Please select the date you will attend the written test You may only attend one.

POLICES

November 12, 2016 December 10, 2016

Preliminary Application for Employment Charleston Police Officer



Last	Fii	St	Middle	Suffix or Ma	aiden
Telephone Day		_Night	Other		
Date of Birth	Place o	f BirthCity	County	State	
Drivers License No.		State	U.S. (Citizen Ye	s No
Social Security No.		E-Mail Add	lress		
Mailing Address	Address	City	State	Zip Coc	le
Home Address	Address	City	State	Zip Coc	le
Previous Addresses ((Last Five Years)				
Address		City	State	Zip Code	
Address		City	State	Zip Code	
Address		City	State	Zip Code Zip Code	
	rs (Last Five Years)	-		-	
Address	rs (Last Five Years) Address	-		-	
Address Previous Employer		-	State	Zip Code	
Address Previous Employer Employer	Address Address Address	City	State	Zip Code	
Address Previous Employer Employer Employer	Address Address Address ould be hand ed to: Hall fice cruiting	City	State State	Zip Code Zip Code Phone Phone Phone irm that the inform r incomplete inform termination of my eck for and to obta and obtain a copy yment as a Charles al requirements I v	mation in this applica employment if hired ain and review any co of my driving record ton Police Officer. I vill be required to fil

Where did you hear about this Job Opportunity?Self-initiatedPosterMagazineNewspaperFlyerWord of MouthRadioTelevisionInternetBillboardOther