

Preston County Civil Service Commission for Deputy Sheriffs

Application for testing for the position of a Preston County West Virginia Deputy Sheriff

To all applicants:

Completion of this application registers you for the next provided written and physical examination only. You will be notified by mail when the next test is given. You are required to fill out an application each time a new test is announced, if you want to be re-tested. There are many requirements and steps between this application and consideration by the Sheriff for appointment as a Deputy Sheriff.

All requirements and criteria for eligibility are listed in the Preston County Civil Service Commission for Deputy Sheriffs Policy on Certification of Eligibles. This document is available to the public for viewing at the office of the County Clerk in the Courthouse on Main Street in Kingwood, West Virginia.

By completing and signing this application, you agree to an investigation into your personal, educational, and work/employment background along with a physical health examination. All questions asked in this application and any investigations and examinations into your background and/or health will be limited to issues pertaining to employment in the Preston County Sheriff's Office; the requirements for fulfilling the tasks defined in Title 149, Legislative Rule, Governor's Committee on Crime, Delinquency and Corrections, Series 2, Law Enforcement Training Standards, 149-2-7, Academy Entry Standards; and the state and federal requirements for possessing and carrying a firearm.

The completed application must be hand-delivered, mailed, or faxed to the County Clerk of Preston County. Mail to County Clerk of Preston County 106 West Main Street Kingwood, WV 26537. Fax number for the Clerk is 304-329-0198. E-mailed applications will not be accepted, as a written signature is required.

PLEASE PRINT OR TYPE YOUR RESPONSES TO THIS APPLICATION.

Last Name _____ First Name _____ Middle (Full) _____
Permanent Address _____
Town/City _____ County _____ State _____ Zip _____
Social Security Number _____ Drivers License _____ State _____
Date of Birth (Required by 7-14-8) _____ Telephone (Home) _____ Other Phone _____
E-mail _____

If there is another address where you receive mail, you may enter it below:

Other Address _____
Town/City _____ County _____ State _____ Zip _____

How long at current address? _____ Years _____ months. Own/Rent _____
(If less than 3 years, list previous address) _____
City _____ County _____ State _____ Zip _____

Military Service Branch _____ Served from _____ (month/Yr) to _____ (Month/Yr)
Specialized Military Training _____

NOTE: A bonus of (5) points on the written examination will be given to persons honorably discharged with at least one (1) year of military experience. A DD-214 must be provided the day of the testing. Persons currently serving in the military will also be award five (5) points with current proof of their service, to be provided the day of the testing.

What is highest level of education you have completed?

____ Elementary/High School (____ Highest Grade Completed) ____ High School Diploma
____ High School Equivalency
____ Years of Post-High School Education (Non-College or Technical)
____ Years of College (No Degree) ____ Associate Degree
____ Bachelors Degree (____ Field of Study)
____ Years of Post Bachelors College (____ Field of Study)

Other specialized training or certifications: _____

Awards and Honors: _____

Employment History (for last 10 years, starting with most recent)

| <u>(m/Yr)</u> | <u>Company</u> | <u>Address</u> | <u>Job Title</u> | <u>Dates</u> |
|---------------|----------------|----------------|------------------|--------------|
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NOTE: A bonus of (5) points on the written examination will be given to persons with an active West Virginia Police Officers Certification. This documentation must be provided the day of the testing.

Volunteer Work. *Please list any job-related organizations, clubs, professional societies, or other associations to which you belong.*

| <u>Organization</u> | <u>Jobs done &/or Offices Held</u> | <u>Dates (M/Yr)</u> |
|---------------------|--|---------------------|
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Have you ever served as a Preston County Deputy Sheriff? ____ If so, effective date of resignation. _____
Did you resign at a time when there were no charges of misconduct or malfeasance pending against you? _____

Have you ever been convicted of a felony? ____ Yes ____ No

Within the last five (5) years, have you been convicted of any misdemeanors? ____ Yes ____ No

Within the last five (5) years, have you been arrested or ticketed for any traffic violations? ____ Yes ____ No

Are you on Probation or Parole for any violation? ____ Yes ____ No

Are you prohibited from possessing or carrying a firearm for any reason? ____ Yes ____ No

Are you addicted to any controlled substance or to alcohol? ____ Yes ____ No

Do you have any criminal charges pending against you at this time? ____ Yes ____ No

Have you ever been convicted of a criminal charge for domestic violence? ____ Yes ____ No

Are you currently under a family protective order from any court? ____ Yes ____ No

Are you physically and mentally competent to carry and use a firearm? ____ Yes ____ No

Has any court declared you to be mentally incompetent? ____ Yes ____ No

Do you have physical or mental condition or moral conviction, which would prevent you from arresting persons? ____ Yes ____ No

- Do you have physical or mental condition or moral conviction, which would prevent you from stopping & physically searching persons? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from operating a motor vehicle? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from physically touching, examining or searching a dead body? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from using physical force to restrain a person? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from using weapons to assist in restraining a person? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from catching a falling person? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from discharging a firearm at a person or animal in a deadly force situation? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from securing a firearm in your personal residence? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from performing first aid to a bleeding or severely injured person? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from talking to a person attempting suicide? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from placing children in protective custody? _____ Yes _____ No
- Do you have physical or mental condition or moral conviction, which would prevent you from conducting investigations of any and all crimes? _____ Yes _____ No
- Do you have a certificate of training in the use of firearms? _____ Yes _____ No
- Are you a member of any organization which advocates overthrowing the United States Government by violence means? _____ Yes _____ No

Personal References other than previous employers and relatives:

| Name | Address | Phone |
|------|---------|-------|
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Applicants Acknowledgement

I certify answers given in this application are true and correct to the best of my knowledge. I authorize all necessary investigation into all statements I have made on this application in reaching an employment decision.

As a condition of my employment, I accept the principle that the welfare of the organization depends upon the conduct and honesty of its' employees and the trust and confidence of our customers and the public in general. The organization expects honesty, security, and confidentiality. I therefore agree to the following:

In the event I am employed, I understand that any false or misleading information I knowingly provided in my application or interview(s) may result in discharge and/or legal action. I understand also that if employed, I am required to abide by all the rules and regulations of the employer and any special agreements reached by the employer and me.

Signature of Applicant

Date

Application Form adopted by the Civil Service Commission on the 17th Day of May 2007, revised on the 12th day of April, 2010; Mack Dennis, president.