

POSITION APPLIED FOR: \_\_\_\_\_

DEADLINE: \_\_\_\_\_

FT  PT As Posted

(One per application)

Application Date: \_\_\_\_\_



**APPLICATION FOR EMPLOYMENT  
WESTERN VIRGINIA REGIONAL JAIL**

5885 West River Road  
Salem, Virginia 24153  
(540) 380-3023 FAX (540) 380-3143

To Applicant: Employees of the Western Virginia Regional Jail and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.

Name: \_\_\_\_\_  
Last First Middle

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

Present Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

No. Street E-mail: \_\_\_\_\_

City State Zip Code

**EDUCATION/QUALIFICATIONS**

Please check highest grade completed 1 2 3 4 5 6 7 8 9 10 11 12

High School Diploma?  Yes  No State of Issue \_\_\_\_\_

High School Equivalency Diploma?  Yes  No Date received \_\_\_\_\_ State of Issue \_\_\_\_\_

Please check number of years of post-high school education 1 2 3 4 5 6 7

Name & Location of Institution	Degree Received	Major or Specialty	Minor	Dates Attended
1.				
2.				
3.				

**ADDITIONAL TRAINING** (Includes business, trade, armed services, correspondence or night school.)

Name of School	Subject	Duration of Course	Did you Finish?	Certificate Awarded?
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

**ADDITIONAL QUALIFICATIONS** - Please describe any additional skills or qualifications that are relevant to the position for which you are applying, including any certifications:

Do you have a valid driver's license <input type="checkbox"/> Yes <input type="checkbox"/> No		State of Issue _____
Do you have a valid Commercial Driver's License <input type="checkbox"/> Yes <input type="checkbox"/> No		State of Issue _____
List Class	List endorsements, if any	

## EXPERIENCE

Starting with the most recent, describe all paid, military and applicable voluntary experience. Highlight the knowledge, skills and abilities that demonstrate your qualifications for this position. Use additional attachments if necessary.

<b>A</b>	<b>Job Title</b> _____	<b>Duties:</b> _____
	Employer _____	_____
	Address _____	_____
	_____	_____
	Phone _____	_____
	Type of Business _____	_____
	Immediate Supervisor _____	Number employees supervised _____
	Title _____	Equipment used _____
	Salary (Start) _____ Salary (Final) _____	Reason for Leaving _____
Dates (mm/yy) _____ To (mm/yy) _____	Name, if different: _____	

<b>B</b>	<b>Job Title</b> _____	<b>Duties:</b> _____
	Employer _____	_____
	Address _____	_____
	_____	_____
	Phone _____	_____
	Type of Business _____	_____
	Immediate Supervisor _____	Number employees supervised _____
	Title _____	Equipment used _____
	Salary (Start) _____ Salary (Final) _____	Reason for Leaving _____
Dates (mm/yy) _____ To (mm/yy) _____	Name, if different: _____	

<b>C</b>	<b>Job Title</b> _____	<b>Duties:</b> _____
	Employer _____	_____
	Address _____	_____
	_____	_____
	Phone _____	_____
	Type of Business _____	_____
	Immediate Supervisor _____	Number employees supervised _____
	Title _____	Equipment used _____
	Salary (Start) _____ Salary (Final) _____	Reason for Leaving _____
Dates (mm/yy) _____ To (mm/yy) _____	Name, if different: _____	

<b>D</b>	<b>Job Title</b> _____	<b>Duties:</b> _____
	Employer _____	_____
	Address _____	_____
	_____	_____
	Phone _____	_____
	Type of Business _____	_____
	Immediate Supervisor _____	Number employees supervised _____
	Title _____	Equipment used _____
	Salary (Start) _____ Salary (Final) _____	Reason for Leaving _____
Dates (mm/yy) _____ To (mm/yy) _____	Name, if different: _____	

<b>E</b>	<b>Job Title</b> _____	<b>Duties:</b> _____
	Employer _____	_____
	Address _____	_____
	_____	_____
	Phone _____	_____
	Type of Business _____	_____
	Immediate Supervisor _____	Number employees supervised _____
	Title _____	Equipment used _____
	Salary (Start) _____ Salary (Final) _____	Reason for Leaving _____
	Dates (mm/yy) _____ To (mm/yy) _____	Name, if different: _____

May we contact the employers listed above?  Yes  No

If No, please indicate by letter/number which one(s) you do not wish us to contact: \_\_\_\_\_

## REFERENCES

List three persons who are not related to you who know your qualifications or your character.

