



Amelia County Sheriff's Office

Employment Application

Complete applications are only accepted when a position is available. When there is an opening it is advertised in the local paper.

It is recommended that anyone considering a career with us to read the following:

Every position at the Sheriff's Office is a highly visible, critical, public safety job. You must make a commitment to the profession as the work requires long hours, rotating shifts, weekends, and holidays. Fulfilling the responsibilities of the job requires you to remain calm, be restrained in your actions both verbally and physically, and constantly concerned with the welfare of others. This is a highly responsible position that involves networking with the community and the protection of life and property.

Every employee, no matter the position, in their personal or professional life is representing the office and the county and it is vital that they hold a high moral and ethical standard. All affairs must be conducted in an exemplary manner.

Position Applying For

Law Enforcement Deputy	Certified	Non Certified
Courtroom Security / Civil Process	Certified	Non Certified
Communications Officer	Certified	Non Certified
Other _____		

Personal Information

Full Legal Name: _____

Last, First, Middle Suffix

Other Names Used (maiden name, AKA): _____

Are you 18 or older (Civilian position) Yes No

Are you 21 or older (Sworn position) Yes No

Address _____

Street

City / Town

State

Zip Code

Home Phone: _____ Cell Phone: _____

Other: _____ Email Address: _____

Education / Training

Enter highest grade level completed: ___ High School ___ GED ___ College / Trade ___ Masters / PHD

High School Name

City, State

Date last attended

Describe any awards, honors, citations, positions held in school organizations, and or any other special recognition you received while attending school:

College / Trade School Name

City, State

Date last attended

Type of Degree

Major / Minor

Date Graduated

College / Trade School Name

City, State

Date last attended

Type of Degree

Major / Minor

Date Graduated

List languages other than English (including sign language) and indicate your knowledge in each area by entering 1-5 (5 rated as fluent).

Language

Reading

Writing

Speaking

Understanding

List any type of specialize licenses:

Describe any word processing or computer skills and list all software used:

Describe any other skills that you possess that would assist you in the performance of the position you are applying for:

Military

Attach a copy of your DD214 or active Military Identification Card.

Have you served in the U.S. Armed Forces or State Military Forces? Yes No

Served from: _____ to _____ Highest rank held: _____

Branch of Service _____ Unit _____

Job Title(s) (e.g. Rifleman, Security): _____

Type of discharge: _____

Are you actively serving in a Reserve Unit (including State Military Forces)? Yes No

Serving from: _____ to _____ Current rank held: _____

Branch of Service _____ Unit _____

Job Title(s) (e.g. Rifleman, Security): _____

Have you ever been subject to court martial or any other disciplinary proceeding under the Uniform Code of Military Justice? (Include non-judicial, Captain's mast, etc.) If "Yes" provide dates, charges, military courts, or authority, and outcome:

Certified Sworn Applicants

What Criminal Justice Academy did you attend to get your certification?

Academy Name City, State Dates Attended

Has your law enforcement certificate ever been suspended, revoked, or subject to discipline or investigation? Yes (explain) No

List any special skills you possess and equipment you can use which may be related to law enforcement work (For example: two-way radio, breathalyzer, speed detection equipment, firearms, and computers):

List any certifications you possess which may be related to law enforcement work:

Credit History

- Have you ever filed bankruptcy personally or on behalf of a business? Yes No
- Have you ever had any personal or real property repossessed or foreclosed? Yes No
- Have you ever failed to pay Federal, state, or other taxes? Yes No
- Have you ever failed to file a tax return when required by law? Yes No
- Have you ever had a lien placed against your property for failing to pay taxes or other debts? Yes No
- Have you ever had a judgment entered against you? Yes No
- Have you ever defaulted on any type of loan? Yes No
- Have you ever had bills or debts turned over to a collection agency? Yes No
- Have you ever been delinquent on court-imposed alimony or child support? Yes No
- Are you currently more than sixty (60) days delinquent on any debts? Yes No

Identify any person or entity to whom you are indebted, and the extent of your indebtedness. Include mortgagees, vehicle payments, charge accounts, credit cards, loans child support payments, and any other debts or payments.

<i>Name of Creditor</i>	<i>Type of Debt</i>	<i>Monthly Payment</i>	<i>Approx Balance</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Use this space to provide any information / explanations you feel is necessary for any of the above answers.

Arrest Record Information

If you have ever been arrested, taken into physical custody, been issued a misdemeanor citation, (excluding traffic citations), and/or convicted of any crime(s), please give the following information. This includes any summons or related paperwork to appear in court, issued by any law enforcement officer or court.

