

# **Office of the Sheriff**

## **Northampton County**

**Eastville, Va. 23347**

### **BECOME A NORTHAMPTON COUNTY SHERIFF'S OFFICE DEPUTY SHERIFF OR CIVILIAN EMPLOYEE**

All applicants must meet the following requirements for employment considerations:

- **Be a U.S. citizen with a good employment, credit and police record.**
- **Be 20 years of age (Sworn position), 18 years old (civilian).**
- **Produce a High School diploma or a General Education Development (GED) certificate.**
- **Produce a valid Virginia Driver's License at time of appointment.**
- **Produce a Social Security Card at time of appointment.**
- **All applicants must submit to:**
  - \* **A successful background investigation (including employment history, DMV check, criminal history check, and credit check).**
  - \* **An oral panel interview.**
- **Upon being offered a position, all potential Deputies must:**
  - \* **Be fingerprinted.**
  - \* **Successfully complete a physical examination (before being enrolled in a Training Academy).**
  - \* **Sign an employment contract (before being enrolled in a Training Academy).**
  - \* **Complete the required training/schooling for the position within one of employment**

**The Northampton County Sheriff's Office provides Equal Opportunity Employment**

NAME:

LAST

FIRST

M.I.

SOCIAL SECURITY NUMBER

**NORTHAMPTON COUNTY SHERIFF'S OFFICE  
PERSONAL HISTORY QUESTIONNAIRE AND APPOINTMENT APPLICATION**

**INSTRUCTIONS TO THE APPLICANT:**

- The information you provide in this personal history questionnaire and appointment application will be used in the investigation of your background to determine your suitability for the position for which you have applied.
- It is to your advantage to respond openly to any and all questions. Any negative factor in your background will be evaluated in terms of the circumstances and facts surrounding it's occurrence and it's degree of relevance to the position for which you have applied. During the investigation, the investigator will inquire into the facts surrounding such an occurrence. An assessment will then be made of the relevance of these facts to the requirement of the job.
- Please fill out the form completely and accurately. Please print in ink or type your responses on this form. If a question does not apply to you, write "N/A"(not applicable) in the space provided for the answer. If you need more space to respond to a question, attach your information on a separate sheet with question number included. Keep in mind that all statements are subject to verification and all time periods in your background must be accounted for.
- Copies of Driver's License, Social Security Card, and DD-214 (if applicable) should be attached to application. These documents must accompany this completed form in order to be considered for an appointment. Additional forms such as a resume, High School diploma, G.E.D., College transcripts can be attached to the application, but are not mandatory for the application process.
- You are responsible for updating this personal history questionnaire and appointment application. In the event your information changes during the process (e.g. change of address and/or telephone number, traffic violations, arrest, or change in employment status), notification of such changes must be given to the Chief Jailor.
- Applications received unsigned or incomplete, will not be considered.

If you have any questions regarding any section or part of this form, or have any questions regarding the application process, do not hesitate to contact the Chief Jailor (757)-678-1362 if applying for Eastern Shore Regional Jail position or the Sheriff or Major (757-678-0495) if applying for a job at the Sheriff's Office.



Have you ever been arrested or charged for any criminal offense including Military Court-Martial? Yes No

DATE	CITY & STATE	CHARGE(S)	DISPOSITION

Use this area if additional space is required to explain the above information

If appointed, can you provide proof of authorization to work in the United States? Yes \_\_\_ NO \_\_\_  
(Deputy Sheriff applicants must be a United States Citizen at the time of appointment, other employees must have the legal right to work in the United States.

Please provide references below (other than relatives or past employers).  
Four references are required. Include name, address, city, state, zip code and phone number with area code.

Name	Street Address	City	State	ZipCode	Phone Number

Have you ever applied for employment with any law enforcement entity to include any federal, state or local public safety employers? Yes  No  If yes, list date, agency, position and status:

Date	Agency	Position	Status

Have you ever been denied employment with any law enforcement entity to include federal, state or local public safety employers? (Excluding medical reasons) Yes  No  If yes, please explain \_\_\_\_\_

Have you ever illegally possessed/consumed marijuana or a derivative within the last 12 Months? Yes  No

Have you ever illegally possessed/consumed any anabolic steroids within the last 5 years? Yes  No

Have you ever illegally possessed/consumed heroin, cocaine, marijuana, anabolic steroids, any narcotic or hallucinogenic drugs (LSD, PCP, etc.) at any time? Yes  No  If yes, please explain below:

Drug Type	Amount	Last Date Possessed (Month/Year)	Explanation

PERSONAL INFORMATION

Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> # of Dependents _____					
Spouse's Name:			Spouse's Employer:		
If separated/divorced, give name of former spouse: _____					
Address of former spouse: _____					
Have you and/or your spouse been a party in a civil suit action? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain _____					
List any friends or relatives working at Eastern Shore Regional Jail or Sheriff's Office _____					

**PERSONAL INFORMATION (CONTINUED)**

List all members of your immediate family (if deceased, so state) including name, age, occupation, phone number (with area code) and address (street, city, state and zip code). Use additional paper if needed.

