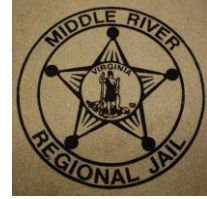


MIDDLE RIVER REGIONAL JAIL
350 TECHNOLOGY DRIVE
STAUNTON, VIRGINIA 24402
PHONE: (540)245-5420 FAX: (540) 245-5232



Dear Applicant:

Thank you for your interest in a position with the Middle River Regional Jail. Your application will remain in our active files for one year. If you are interested in any additional positions that become available, contact our Administrative Offices and request your application be considered for that position.

Please complete the Personal History Statement included and attach all requested documents. Virginia State Law requires these documents--they **must** be provided before your application can be processed further. The cover sheet gives specific information on how to fill out the personal history forms. All paperwork must be filled out and returned.

To have an application considered, the following documents **must** be submitted:

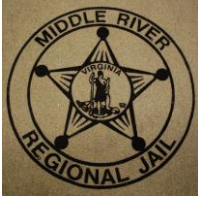
- 1.) A complete and signed application
- 2.) Copy of Birth Certificate, High School Diploma and/or copies of college transcripts (if applicable), Social Security Card, Driver's License and Military Discharge (DD214).

Included with this letter are a Middle River Regional Jail application and a description of the selection process. Should you have any questions, please feel free to call our Administrative Offices at (540) 245-5420 extension 1156.

Good luck in your search for a position!

Sincerely,

Major Eric Young



MIDDLE RIVER REGIONAL JAIL
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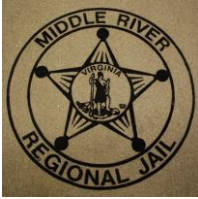


							CURRENT PHONE NUMBER:					
LAST NAME			FIRST NAME			MIDDLE NAME		ALL OTHER MAIDEN NAMES BY FORMER MARRIAGES				
MONTH		DATE OF BIRTH DAY		YEAR		PLACE OF BIRTH (CITY-TOWN-COUNTY)			STATE		SOCIAL SECURITY NUMBER	
RACE	SEX	AGE	HEIGHT	WEIGHT	HAIR	EYES	POSITION FOR WHICH YOU ARE BEING RECOMMENDED					
HOME ADDRESS		STREET			CITY-TOWN-COUNTY			STATE	ZIP CODE			
PREVIOUS ADDRESS		STREET			CITY-TOWN-COUNTY			STATE	ZIP CODE			

NOTICE TO APPLICANTS

The Middle River Regional Jail is committed to a drug/alcohol free workplace. As a condition of employment, all candidates are required to be pre-tested for illegal substances prior to employment and will be randomly tested during employment.

Positive results on this pre-employment test will result in the denial of employment with the Middle River Regional Jail.



MIDDLE RIVER REGIONAL JAIL
An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT



Job(s) applied for:

1. _____ **Rate of Pay Expected:** _____ **per** _____
2. _____ **Rate of Pay Expected:** _____ **per** _____

PERSONAL:

Date: _____

Full Legal Name: _____
 (Last Name, First Name, Middle) (Social Security Number)

Present Address: _____
 (No.) (Street) (No Post Office Box)

 (City) (State) (Zip)

How many years at this address? _____ **Phone Number: Area Code ()** _____

Daytime Number: Area Code () _____

VERIFICATION OF ELIGIBILITY TO WORK

The Middle River Regional Jail adheres to the Immigration Reform and Control Act of 1986, which requires new employees to present documentation of citizenship or the authorization to work in the United States. If the Middle River Regional Jail employs you, you will have to present, a social security card and U. S. birth certificate plus a driver's license or other photo identification, i.e. state, federal or military I.D.

For purposes of compliance with Section 40.1-11.1 of the Code of Virginia, entitled "Employment of Illegal Immigrants," please state whether you are legally eligible for employment in the United States: (You are legally eligible for employment if you are a United States citizen or if you have an appropriate permit to work in the United States through the Department of Justice or the United States Department of Labor.)

