test, and medical screening, and subject to continued concurrence of IDOC senior leadership.

I agree that if I am notified that any information obtained from the results of the fingerprint scan, drug test, or medical screening makes me unqualified, ineligible, or unsuitable to be an IDOC employee, I will resign immediately from my position with the IDOC. If I do not resign from my position, I understand that the offer of employment will be withdrawn and this signed letter of conditional offer of employment will serve as my resignation.

I understand that I am being hired as a probation and parole officer (PPO) and will serve a probationary period of 2,080 hours. I understand that upon satisfactory completion of my probationary period, competency testing, and Idaho Peace Officer Standards and Training (POST) certification, the PPO position provides for progression to probation and parole officer senior.

I understand that I am being offered a starting salary at the PPO senior level, I will not receive a salary increase upon my progression to the PPO senior level, and any future salary increases will be (1) based on merit for my job-related performance, and (2) in compliance with IDOC compensation policy.

As a PPO, I am required to become certified through the POST Academy. POST requires each attendee to sign an agreement stating that should the attendee leave law enforcement employment voluntarily or involuntarily during the two (2) years following graduation from the academy, the attendee agrees to pay restitution to POST in the amount of three thousand one hundred eighty-one dollars and eight cents (\$3,181.08) to cover training costs. For failure to graduate from POST or layoff by reduction in staff, restitution shall be waived. This agreement is in my POST application packet.

I understand that I may be required to take leave without pay (furlough) as directed by the appointing authority. Furlough hours will be determined at the beginning of the fiscal year and pro-rated based on my date of hire.

Applicant

Social Security Number: _____ - _____ - _____

Position Offered: _____

Start Date: _____

Beginning Pay: _____

Print Full Name: _____

Signature: _____

Witness (an IDOC authorized employee)

Print Full Name: _____

Signature: _____

Date: _____