Full Name	Age	Occupation	Phone Number
Father:			
Address:			
Mother:			
Address:			
Wife/Husband:			
Address:			
Child:			
Address:			
Child:			
Address:			
Child:			
Address:			
Brother:			
Address:			
Brother:			
Address:			
Sister:			
Address:			
Sister:			
Address:			

List your addresses for the past 5 years and length of time at each address. (Include landlord's name and phone number. If applicable, give installation for military address).

Street Address	City/State	Zip	Time There	Landlord Name/Phone

**EDUCATION**

Circle Highest Level Completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4 Graduate School 1 2						
Name of University College or School	Location (include street, city, state and zip)	Attended		Degree Earned	Major/Minor	
		From	To			

Do you have any trade school or technical training that may be pertinent for the position for which you are applying? Yes \_\_\_ No \_\_\_ If yes, please explain: \_\_\_\_\_

#10 **ADDITIONAL KNOWLEDGE AND SKILL INFORMATION**

For each of the items below, check off the appropriate column to indicate whether you LEARNED it in school, APPLIED it in school (ex. In a class project, etc.), APPLIED it on a job, or DO NOT POSSESS.

Knowledge, Skills and Abilities	Learned	Applied School	Applied School	Do Not Possess
Knowledge of Investigation Techniques and practices				
Knowledge of the structure of the Criminal Justice System				
Knowledge of the role of the Sheriff's Office				
Knowledge of the operation of City and State Agencies and the services which they provide to the Community				
Knowledge of the principles of Human Behavior				
Ability to understand and apply verbal and written orders/directives				
Ability to work independently				
Ability to communicate effectively, both written and orally				

Ability to complete records and documents on time				
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**WORK HISTORY**

Using a separate section for each position, describe in detail, all work experience beginning with your present or most recent job. *Include Self-employment, Military Service, Volunteer work, Summer work, Internships (indicate whether or not college was given) and periods of unemployment.* Use additional continuation sheets if necessary. Be sure to indicate whether employment was full-time or part-time. **DO NOT INDICATE "SEE ATTACHED RESUME"**. Incomplete information will result in the disqualification of your application.

Job Title:	Supervisor:	Phone:
Employer:	Address:	
Dates Employed (MO/YR) Begin:                      End:	Reason for Leaving:	
Job Duties (Be Specific):		

Job Title:	Supervisor:	Phone:
Employer:	Address:	
Dates Employed (MO/YR) Begin:                      End:	Reason for Leaving:	
Job Duties (Be Specific):		

Job Title:	Supervisor:	Phone:
Employer:	Address:	
Dates Employed (MO/YR) Begin:                      End:	Reason for Leaving:	
Job Duties (Be Specific):		

Job Title:	Supervisor:	Phone:
Employer:	Address:	
Dates Employed (MO/YR) Begin:                      End:	Reason for Leaving:	
Job Duties (Be Specific):		

Job Title:	Supervisor:	Phone:
Employer:	Address:	
Dates Employed (MO/YR) Begin:                      End:	Reason for Leaving:	
Job Duties (Be Specific):		



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**APPLICANT SIGNATURES**

**CERTIFICATION SIGNATURE**

I hereby certify that all statements and answers made in this application are true and complete as far as I can determine and I understand that any mistakes of material facts may subject me to disqualification or dismissal. I also authorize my former employers to give any information regarding my employment, together with any information they may have regarding me.

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

**AUTHORIZATION SIGNATURE**

I hereby authorize the Northampton County Sheriff's Office or the Eastern Shore Regional Jail, Eastville, Virginia 23347, to obtain and review any and all information concerning my past employment, formal education, police record of convictions, military record and financial records. I further release any holder of such information any and all claims or damages resulting from the same information given. I understand that the information obtained by the Northampton County Sheriff's Office or the Eastern Shore Regional Jail, will be used for information purposes only and that it will be kept confidential.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness's Signature \_\_\_\_\_ Date \_\_\_\_\_

**COMPLETION OF THIS APPLICATION DOES NOT GUARANTEE A JOB OR AN INTERVIEW WITH THE NORTHAMPTON COUNTY SHERIFF'S OFFICE OR THE EASTERN SHORE REGIONAL JAIL. ALL APPLICATIONS WILL BE HELD FOR ONE YEAR.**

**HOW DID YOU HEAR ABOUT OUR DEPARTMENT?**

Newspaper advertisement \_\_\_\_\_ Website \_\_\_\_\_ Virginia Employment Commission \_\_\_\_\_

Current appointee \_\_\_\_\_ (Name of appointee \_\_\_\_\_)

Other \_\_\_\_\_ Please explain: \_\_\_\_\_