Middle Peninsula Juvenile Detention Commission

Merrimac Center 9300 Merrimac Trail Williamsburg, VA 23185 P: 757-887-0225 ... F: 757-887-0340 Application for Employment



Position Applying for: How did you hear about us?

Applicant Information Full Name: Date: Last First Middle Address: Street Address Apartment/Unit # ZIP Code City State Phone: Cell Phone: Email: YES NO YES NO Are you over the age of 18? Do you have a valid Virginia driver's license? YES NO YES NO Are you a citizen of the United States? ** If no, are you authorized to work in the U.S.? **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-Form 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 Number authorized to accept employment. If you are not a U.S. citizen, please state which numbered form you have completed. Form/proof of citizenship is required prior to employment YES NO Have you previously applied for a position with this commission? If yes, when? \square YES NO Do you have any relatives employed by this commission? Name/Relationship: YES NO YRS. Are you currently a member of the Virginia Retirement System (VRS)? If yes, for how many years? YES NO Have you ever been charged or convicted of a criminal offense? If yes, 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: YES NO Have you had, or do you currently have, a pending or founded CPS complaint against you? П If yes, provide details:

Education								
High School:		Address:						
From:	То:	Did you graduate?	YES	NO	Diploma/ GED:			
College:		Address:						
From:	То:	Did you graduate?	YES	NO	Degree:			
Other:		Address:						
From:	To:	Did you graduate?	YES	NO	Degree:			

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References						
Please list 3 individuals, not related to you, <u>in addition to</u> the s		ition, whom can provide information				
regarding your ability to perform the position for which you an						
Full Name:	Kelat	ionship:				
Phone:						
Email:						
Full Name:	Relat	onship:				
Phone:						
Email:						
Full Name:	Relat	ionship:				
Phone:						
Email:						
Mil	itary Service					
Branch:	From:	То:				
Rank at Discharge:	Type of Discharge:					
If other than honorable, explain:						
Previo	us Employment					
Company:		Phone:				
Address:		Supervisor:				
Job Title: Starting	g Salary: \$	Ending Salary: \$				
Responsibilities:		_				
From: To:	Reason for Leaving:					
May we contact your current supervisor for a reference?	YES NO					
Company:		Phone:				
Address:		Supervisor:				
Job Title: Starting	Starting Salary: <u>\$</u>					
Responsibilities:						
From: To:	Reason for Leaving:					

Merrimac Center Employment Application Previous Employment (continued)

Company:			Phone:			
Address:			Supervisor:			
Job Title:		Starting Salary: \$	Ending Salary: \$			
Responsibilities:						
From:	То:	Reason for Leaving:				
Company:			Phone:			
Address:			Supervisor:			
Job Title:		Starting Salary: \$	Ending Salary: \$			
Responsibilities:						
	То:	Reason for Leaving:				
Company:			Phone:			
Address:			Supervisor:			
Job Title:		Starting Salary: \$	Ending Salary: \$			
Responsibilities:						
From:	То:	Reason for Leaving:				
Company:			Phone:			
Address:			Supervisor:			
Job Title:		Starting Salary: \$	Ending Salary: \$			
Responsibilities:						
From:	То:	Reason for Leaving:				

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Disclaimer and Signature

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.

EFFECTS OF NONDISCLOSURE

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 and national origin. This investigation may include: 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/supervisors 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:

**By signing your name electronically on this application, you are agreeing that your electronic signature is the legal equivalent of your manual signature