

NAME: _____
(LAST) (FIRST) (MIDDLE)

POSITION APPLYING FOR: _____
Full Time _____ Part Time _____ Volunteer _____
Date of Application _____

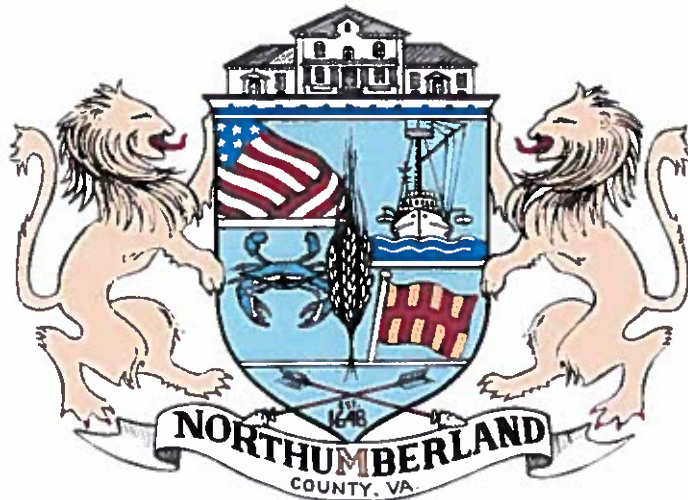
APPLICATION FOR EMPLOYMENT

Northumberland County Sheriff's Office

P.O. Box 310, Heathsville, Virginia 22473 * 195 Judicial Place
(804) 580-5221

www.northumberlandsheriff.net

AN EQUAL OPPORTUNITY EMPLOYER



**PLEASE READ THESE INSTRUCTIONS
BEFORE YOU COMPLETE YOUR APPLICATION**

Applications are only accepted for jobs which are currently open.
BE SURE TO LIST THE TITLE OF THE JOB FOR WHICH YOU ARE APPLYING.

Complete the entire application. Incomplete applications WILL NOT be considered.

**Mail or bring your application to the Northumberland County Sheriff's Office:
P.O. Box 310, 76 Judicial Place, Heathsville, Virginia 22473**

1.

PRINT NAME _____
(LAST) (FIRST) (MIDDLE)

2. ADDRESS _____

CITY _____ STATE _____ ZIP _____

3. PHONE Home (____) _____ Work (____) _____

4. EMAIL _____ SS# _____

5. Are you legally eligible to work in the U.S.? Yes No Are you a veteran? Yes No

6. Do you have a valid driver's license? Yes No Commercial Drivers License? Yes No

Expiration date: _____ Driver's License Number: _____

7. Have you previously filed an application with the Northumberland County? Yes No

If "YES" give position applied for and date. _____

8. EDUCATION: Name and location of high school attended: _____

Did you graduate? Yes No If not, have you passed a G.E.D. test? Yes No

	School & Location	From	To	Date Graduated	Degree	Major Area of Study
College Or University						
Other Education						

9. SPECIAL QUALIFICATIONS AND SKILLS: (typing, shorthand, foreign language, professional licenses and certificates, publications, scholastic honors, etc.)

-
10. **EXPERIENCE:** Start with your present job and work back, include military and volunteer experience. Additional experience should be listed by attaching separate sheets of paper or a personal resume. Be sure to include all requested information.

Present Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

Employer _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Present Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

11. Have you ever been dismissed or forced to resign a position? Yes No
12. Have you ever been convicted of any offense against the law? Omit juvenile offenses and minor traffic violations. Include convictions by general court martial while in the military service Yes No

If "YES", give date, place, charge, court, and fine or sentence. _____

(A conviction does not automatically mean that you cannot be employed. What you were convicted of and how long ago are important. Give all the facts so that a decision can be made.)

13. How did you learn about the job for which you are applying? _____

14. May we conduct a background check of your qualifications, character and record of employment? Yes No

If "NO", please explain. _____

ATTENTION: THIS STATEMENT MUST BE SIGNED.

I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge, and that misrepresentation or omissions may result in rejection of my application, permanent ineligibility for appointments or dismissal.

