



Barboursville Police Department

P. O. Box 262 • Barboursville, West Virginia 25504

304-736-5204 • Fax 304-736-2850

APPLICATION FOR EXAMINATION & APPOINTMENT

1. Name: _____
First Middle Last

2. Residence Address and/or Post Office Box for last three (3) years:

3. Telephone (home): _____ (work): _____

4. Telephone (cell): _____ Email: _____

5. Date of Birth: _____ Social Security No.: _____

6. Are you a citizen of the United States? Yes No

7. Do you have a valid driver's license? Yes No

8. Check the highest school grade completed:

10 11 12 Diploma GED College Degree

9. Do you have any civilian or military law enforcement experience? Yes No

10. Have you graduated from the West Virginia State Police Academy? Yes No

If yes, date graduated: _____

11. Are you currently certified as a police officer in West Virginia? Yes No

12. List other skills, training, or related knowledge: _____

13. Were you ever in the United States Armed Forces? Yes No

14. Have you ever been convicted of a crime? Yes No

If so, explain: _____

I hereby certify that there are no willful misrepresentations in or falsifications of my statement and answers to questions. I am aware that should investigation disclose such misrepresentations or falsifications, my application will be rejected.

Signature: _____ Date: _____

* Applicant must be minimum 18 years of age and not over the age of 40 at time of application.

** The Barboursville Police Department is an Equal Opportunity Employer. If you feel you have been discriminated against in employment on the basis of race, color, creed, sex, age, or national origin, please report it to the Office of the Mayor.

COMPLETE WORK HISTORY ON BACK OF THIS SHEET

EMPLOYMENT HISTORY

Start with your present or most recent employer and give a complete record of all employment for the last five employers. (Include service in the armed forces, if applicable.) Show all periods of unemployment. If former employers are out of business, so state. If you were in business for yourself, give nature of business and location. Be accurate showing all of your time. If you do not have sufficient space to give a complete employment record, attached an additional sheet and continue.

COMPANY NAME & ADDRESS	DATES FROM/TO	TOTAL TIME PERIOD	SALARY OR WAGE	YOUR POSITION & NATURE OF DUTIES	REASON FOR LEAVING
<i>Last or present employer:</i> Name / Address:	<div style="text-align: center;">/</div> <hr/> From month/year <div style="text-align: center;">/</div> <hr/> To month/year				
<i>Previous employer:</i> Name/Address:	<div style="text-align: center;">/</div> <hr/> From month/year <div style="text-align: center;">/</div> <hr/> To month/year				
<i>Previous employer:</i> Name/Address:	<div style="text-align: center;">/</div> <hr/> From month/year <div style="text-align: center;">/</div> <hr/> To month/year				
<i>Previous employer:</i> Name/Address:	<div style="text-align: center;">/</div> <hr/> From month/year <div style="text-align: center;">/</div> <hr/> To month/year				