



Employment Application | Submitted: 26-Apr-2025

AAA

Paul Carroll



Jail Operating Citizens Advisory  
Committee

**Job Location** - St Helens, OR  
**Department** - Board of Commissioners

#### Admin Uploaded Files

There are no admin uploaded files for this applicant.

#### Documents

There are no documents for this applicant.

#### References

Please list two people who may be contacted as references who know about your interest and qualifications to serve in this volunteer capacity.

*Note: If you are unable to provide a phone number, you will need to enter 000-000-0000. If you are unable to provide an email address, you will need to enter noreply@noemail.com*

---

**Lt Joe Hogue**

**Phone:**  
**Email:**

**Rachel Barry**

**Phone:**  
**Email:**

Additional Questions

Applicant Information

Question	Answer	Disqualifier?
If selected, how do you prefer to receive documents? *	Paper Copy	
Are you a resident of Columbia County? *	Yes	
If no, please describe your affiliation with Columbia County.	N/A	
Please list all current and past volunteer activities. *	None in Columbia County	
Please describe why you are interested in serving on this committee or commission. *	Retired law enforcement officer very concerned about jail monetary issues	
Availability - Meetings are held on a periodic basis. Are you able to commit to the frequency of the meeting schedule? *	Yes	
Availability - What time schedule works best for you? *	Mornings, Afternoons, Weekdays, Weekends	
Availability - What days work best for you? *	Mon, Tue, Wed, Thu, Fri, Sat, Sun*	
Please list potential conflicts of interest between your personal life and public services which might result from service on this committee or commission.	None	
Anything else you would like to add to your application which	resume available upon request	

would assist in the decision making?

Applicant Statement

I declare that all statements and answers in this application are true and complete and agree that any untrue or misleading answer, omission, concealment or failure to answer any questions fully, completely and accurately may be grounds for ending my volunteer services, regardless of when it is discovered. By completing this application, I give the County the permission to validate some of my answers with the appropriate authorities/institutions.

I authorize the County or its agents to investigate my references and to keep and preserve records of such investigations. Additionally, I release all parties from liability for any damage that may result from furnishing information to the County or its agents.

By submitting this application form, I acknowledge the following: I hereby volunteer my services to assist Columbia County in the accomplishment of its authorized services. I understand that my services as a volunteer will be governed by the Volunteer Services Agreement which will be provided to me.

I agree to the above.

**Signature:** Paul Carroll

**Date:** 2025-04-26 02:54:36pm

**IP Address:** 73.67.196.244

Wet Signature:



---

Signature

---

Date

Application Status History

Date	Status	User	Score	Notes
02-Jun-2025	In-Person Interview Scheduled	Jacyn Normine		Status Changed