

NORTHERN NECK REGIONAL JAIL EMPLOYMENT APPLICATION

The Northern Neck Regional Jail is an Equal Opportunity Employer. Race, color, religion, age, sex, disability, marital or veteran status, place of national origin and other categories protected by law are not factors in employment, promotion, compensation or working conditions.

Please Print

Applicant Information

Date: _____

Name: _____ Social Security # _____

Maiden Name _____ Email _____

Mailing Address: _____

City/State: _____ Zip Code: _____

Telephone #: (____) _____ Cell Phone #: (____) _____

Do you have a valid driver's license? _____ License #: _____ State _____

Have you ever applied to, or worked for this Facility before? _____ If yes, when? _____

Do you have any friends or relatives working for NNRJ? _____

If yes, state name and relationship: _____

How did you hear about this opening? _____

State briefly why you would like to work for the Northern Neck Regional Jail (NNRJ):

Have you been convicted of a criminal offense (excluding sealed or expunged convictions)? _____

(NOTE: No applicant will be denied employment solely on the grounds of a conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

If yes, explain: _____

General Information About Employment Desired

Specific position you are applying for? _____

Full-time or part-time? _____ If part-time, hours per week desired: _____

Are you available to work weekends? _____ Are you available to work holidays? _____

Days of week available to work: _____ Hours available to work: _____

Are you available to be on-call? _____ Are you available to work evenings and nights? _____

Are you available to work overtime? _____ If hired, what date could you start work? _____

Are you above the minimal legal working age? _____

Are you legally permitted to work in this country? _____

(if yes, you must be prepared to produce proof on the first day of hire. In accordance with the Immigration Reform and Control Act of 1986.)

Education and Training (Include on-the-job training):

	<u>School/Location/Sponsor</u>	<u>Course of Study</u>	<u>Degree Awarded</u>
High School			
Community College			
Trade School			
College/University			
Seminars/Other			

Special Skills

Do you speak, write or understand any foreign languages? _____

If yes, which language(s)? _____

Rate your language skill level () Beginner () Intermediate () Fluent

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at the Northern Neck Regional Jail? _____ If so, explain in detail below:

Professional Society Memberships: _____

Computer skills	<u>Dates Used</u>	<u>Level of proficiency</u>
Hardware:		
Software:		

Use the space below to summarize other relevant experience, skills and background:

Employment History:

List all previous employers starting with your present or most recent position (last 10 years is sufficient) below. Include part time and Military Service if any.

You May () May Not () contact my current Employer at this time.

Name of Company: _____
Name of Supervisor: _____
Address: _____
Street City State Zip Code
Telephone Number: () _____
Position and Duties: _____

Dates of Employment: _____
Starting Rate of Pay: _____ Ending rate of pay: _____
Reason for Leaving: _____

Name of Company: _____
Name of Supervisor: _____
Address: _____
Street City State Zip Code
Telephone Number: () _____
Position and Duties: _____

Dates of Employment: _____
Starting Rate of Pay: _____ Ending rate of pay: _____
Reason for Leaving: _____

Name of Company: _____
Name of Supervisor: _____
Address: _____
Street City State Zip Code
Telephone Number: () _____
Position and Duties: _____

Dates of Employment: _____
Starting Rate of Pay: _____ Ending rate of pay: _____
Reason for Leaving: _____

Name of Company: _____
Name of Supervisor: _____
Address: _____
Street City State Zip Code
Telephone Number: () _____
Position and Duties: _____

Dates of Employment: _____
Starting Rate of Pay: _____ Ending rate of pay: _____
Reason for Leaving: _____

General References

Please provide the Name, Address, and Phone number of three additional references not related by blood or marriage, other than present/ past employers.

Name	Address	Phone Number	Relationship
1. _____			
2. _____			
3. _____			

Americans with Disabilities

I () do () Do not request a reasonable accommodation to be made for me to perform the interview/testing or the essential job functions required for the position I am applying for.

My Signature below certifies that the information contained within this application is true and correct to the best of my knowledge.

Applicant Signature Date

Notary

State of Virginia, City/County of _____, to wit,

This day _____, personally appeared before me in the

City/County aforesaid and signed the above document.