Yes **No**

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make such investigation and inquiries to my personal references, previous employers, and other legally related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or other persons from all liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given on my application form(s) or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the Middle River Regional Jail

Position Applying For: _____

PERSONAL HISTORY STATEMENT

PERSONAL DATA

NAME (Print): _____ MAIDEN NAME (Print): _____
First, Middle, Last First, Middle, Last

LIST ANY OTHER NAME OR NAMES YOU HAVE USED IF DIFFERENT FROM INDICATED ABOVE (include all nicknames): _____

Have you ever legally changed your name: () Yes () No If Yes,
From: _____ To: _____
Court Jurisdiction: _____ Date: _____

PRESENT PHYSICAL ADDRESS: (NO P.O. BOXES) _____ TELEPHONE NUMBERS:
Home: () _____
Work: () _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____
Month / Day / Year

PLACE OF BIRTH (CITY and STATE) _____ PLACE WHERE YOU GREW UP (CITY and STATE) _____

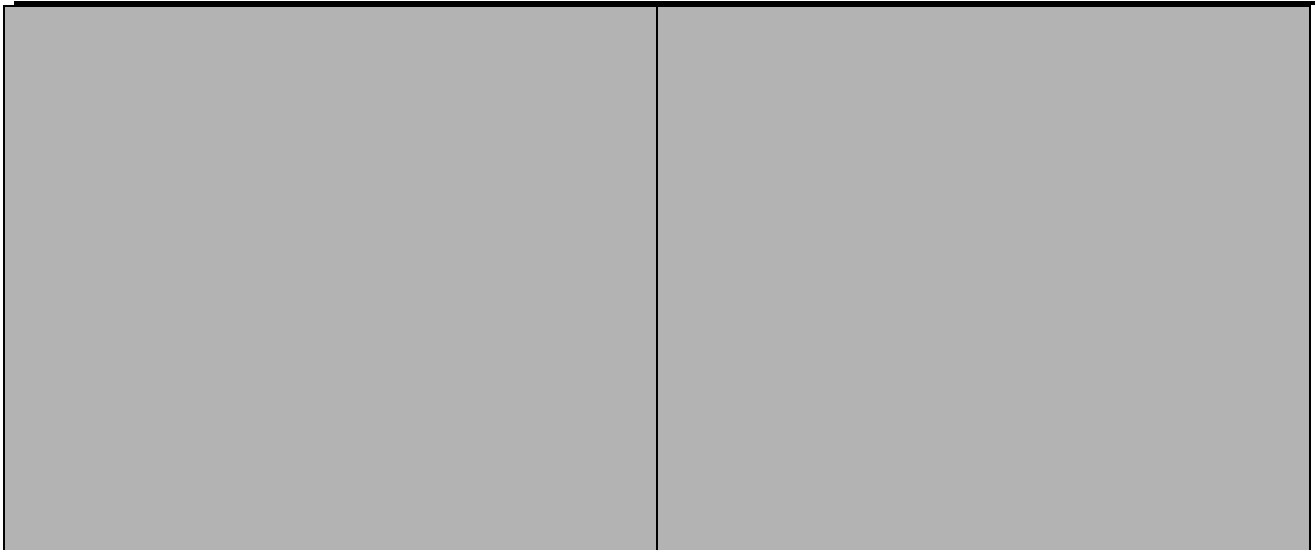
IF APPLICABLE: PLACE OF NATURALIZATION:
City and Stat: _____
Date of Naturalization: _____
Naturalization Certificate Number: _____

NAME OF FATHER: _____ FATHER'S OCCUPATION: _____
ADDRESS: _____ PHONE NUMBERS:
(if still living) HOME: () _____
CITY, STATE, ZIP: _____ WORK: () _____

NAME OF MOTHER: _____ MOTHER'S OCCUPATION: _____
ADDRESS: _____ PHONE NUMBERS:
(if still living) HOME: () _____
CITY, STATE, ZIP: _____ WORK: () _____

