

# Middle Peninsula Juvenile Detention Commission

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Web Address: [www.merrimac-center.net](http://www.merrimac-center.net)

# Merrimac Center

## Application for Employment

Position Applying for: \_\_\_\_\_ How did you find out about our facility? \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Other Contact Number: \_\_\_\_\_

Do you have a valid Virginia driver's license? \_\_\_\_\_ Are you over the age of 18? \_\_\_\_\_ Are You a United States citizen? \_\_\_\_\_

Are you legally eligible to work in the United States? \_\_\_\_\_ You are legally eligible for employment if you are a United States citizen. If you are not a citizen, you are legally eligible for employment if you have completed Form 1-151 or Form 1-551 (Alien Registration Receipt Card), or Form 1-94 with the appropriate class designation endorsed by the U.S. Immigration and Naturalization Service showing that you have been authorized to accept employment. If you are not a U.S. citizen, please state which numbered form you have completed \_\_\_\_\_. (Form or proof of citizenship is required prior to employment.)

Do you have any relatives employed by this Commission? \_\_\_\_\_ If yes, give name(s) and relationship(s): \_\_\_\_\_

Have you ever been convicted of any offense against the law including moving traffic violations? \_\_\_\_\_  
If you answered **yes to the question above**, list offense(s), date(s), location of court(s) proceeding(s) and sentence(s). A conviction does not automatically remove you from consideration for employment. \_\_\_\_\_

Availability: \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ On Call (As Needed) \_\_\_\_\_ Evenings \_\_\_\_\_ Nights \_\_\_\_\_ Weekends

### Educational Background

High School Diploma or Equivalency Certificate (GED) Yes \_\_\_\_\_ No \_\_\_\_\_ If no, highest grade completed \_\_\_\_\_

If yes, name and location of school \_\_\_\_\_

Name and location of College/University \_\_\_\_\_

Dates Attended \_\_\_\_\_ Credits Earned \_\_\_\_\_ Type of Degree Received \_\_\_\_\_ Date Received \_\_\_\_\_

Name and location of College/University \_\_\_\_\_

Dates Attended \_\_\_\_\_ Credits Earned \_\_\_\_\_ Type of Degree Received \_\_\_\_\_ Date Received \_\_\_\_\_

Name and location of College/University \_\_\_\_\_

Dates Attended \_\_\_\_\_ Credits Earned \_\_\_\_\_ Type of Degree Received \_\_\_\_\_ Date Received \_\_\_\_\_

Describe any job related courses or training you have completed \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Employment History-----

Give a complete record of your employment history, including part-time, military service and volunteer work. **List all experience in order, starting with your present or most recent position.** Describe your duties and responsibilities in each position. Account for all periods of unemployment. Attach additional sheets if necessary. Resumes may be attached, **however, the application must be completed in full.** **MAY WE CONTACT YOUR PRESENT EMPLOYER FOR A REFERENCE? Yes \_\_\_ No \_\_\_**

## 1. Date of Employment

### Job Responsibilities/Description of Duties

From _____ To _____	
Job Title _____	
Employer _____	
Address _____	
Supervisor _____	
Telephone _____	
Hours worked per week _____	
Starting Salary _____ per _____	<b>Reason For Leaving</b>
Ending Salary _____ per _____	

## 2. Date of Employment

### Job Responsibilities/Description of Duties

From _____ To _____	
Job Title _____	
Employer _____	
Address _____	
Supervisor _____	
Telephone _____	
Hours worked per week _____	
Starting Salary _____ per _____	<b>Reason For Leaving</b>
Ending Salary _____ per _____	

## 3. Date of Employment

### Job Responsibilities/Description of Duties

From _____ To _____	
Job Title _____	
Employer _____	
Address _____	
Supervisor _____	
Telephone _____	
Hours worked per week _____	
Starting Salary _____ per _____	<b>Reason For Leaving</b>
Ending Salary _____ per _____	