<i>Date</i>	<i>Charges</i>	<i>City, State</i>	<i>Branch of Service (if applicable)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

As an adult, have you ever been placed on probation by any court? *Yes (explain)* *No*

List any other crimes you have committed, REGARDLESS, of whether you were stopped, arrested, and / or convicted. Include nature of the crime, when, where, how and why:

Have you now or have you ever been involved as a defendant in any civil court action? *Yes (explain)* *No*

Personal Declarations

Do you consume alcoholic beverages? *Yes* *No*
If yes, how often: _____

Have you ever been treated for drug or alcohol addiction? *Yes* *No*

Have you ever used marijuana or any other controlled substance (including a performance-enhancing steroid) not prescribed by a physician? *Yes* *No*

Have you ever sold or furnished controlled substance or prescription drugs to anyone? *Yes* *No*

Are there any incidents in your life, or details not mentioned herein, which may influence this department's evaluation of your suitability for employment? *Yes (explain)* *No*

If yes, explain: _____

Residences

Identify all residences where you have lived in the last 5 years, beginning with the most recent, including your present address. List date by month / year. Include military assignments.

<i>From</i>	<i>To</i>	<i>Address</i>	<i>City, State</i>	<i>Zip Code</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Employment History

Have you ever been asked or forced to resign in lieu of termination. **Yes** **No**

Beginning with your current or most recent job: list all employment since the age of eighteen. Include full-time, part-time, temporary, seasonal, military assignments, or unpaid internships, plus all periods of unemployment.

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

Employment History cont.:

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

Employment History cont.:

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

Employment History cont.:

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

From: _____ *To:* _____

Employer: _____

Address: _____

Telephone number: _____ *Supervisor:* _____

Job Title: _____ *Salary:* _____

Duties: _____

Reason for leaving: _____

References

List six (6) persons who know you well enough to provide current information about you. Do not list relatives, former or present employers, or supervisors.

Name: _____ Years known: _____

Address: _____

Home phone: _____ Other phone: _____

Nature of relationship: _____

Name: _____ Years known: _____

Address: _____

Home phone: _____ Other phone: _____

Nature of relationship: _____

Name: _____ Years known: _____

Address: _____

Home phone: _____ Other phone: _____

Nature of relationship: _____

Name: _____ Years known: _____

Address: _____

Home phone: _____ Other phone: _____

Nature of relationship: _____

Name: _____ Years known: _____

Address: _____

Home phone: _____ Other phone: _____

Nature of relationship: _____

Name: _____ Years known: _____

Address: _____

Home phone: _____ Other phone: _____

Nature of relationship: _____

Organization Membership

<i>Name</i>	<i>City, State</i>	<i>Present</i> <i>(list position held & describe activity)</i>	<i>Former</i> <i>(list position held & describe activity)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group or combination of persons which has adopted, or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means?

Yes *No*

Have you ever made a financial or other material contribution to any organization of the type described in above question?

Yes *No*

At the time of your membership, participation, or contribution did you know of any unlawful aims of the organization?

Yes *No*

Did you intend to promote any unlawful aims of the organization? *Yes* *No*

If yes to the above statements, state the name and location of the organization and explain your affiliation with them. _____

All applications need to have original signatures. No Emails accepted.

I hereby certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers to the above questions. I fully understand that any misrepresentation, omission, or falsification may deem me permanently unsuitable, or if hired, may lead to the termination of my employment.

Print Name

Signature

Date



Amelia County Sheriff's Office
Sheriff Ricky L Walker

16441 Court Street
P.O. Box 463
Amelia, Virginia 23002
O: 804-561-2118 F: 804 -561-2759
ameliaso@tds.net

Criminal History Record Request
(Please Print)

Last Name	First	Middle	Maiden

Sex	Race	Date of Birth	

Place of Birth	City	State	

Social Security Number			

Affidavit of Release of Information

I hereby give consent and authorize the Amelia County Sheriff's Office to search ALL Criminal Records for any criminal history record and report the results.

Signature of Person Named in Record

State of _____; County of _____, to wit:

Subscribed and sworn to before me this _____ day of _____, 20____.

My commission expires _____, 20____

Signature of Notary Public

Notice

Response based on comparison of information about person named in request against a master name index contained in the files of Amelia County Sheriff's Local Criminal Records only.

- _____ No Conviction Data- Does Not Preclude the Existence of an Arrest Record.
- _____ No Criminal Record-Name Search Only.
- _____ No Criminal Record-Fingerprint Search.

Date

By