IF YOU WERE RAISED BY SOMEONE OTHER THAN YOUR NATURAL PARENTS, INDICATE WHO YOU LIVED WITH BETWEEN THE AGES OF 13 YEARS OLD AND 18 YEARS OLD:
NAME: _____ RELATIONSHIP: _____
ADDRESS: _____ PHONE NUMBERS:
CITY, STATE, ZIP: _____ HOME: () _____
WORK: () _____

IF EITHER PARENT IS REMARRIED, GIVE NAME AND ADDRESS OF STEP PARENTS:
A. _____
B. _____



PERSONAL DATA

List the name(s) of your Brother(s) and/or Sister(s), giving ages and addresses of each. Also any Step-Brother(s) and/or Step-Sister(s). *Continue on separate page*

	NAME	AGE	ADDRESS
1			
2			
3			
4			

What is your present Marital Status? Single Married Separated Divorced Widowed

List the name(s) of your spouse and children/stepchildren below:

NAME	ADDRESS	RELATIONSHIP

Have you used, tried or experimented with any habit forming or unlawful drug such as but not limited to, Hallucinogens, Barbiturates, Marijuana, or any controlled substance in any form?
 Yes No If Yes, Explain.

	DRUG TYPE	TOTAL USAGE	LAST DATE USED (MONTH/YEAR)
1			
2			
3			

Are you now or have you ever been a member or supported the basic tenets and belief of any group association or organization, which advocates aggression or violence towards any person or group of persons because of race, religion, or ethnic origin? Yes No If Yes, Give complete details:

Have you ever applied for employment with any Law Enforcement or Correctional Entity to include Federal, State, or Local Employer? Yes No If Yes, List:

	DATE	AGENCY	POSITION	STATUS
1				
2				
3				

Have you ever been denied employment with any Law Enforcement or Correctional Entity to include Federal, State, or Local Employer? (Exclude Medical Reasons) Yes No If Yes, Explain:

EDUCATION

Have you ever attended or been enrolled in a police or correctional academy or school?

Yes No If Yes, Give:

Name of School Course Dates Attended

1. _____

2. _____

3. _____

	High School	G.E.D	College/University	Graduate/Professional
School Name				
Grade Number of Years Completed (Circle) & Year Graduated	9 10 11 12		1 2 3 4	1 2 3 4
Diploma/Degree Year Graduated				
Describe specialized training, apprenticeship, skills or selected extra curricular activities				

MILITARY DATA

Have you ever been a member of any Branch of Military Services/Armed Forces in the United States or Foreign country?

Yes No If Yes, Give Branch Name: _____

Service Number: _____ Date Entered: _____

Date Discharged or Pending Discharge _____ Number of Enlistments: _____

Highest Rank: _____ Primary Duties: _____

Type of Discharge: Honorable General Dishonorable (Circle One)

During your Military Service as outlined above,

A. Were you ever disciplined? Yes No

Did you ever receive a Summary or Deck Court Martial, (including Article 15)

Yes No

B. Did you ever appear before your commanding officer or other person representing him for disciplinary reasons? Yes No If Yes, List:

	DATE	CHARGE(S)	DISPOSITION
1.			
2.			
3.			

EMPLOYMENT EXPERIENCE

List each job held. Start with your present or most recent job. Include military service and volunteer activities. YOUR APPLICATION WILL NOT BE CONSIDERED UNLESS YOU PROVIDE **ALL** INFORMATION REQUESTED BELOW. STATING **"SEE RESUME"** WILL MAKE YOUR APPLICATION **INVALID**.

EMPLOYER NAME	DATES		WORK PERFORMED
ADDRESS	FROM	TO	
CITY STATE ZIP	SALARY (FILL OUT BELOW)		
JOB TITLE SUPERVISOR	STARTING	FINAL	
PHONE NUMBER	STATUS FULL TIME PART TIME (CIRCLE ONE)		TRAINING
REASON FOR LEAVING	HOURS PER WEEK _____		
EMPLOYER NAME	DATES		WORK PERFORMED
ADDRESS	FROM	TO	
CITY STATE ZIP	SALARY (FILL OUT BELOW)		
JOB TITLE SUPERVISOR	STARTING	FINAL	
PHONE NUMBER	STATUS FULL TIME PART TIME (CIRCLE ONE)		TRAINING
REASON FOR LEAVING	HOURS PER WEEK _____		
EMPLOYER NAME	DATES		WORK PERFORMED
ADDRESS	FROM	TO	
CITY STATE ZIP	SALARY (FILL OUT BELOW)		
JOB TITLE SUPERVISOR	STARTING	FINAL	
PHONE NUMBER	STATUS FULL TIME PART TIME (CIRCLE ONE)		TRAINING
REASON FOR LEAVING	HOURS PER WEEK _____		