Acknowledged and sworn before me this _____ day of _____ 20_____.

My commission expires on the _____ day of _____ 20_____.

Notary Public

Mail completed application to:
Northern Neck Regional Jail
PO Box 1090
Warsaw, VA 22572
Attn: Human Resources

Please Read and Initial Each Paragraph Below (if there is any part of this page you do not understand, please contact the Human Resource Director at 804-333-6419 before signing).

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I understand that I may be required to submit to an Adult Basic Education Test as part of the application process. (T.A.B.E.)

_____ I hereby authorize the Northern Neck Regional Jail to conduct a criminal conviction investigation with respect to my application.

_____ I hereby authorize the Northern Neck Regional Jail to thoroughly investigate my background, references, work records, education and other matters related to my suitability for employment and, further, authorize my current and former employers to disclose to the company any and all letters, reports and other information pertaining to my employment with them, without giving me prior notice of such disclosure. In addition, I hereby release the Northern Neck Regional Jail, my current and former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that if offered employment, the offer is contingent on my passing a pre-employment drug screen, fitness for duty examination, a pre-employment physical, polygraph examination, and any and all compulsory minimum training standards. By signing this application, I voluntarily agree to submit to a pre-employment drug screen, fitness for duty exam, pre-employment physical, and polygraph examination, upon receipt of a written offer of employment. I understand that failure to pass the drug screen and/or physical, fitness for duty examination, polygraph examination and all compulsory training will result in withdrawal of the employment offer.

_____ If hired, I also agree to submit to random drug testing as a condition of employment. I agree that the Northern Neck Regional Jail may conduct drug screening at its sole discretion with or without notice, with or without cause or reason. I also understand that refusal to submit to a random drug screen will be considered a voluntary resignation of employment.

_____ I understand that nothing contained in the application or conveyed to me during any interview which may be granted is intended to create an employment contract, implied or explicit, between me and the Northern Neck Regional Jail. In addition, I understand and agree that if I am employed, my employment relationship with the Northern Neck Regional Jail is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the option of either myself or the Northern Neck Regional Jail. However if I terminate my employment without notice I understand that I may be subject to lose any and all accumulated annual leave and holiday leave I may have. I further understand that no promises or representations contrary to the foregoing are binding on the Northern Neck Regional Jail unless made in writing and signed by the Superintendent. Furthermore, if employed, I agree to abide by all of the policies and procedures of the Northern Neck Regional Jail.

_____ I Acknowledge that I will be provided training and evaluated on my abilities. If my performance is unsatisfactory, my employment may be terminated. Any dispute arising out of the termination of our employment relationship shall be resolved pursuant to Northern Neck Regional Jail Policy and Procedures. The Northern Neck Regional Jail is liable only for wages and benefits earned as of the date of termination.

_____ I understand and agree that any future changes in my title, duties, compensation, working conditions, and/or Northern Neck Regional Jail benefits, policies and procedures will not alter our at-will agreements.

_____ I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

My signature below certifies that I have read and understand this complete page, and agree to the terms and conditions outlined in this document.

Applicant's Signature

Date

NORTHERN NECK REGIONAL JAIL

AFFIRMATIVE ACTION INFORMATION FORM

In compliance with government regulations we want to track the number of our applicants by gender, race / ethnicity, and position for which applied.

We invite you to indicate your gender and race / ethnicity below. This information will be kept separately from your application and will be used only in accordance with federal and state regulations.

YOU ARE NOT REQUIRED TO PROVIDE THIS INFORMATION. Your application for employment will be considered in the same manner whether or not you fill out this form.

GENDER

Male

Female

RACE / ETHNIC GROUP

White (not of Hispanic origin)-- All persons having origins in any of the original peoples of Europe, North Africa, or Middle East.

Black (Not of Hispanic origin)-- All persons having origins in any of the black racial groups of Africa.

Hispanic-- All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race

Asian or Pacific Islander-- All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

American Indian or Alaskan Native-- All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

Other _____
(Please specify)

Name: _____

Date of Application: _____

Position Applied for: _____

Referred by: _____

How did you learn about the position? (Circle one)

Word of Mouth

Newspaper Ad

Bill Board

Agency Referral

Website