Name	Address	Phone	Relationship	Occupation

## MISCELLANEOUS

Other than violations committed as a juvenile (under 18 years of age), have you ever been convicted of any violation(s) of the law?  Yes  No

Please note the type of violation(s):  Felony  Misdemeanor  Traffic (moving) violation - excluding minor traffic violations

Description of offense(s): \_\_\_\_\_

Date of charge(s): \_\_\_\_\_ Date of Conviction(s): \_\_\_\_\_ County, City, State of Conviction(s): \_\_\_\_\_

*If more than one offense, please include additional information on an attached plain sheet of paper.*

For purposes of compliance with the Immigration Reform and Control Act, are you legally eligible for employment in the United States?  Yes  No

*Under the Immigration Reform and Control Act of 1986, upon employment, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. In addition, you will be required to provide documentation to that effect.*

Were you previously employed by WVRJ?  Yes  No If Yes, When \_\_\_\_\_

What date will you be available for work? \_\_\_\_\_

## CERTIFICATION

**I certify that all information provided on this application is true, accurate and complete. I understand that the falsification, misrepresentation or omission of facts on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.**

I understand that all information on this application is subject to verification and I consent to criminal history and driving record background checks, if applicable. I further understand that I may have to pass a physical examination as a condition of my employment and that I may be required to provide a copy of my driving record. You are authorized to execute an affidavit for release of information from references, former employers and educational institutions regarding this application. I hereby release the Western Virginia Regional Jail from any/all liability of whatever kind and nature resulting from obtaining and having an employment decision based on such information.

I acknowledge that I have read and understand the above statements and by submission of this application hereby grant permission to confirm the information supplied on this application.

\_\_\_\_\_  
Date

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



**CONFIDENTIAL INFORMATION**

**WESTERN VIRGINIA REGIONAL JAIL**

Western Virginia Regional Jail monitors its advertising sources to ensure our employment opportunities are posted with sources utilized most often by prospective applicants. Please tell us how you heard about this employment opportunity.

Position Applied For: \_\_\_\_\_ Date: \_\_\_\_\_

- Full-Time  Part-Time

How did you find out about this employment opportunity?

- Internet  Employment Agency (please specify): \_\_\_\_\_
- WVRJ Website  Other Source (please specify): \_\_\_\_\_
- Other (please specify): \_\_\_\_\_
- Newspaper (please specify): \_\_\_\_\_
- Employee Referral  Previous Employment
- Radio  VEC – (VA Employment Commission)

**EQUAL EMPLOYMENT OPPORTUNITY DATA**

Western Virginia Regional Jail has an Affirmative Action Program to ensure equal employment opportunity in its hiring practices. We are asking you to help us monitor the effectiveness of our program by completing the affirmative action information below. The completion of this form is voluntary and the information will not be used for employment purposes. Your responses will be used for statistical purposes only and will be kept in a confidential file, separate from the employment application.

Federal law prohibits unlawful discrimination on the basis of race, color, sex, age, national origin, religion, or disability. As a local government employer, Roanoke County complies with government and equal employment regulations.

- I agree to provide Equal Employment Opportunity information
- I do not agree to provide Equal Employment Opportunity information

Please check the appropriate block:  Male  Female Date of Birth: \_\_\_\_\_

Please check one of the following:

- Race/Ethnic Group  White (Not Hispanic or Latino)
- Black or African American (Not Hispanic or Latino)
- Hispanic or Latino
- Asian (Not Hispanic or Latino)
- American Indian or Alaskan Native (Not Hispanic or Latino)
- Native Hawaiian or Pacific Islander (Not Hispanic or Latino)
- Two or more races (Not Hispanic or Latino)

Please check the block for the highest level of education you have completed (check only one)

- Less than 8th grade  College graduate
- Completed 8th grade  Attended graduate school
- Attended high school  Master's degree
- High school graduate or equivalent  Graduate study beyond master's requirements
- Attended college  Ph.D. or professional degree

Please check if applicable  Veteran

**THE WESTERN VIRGINIA REGIONAL JAIL IS AN EQUAL OPPORTUNITY EMPLOYER**