**LIST THREE PEOPLE WHO WOULD HAVE KNOWLEDGE OF YOUR QUALIFICATIONS.
PLEASE DO NOT INCLUDE RELATIVES.**

NAME	ADDRESS	PHONE NUMBER	OCCUPATION

NOTICE TO APPLICANTS

CRIMINAL INVESTIGATION

It is the policy of Middle River Regional Jail to request criminal and driving records (for certain positions) on applicants during the screening process. Officers must be eligible for a Virginia Operators License and remain eligible in order to work for the Middle River Regional Jail.

Applicants with criminal or traffic convictions may be rejected for employment where there is a demonstrable relationship to the job for which the applicant is applying. The Middle River Regional Jail will consider the nature, gravity, and time of the offence rather than automatically excluding applicants solely on the basis of a conviction. Arrest records will have no bearing on the selection process; however, an applicant may be required to provide additional information before being allowed to continue in the selection process.

If, when requested, you do not sign the "Criminal History" or "Motor Violation Record Request" form, you will not be considered for employment.

For applicants for positions at the Middle River Regional Jail

Applicants for positions at the Middle River Regional Jail will be required to submit fingerprints for an FBI criminal history records check. In addition, a Financial Report may be required.

Have you ever been convicted of any felony, any crime involving moral turpitude, or any offence involving the sexual molestation, physical or sexual abuse or rape of a child?

YES () NO () If Yes, describe in full.

ARREST RECORD

Have you ever been charged or arrested for any Criminal Offense? () Yes () No If Yes, List:

	DATE	JURISDICTION	CHARGE(S)	DISPOSITION
1				
2				
3				
4				

DRIVING RECORD

In what state are you currently licensed to drive?

Permit Number: _____ Expiration Date: _____

Has your permit or privilege to drive ever been suspended or revoked? () Yes () No
List all Traffic Tickets that you have ever received in Virginia and all other states.

	DATE	JURISDICTION	REASON (S)
1			
2			
3			
4			

THANK YOU

Thank you for your interest in Middle River Regional Jail.

WHAT HAPPENS NEXT

Your application will be reviewed and placed in our **ACTIVE FILES** for consideration. It is your responsibility to have all the required supporting documents sent to the Recruiter.

WHEN A VACANCY OCCURS

After the position announcement closing date, your application will be reviewed by the Recruiter to determine if you meet the criteria as set by the Middle River Regional Jail. If your credentials have met the qualifications for the position, your application will be sent to the Superintendent for review.

The Superintendent determines which candidate will be interviewed. After this determination, the Office Administrator will be in contact with those of you who are scheduled for an interview.

NOTIFICATION OF EMPLOYMENT

The official notification of employment comes from the Superintendent. If selected for a position, the Office Administrator will inform you of your starting date and the terms and conditions of employment. You will be asked to come to the Jail to enroll in the benefits program.

APPLICATION RENEWAL

Your main application will remain in the **ACTIVE FILES** for one year from the date of receipt. It will be retained as **INACTIVE** for two additional years unless an application renewal is requested. Your application will be returned to the **ACTIVE FILES** only upon receipt of the renewal request. For each additional position you are interested in, you need to call the Administrative Offices and ask that your application be considered for the position.

You are encouraged to keep the Administration informed of changes, which occur in the information submitted in your original application. If you have questions concerning the selection process, you are encouraged to call the Administrative Offices.

EQUAL OPPORTUNITY EMPLOYER

Middle River Regional Jail does not discriminate on the basis of race, color, national origin, gender, religion, age or disability in employment.

Revised October 2017