

LINCOLN COUNTY SHERIFF'S OFFICE
 P.O. BOX 467/8000 COURT AVE
 HAMLIN WV 25523
 304-824-7990 EXT.:227

EMPLOYMENT APPLICATION

PERSONAL

NAME _____
 (LAST) (FIRST) (MIDDLE)

ADDRESS _____
 (STREET) (CITY) (STATE) (ZIP CODE)

TELEPHONE _____ SOCIAL SECURITY NUMBER _____
 (AREA CODE)

DRIVER'S LICENCE NUMBER _____ STATE _____ EXP. DATE _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO
 EXPLAIN FELONY _____

ARE YOU A CITIZEN OF THE UNITES STATES? YES NO

JOB INTERESTS/SKILLS

POSITION(S) APPLIED FOR _____ SALARY DESIRED _____

HAVE YOU APPLIED HERE BEFORE? YES NO IF YES WHEN? _____

TYPE OF EMPLOYMENT REQUESTED FULL TIME PART TIME TEMPORARY SUMMER

DATE YOU COULD BEGIN WORKING _____ TYPING SPEED(WPM) _____

SUMMARIZE ANY OTHER SPECIAL SKILLS OR QUALIFICATIONS _____

EDUCATION

| TYPE OF SCHOOL | NAME AND LOCATION | COURSE OF STUDY | #OF YEARS | GRADE AVERAGE | MAXIUM GRADE | DEGREE, DIPLOMA, CERTIFICATE AND HONORS RECEIVED |
|-----------------------|-------------------|-----------------|-----------|---------------|--------------|--|
| HIGH SCHOOL | | | | | | |
| COLLEGE OR UNIVERSITY | | | | | | |
| OTHER EDUCATION | | | | | | |
| OTHER EDUCATION | | | | | | |

EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)

1. NAME OF EMPLOYER _____

ADDRESS _____
 (STREET) (CITY) (STATE) (ZIP CODE)

SUPERVISOR AND TITLE _____ YOUR TITLE _____

EMPLOYED FROM _____ TO _____ STARTING SALARY _____ ENDING SALARY _____

WORK PERFORMED _____

REASON FOR LEAVING _____

2. NAME OF EMPLOYER _____

ADDRESS _____
 (STREET) (CITY) (STATE) (ZIP CODE)

SUPERVISOR AND TITLE _____ YOUR TITLE _____

EMPLOYED FROM _____ TO _____ STARTING SALARY _____ ENDING SALARY _____

WORK PERFORMED _____

REASON FOR LEAVING _____

3. NAME OF EMPLOYER _____

ADDRESS _____
 (STREET) (CITY) (STATE) (ZIP CODE)

SUPERVISOR AND TITLE _____ YOUR TITLE _____

EMPLOYED FROM _____ TO _____ STARTING SALARY _____ ENDING SALARY _____

WORK PERFORMED _____

REASON FOR LEAVING _____

REFERENCES

| NAME | RELATIONSHIP | HOME PHONE | DAYTIME PHONE |
|------|--------------|------------|---------------|
| | | () | () |
| | | () | () |
| | | () | () |

MILITARY HISTORY

HAVE YOU EVER SERVED INT THE MILITARY? YES _____ NO _____

IF YES WHAT BRANCH? _____

ENLISTMENT DATE: _____

WERE YOU HONORABLY DISCHARGED? YES _____ NO _____

IF NO, PLEASE EXPLAIN: _____

(PLEASE ATTACH A COPY OF YOUR DISCHARGE FORMS)

APPLICANT'S STATEMENT

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

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. I UNDERSTAND THAT THIS APPLICATION IS NOT AND IS NOT INTENDED TO BE A CONTRACT OF EMPLOYMENT.

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

SIGNATURE OF APPLICANT

DATE

PLEASE PROVIDE A LEGIBLE COPY OF YOUR BIRTH CERTIFICATE, SOCIAL SECURITY CARD, DRIVER'S LICENSE AND DIPLOMA WITH THIS APPLICATION