



JEFFERSON COUNTY SHERIFF'S DEPARTMENT  
APPLICATION FOR EMPLOYMENT  
"An Equal Opportunity Employer"



Please print or type

Date Received by JCSO: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_ (Maiden: \_\_\_\_\_)  
Last First Middle

Permanent Mailing Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Rate of Pay Expected: \_\_\_\_\_ Date Available to begin work: \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_ If you are not a citizen, do you have permission to remain in the United States permanently? \_\_\_\_\_

Do you read and write English? \_\_\_\_\_ Do you speak, read, or write any languages other than English? \_\_\_\_\_  
If so, which? \_\_\_\_\_

Are you or have you ever been a resident of West Virginia? \_\_\_\_\_ If not what state: \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ State: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_  
Chauffeur's License? \_\_\_\_\_

Is there any other name you use that may be pertinent to checking work references? \_\_\_\_\_ If yes, list below:

Have you ever taken any examinations under the West Virginia Civil Service Commission? \_\_\_\_\_  
If yes, for which position? \_\_\_\_\_

Are you affiliated with any business or agency which may result in a conflict of interest in working for the Jefferson County Sheriff's Dept.? \_\_\_\_\_

Do you have any physical limitations which preclude you from performing certain kinds of work? \_\_\_\_\_

If yes, describe such limitations: \_\_\_\_\_

## EMPLOYMENT HISTORY

List from current employer and list any periods of unemployment

Name of Company _____	Employed from _____
Address _____	to Present
Type of Business _____	
Last position held _____	Starting Salary _____
Name of Supervisor _____	
Describe the work you did _____	Ending Salary _____
_____	
_____	Part time _____ Full time _____
Reason for leaving _____	

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*If more space is needed use additional sheets*

## RECORD OF EDUCATION

Circle last grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

SCHOOL	Names and Address of School	Major/Minor	Did you graduate?	Diploma or Degree
Elementary				
High School				
College				
Other (specify)				

## RECORD OF MILITARY SERVICE

Were you in the U.S. Armed Forces? \_\_\_\_\_ If yes, what branch? \_\_\_\_\_

Date of Entry (or Entries) \_\_\_\_\_

Date of Last Separation \_\_\_\_\_

Rank of Discharge \_\_\_\_\_ Service Number \_\_\_\_\_

List duties in the Service, include special training \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you taken any training under the G.I. Bill of Rights? \_\_\_\_\_ If yes, what training did you take?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**PERSONAL REFERENCES**

(Not former employers or relatives)

<b>NAME</b>	1.	2.
<b>ADDRESS</b>		
<b>OCCUPATION</b>		
<b>PHONE NO.</b>		

What other statements would you care to make regarding your qualifications for the position you seek, or other training experiences, or abilities you have that you feel would contribute to your working expertise?

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**STATEMENT OF APPLICANT**

"I hereby affirm that this application contains no willful misrepresentations or falsifications and that information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at anytime disclose any such misrepresentation or falsifications, I shall be subject to dismissal."

"I hereby authorize the State of West Virginia to make an investigation of my past employments and all of the facts stated on this application for employment. I release from all liability or responsibility all persons, places of business, schools and municipalities supplying such information."

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DATE

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SIGNATURE OF APPLICANT