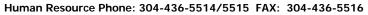
## **STEVENS CORRECTIONAL CENTER**

795 VIRGINIA AVE. WELCH, WV 24801 Phone: 304-436-5420





## **EMPLOYMENT APPLICATION**

APPLICANT INFORMATION  TO BE CONSIDERED FOR EMPLOYMENT, THIS APPLICATION MUST BE FILLED OUT IN IT'S ENTIRETY																					
Last Name								First							M.I.		[	Date			
Street Ad	ddress						•		•						Apa	rtmer	ıt/Uni	it #			
City								State							ZIP						
Phone						E-mail <i>I</i>	Addr	ess				ı									
Date Ava	ilable	ole Social :					ecurity No.						I	Desi	esired Salary						
Position Applied for																					
Can you legally work in the U.S.?						lf s	so, is it	porary	S 🗌	Are you 18 Years Old or older?  YES  NO  NO											
Have you Correction				r Stevens		YES  NO	lf s	so, whe	n?		•		to							.•	
Have you been convicted of a felony in the						YES  NO	lf y	yes, exp	olain												
Table Services (17) years.																					
EDUCA <sup>*</sup>	TIOI	N							1												
High Scho	ool				T		<u> </u>	ldress													
From		to Did you gra			graduate?	YE:		De	gree												
College		Address																			
From			to	Did you gradu			YE:		De	Degree											
Other		· ·					Ad	ldress	ress												
From		to Did you grad			graduate?	YE:		Degree													
May we c	ondu	uct a criminal background investigation on you? Yes $\square$ or No $\square$																			
PERSOI	NAL	REF	ERE	NCES							· <u>=</u>										
Please lis	t thre	ее ре	ersonai	l referenc	es.																
Full Name	Full Name							R	elation	ship											
Company											none										
Address																					
Full Name	е									Relationship											
Company								PI	none												
Address																					
Full Name	Il Name									Relationship											
Company									PI	none											
Address					_																

PREVIOUS	S EMPLO	YMENT	AND PROFESS	ION	AL REF	ERENCE	S										
Company							Phone										
Address							Supervis	or									
Job Title Starting Salary							\$			Ending Sa	alary	\$					
Responsibilit																	
From	l		Leaving:														
May we cont																	
Company								Phone									
Address								Supervisor									
Job Title	Title Starting Salary					g Salary	\$ Ending Salary \$										
Responsibilit	ies				I.		l					1					
From	To Reason for Leaving:																
May we cont																	
Company	Phone																
Address									Supervisor								
Job Title	ob Title Starting Salary						\$ Ending Salary \$					\$					
Responsibilit	Responsibilities																
From	<b>'</b>	То		Rea	son for	Leaving:											
May we cont	May we contact your previous supervisor for a reference?  YES  NO																
Are you willing to submit to a physical and/or psychological testing? Yes No Are you willing to submit to drug screening? Yes No																	
MILITARY SERVICE																	
Branch							Fr	om			to						
Rank at Disc	harge						•		•		•		•				
If other than honorable, explain																	
Name and phone number of spouse, significant-other or relative:																	
DISCLAIMER AND SIGNATURE																	
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 will result in my release.																	
I understand that my signature on this document gives the agency permission to conduct a criminal background check, physical examination by a qualified doctor, a drug screening urinalysis by an independent laboratory or doctor and a psychological examination by a certified psychologist or a computer generated psychological evaluation. The results of the criminal background check will not bar you from employment unless the conviction relates to the position for which you are applying. Psychological evaluation will be performed only after an offer of employment. Drug urinalysis is necessary. You do not have to disclose any medications you are on at the time of testing. If hired you may be asked to explain positive readings.																	
Signature										Date							

## EMPLOYMENT REFERENCE INFORMATION RELEASE

TO:	
Name: (Please Print)  Social Security Number:  Date of Birth:  Title of Job Applied for:	
I am being considered for employment with the <u>Steven's/McDow</u> <u>Center</u> , State of West Virginia. As a condition for further employment with the <u>Steven's/McDow</u> consideration, I have consented to an initial screening conduct	ployment
The <u>Steven's/McDowell County Human Resource Department</u> mainformation it deems relevant to my eligibility to hold such a person or firm which has been given by me as a refer I authorize the listed reference to disclose to the <u>Steven's/McCorrectional Center's Human Resource Department</u> the appropriate attached questions. I authorize all former employers, educations	osition from the rence. Further, Dowell County responses to the al institutions,
governmental entities, or persons to release all legally permissing their possession which may be related to me to the <u>Steven's</u> , <u>Correctional Center's Human Resource Department</u> .	
I hereby waive any privilege of confidentiality with respinformation.	pect to any such
A photocopy of this authorization shall be considered as eff as the original and shall remain on file at the <u>Steven's/McDower Correctional Center's Human Resource Department</u> . Please provide information within 10 days of the date of this letter so that I may consideration for which I am applying.	ell County de the requested
SIGNATURE DATE	

Corrections Staff Witness:\_\_\_\_\_ Date\_\_\_\_