

CAROLINE DETENTION FACILITY

BOWLING GREEN, VA

APPLICATION FOR EMPLOYMENT

The Caroline Detention Facility is an Equal Opportunity Employer. We are committed to excellence through diversity.

Please complete this application in full, even if you attach a resume. The application must be fully completed to be considered for hire.

PERSONAL INFORMATION

Name (Last, First, MI)

Address		City	State	Zip
Primary Contact Number	Secondary Contact Number	Email Address		

One must be at least 21 years old to work at the Caroline Detention Facility. Do you meet this requirement? Yes ___ No ___

Do you have a valid driver's license? Yes ___ No ___ Are you legally authorized to work in the U.S.? Yes ___ No ___

Have you resided in the United States for the last three (3) consecutive years? Yes ___ No ___

What is your citizenship status? _____

Do you have a valid social security card issued & approved by the U. S. Social Security Administration? Yes ___ No ___

Have you ever been granted military or government security clearance? Yes ___ No ___ If yes, level: _____

Have you ever been convicted of a felony? Yes ___ No ___ If yes, when & where? _____

Have you ever been convicted for the violation of any law in military or criminal court that has not been sealed, annulled, or deleted from record? Yes ___ No ___ If yes, when and where? _____ Type of conviction: _____

Do you use illegal drugs? Yes ___ No ___ If yes, to what extent? _____

Have you ever experimented with **ANY** illegal drugs? Yes ___ No ___ Date of most recent experimentation: _____

Have you ever been involved in a transaction where illegal drugs were bought, sold, traded or stolen? Yes ___ No ___
If yes, describe your involvement: _____

If selected, are you willing to submit to a Pre-Employment Drug Screening test? Yes ___ No ___

If selected, do you authorize full disclosure of all personal records in order for an agent of this organization to conduct a thorough background investigation? Yes ___ No ___

Other than English, what language(s) do you read, speak, and/or write? _____ Read ___ Write ___ Speak ___
_____ Read ___ Write ___ Speak ___

How did you hear about this employment opportunity? _____

POSITION

Position Applying For	Date Available	Desired Annual Salary	Full Time _____ Part Time _____
			If P/T, Hours available: _____

This facility is a 24 hour/7 days per week operation. Are you available to work any schedule necessary? Yes ___ No ___

If No, what days/hours are you available? _____

EDUCATION

Do you have a High School Diploma or GED? Yes ___ No ___

High School	City, ST	Years Attended (From-To)	Grade Completed
College/University	City, ST	Years Attended (From-To)	Degree(s) Achieved

EMPLOYMENT HISTORY

Please provide information from your last five (5) years of employment.

If you are currently working, may we contact your employer? Yes ____ No ____

Employer (1)	Job Title		Dates Employed
Work Phone	Supervisor		Last Pay Rate
Address	City	State	Zip
Employer (2)	Job Title		Dates Employed
Work Phone	Supervisor		Last Pay Rate
Address	City	State	Zip
Employer (3)	Job Title		Dates Employed
Work Phone	Supervisor		Last Pay Rate
Address	City	State	Zip
Employer (4)	Job Title		Dates Employed
Work Phone	Supervisor		Last Pay Rate
Address	City	State	Zip

REFERENCES

Name	Title	Relationship	Phone

SIGNATURE DISCLAIMER

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Type or Print)

Signature

Date