Signature of Applicant

Date

Northumberland County Sheriff's Office

VOLUNTARY INFORMATION FOR REPORTING PURPOSES ONLY

This form WILL NOT become part of your application for employment. The information collected will be used to comply with the Federal Equal Employment Opportunity Commission (EEOC) reporting requirements. We ask your cooperation in providing us with the following information. Thank you.

(Please print in ink or type)

APPLICANT INFORMATION

1. PRINT NAME _____
(Last) (First) (Middle)
2. SOCIAL SECURITY NUMBER _____ 3. DATE OF BIRTH _____
4. POSITION APPLIED FOR _____ 5. DATE APPLIED _____
6. DISABLED (Please check if appropriate)
- Sight Hearing Speech Mobility _____
- Other _____
7. SEX AND ETHNIC ORIGIN Male Female
- White Black or African American
- Native Hawaiian or other Pacific Islander Asian
- American Indian or Alaskan Two or more Races
8. Veteran Yes No
-

REFERRAL SOURCE

- Walk-in Internet site: _____
- Employee Employment Agency
- Department Website Advertisement: _____
Source
- Other _____

Name of person who referred you (if applicable) _____

FOR ADMINISTRATIVE USE ONLY

Position(s) applied for Available Not Available

Other position considered for _____

Hired Yes No

Position Hired for _____

From the EEO job classification listed below, which one best describes the position filled.

- | | |
|--|---|
| <input type="checkbox"/> Executive/Senior Level Officials and Managers | <input type="checkbox"/> Sales Workers |
| <input type="checkbox"/> First/Mid Level Officials and Managers | <input type="checkbox"/> Administrative Support Workers |
| <input type="checkbox"/> Professionals | <input type="checkbox"/> Craft Workers |
| <input type="checkbox"/> Technicians | <input type="checkbox"/> Operatives |
| <input type="checkbox"/> Laborers and Helpers | <input type="checkbox"/> Service Workers |

The Federal Equal Employment Opportunity Commission defines ethnic origin as follows:

“HISPANIC OR LATINO”-A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

“WHITE” (Not Hispanic or Latino)-A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

“BLACK OR AFRICAN AMERICAN” (Not Hispanic or Latino)-A person having origins in any of the black racial groups of Africa.

“NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER” (Not Hispanic or Latino)-A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Island.

“ASIAN” (Not Hispanic or Latino)-A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

“AMERICAN INDIAN OR ALASKA NATIVE” (Not Hispanic or Latino)-A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

AGREEMENT

I CERTIFY THAT ALL ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE THE NORTHUMBERLAND COUNTY SHERIFF'S OFFICE TO MAKE SUCH INVESTIGATIONS AND INQUIRIES OF MY CRIMINAL HISTORY, PERSONAL REFERENCES, PREVIOUS EMPLOYERS, MEDICAL HISTORY AND OTHER LEGALLY RELATED MATTERS AS MY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. I HEREBY RELEASE EMPLOYERS, SCHOOLS, OR OTHER PERSONS FROM ALL LIABILITY IN RESPONDING TO INQUIRIES IN CONNECTION WITH MY APPLICATION.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN ON MY APPLICATION, OTHER EMPLOYMENT FORMS OR THE INTERVIEW(S) MAY RESULT IN DISCHARGE.

I ()do () do not request a reasonable accommodation to be made for me to perform the interview/testing or the essential job functions required for the position I am applying for.

APPLICANT SIGNATURE _____

Must be signed in the presence of a notary

DATE _____

COMMONWEALTH OF VIRGINIA, CITY/COUNTY OF _____

TO WIT, THIS DAY _____, PERSONALLY APPEARED BEFORE ME IN THE COUNTY AFORESAID AND SIGN THE ABOVE DOCUMENT ACKNOWLEDGED AND SWORN BEFORE ME THIS _____ DAY OF _____ 20____. MY COMMISSION EXPIRES ON THE _____ DAY OF _____ 20____.

Signature of Notary Public

THE NORTHUMBERLAND COUNTY SHERIFF'S OFFICE
IS AN EQUAL OPPORTUNITY EMPLOYER
P. O. BOX 310
HEATHSVILLE, VA 22473
804-580-5221