# Employment History Continued-----

## 4. Date of Employment

## Job Responsibilities/Description of Duties

From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Supervisor \_\_\_\_\_

Telephone \_\_\_\_\_

Hours worked per week \_\_\_\_\_

Starting Salary \_\_\_\_\_ per \_\_\_\_\_

Ending Salary \_\_\_\_\_ per \_\_\_\_\_

**Reason For Leaving**

## 5. Date of Employment

## Job Responsibilities/Description of Duties

From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Supervisor \_\_\_\_\_

Telephone \_\_\_\_\_

Hours worked per week \_\_\_\_\_

Starting Salary \_\_\_\_\_ per \_\_\_\_\_

Ending Salary \_\_\_\_\_ per \_\_\_\_\_

**Reason For Leaving**

## 6. Date of Employment

## Job Responsibilities/Description of Duties

From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Supervisor \_\_\_\_\_

Telephone \_\_\_\_\_

Hours worked per week \_\_\_\_\_

Starting Salary \_\_\_\_\_ per \_\_\_\_\_

Ending Salary \_\_\_\_\_ per \_\_\_\_\_

**Reason For Leaving**

**REFERENCES-----**

Provide the names of three individuals, not related to you, in addition to the supervisors listed on the application, who can provide information regarding your ability to perform this job.

Name	Relationship	Address	Telephone Number

**PRIVACY ACT NOTICE FOR EMPLOYMENT FORMS-----**

**NOTICE TO APPLICANTS:**

*This information is provided pursuant to the Privacy Act of 1976 for individuals supplying information for inclusion in a system of records.*

**POLICY:**

*The policy of the Middle Peninsula Juvenile Detention Commission is to collect, maintain, use and disseminate only the personal information required by law to accomplish a proper purpose.*

**PURPOSE, USE, ACCESS AND DISSEMINATION:**

*Information furnished will be used primarily by Middle Peninsula Juvenile Detention Commission to determine qualifications for employment, eligibility for transfer, reinstatement, promotion, and/or demotion. All or part of this information may be furnished to others as indicated below;*

1. Representatives from County agencies, if required to determine employment suitability.
2. Federal, state and local agencies in which you have an interest as a potential employee.
3. Federal, state and local agencies to create personnel files following your employment with Middle Peninsula Juvenile Detention Commission.
4. Representatives of federal, state and local agencies engaged in investigating violations of the law.
5. Individuals or agencies requesting statistical data exclusive of personal identification.
6. Requesting agencies possessing your voluntary release of information and assuming confidential protection of information released.

**EFFECTS OF NONDISCLOSURE:**

***It is in your best interest to answer all questions. Failure to complete the form may jeopardize your opportunity for employment .***

**CERTIFICATION AGREEMENT-----**

1. I have read and understand the attached Privacy Act Notice for Employment Forms.
2. I certify that this application is a complete record and that all entries and attachments are true and accurate to the best of my knowledge.
3. I authorize:
  - \* Middle Peninsula Juvenile Detention Commission to conduct a thorough background investigation, except as it applies to race, national origin, sex, age, or other non job-related criteria to be used relative to my employment with the Commission. This investigation may include driving record checks and results of drug and alcohol tests conducted by previous employer(s); and,
  - \* My former employers and those listed as references to provide any job related information they have about me, including results of drug and alcohol tests, and I release all concerned from any liability in connection with the release of this information.
4. I understand that:
  - \* False or incomplete statements made on the application are grounds for disqualification from employment;
  - \* I may be required to take a post offer medical exam given at the Commission's expense, and that my employment may be dependent on the results of that exam.
  - \* If I am an applicant for a position that requires use of a respirator, is physically demanding or defined as safety sensitive, my post medical exam and subsequent periodic medical exams as specified, may include drug and alcohol screening ; and;
  - \* Any employment is conditioned upon successful completion of a probationary period and that the Middle Peninsula Juvenile Detention Commission employs me "at will" and is not committed to any specific term of employment. This "at will" employment relationship may not be changed by any written document or by contract unless such a change is specifically acknowledged by an authorized executive of this Commission.

Signature \_\_\_\_\_ Date \_\_\_\_\_