



Preliminary Application for Employment Charleston Police Officer

Name _____

Last
First
Middle
Suffix or Maiden

Telephone Day _____ Night _____ Other _____

Date of Birth _____ Place of Birth _____

mm/dd/yyyy
City
County
State

Drivers License No. _____ State _____ U.S. Citizen Yes No

Social Security No. _____ E-Mail Address _____

Mailing Address _____

Address
City
State
Zip Code

Home Address _____

Address
City
State
Zip Code

Previous Addresses (Last Five Years)

Address
City
State
Zip Code

Address
City
State
Zip Code

Address
City
State
Zip Code

Previous Employers (Last Five Years)

Employer
Address
Phone

Employer
Address
Phone

Employer
Address
Phone

This Pre-Application should be hand delivered or mailed to:

**Charleston City Hall
 City Clerk's Office
 Attention: Police Recruiting
 P.O. Box 2749
 Charleston, WV 25330**

By signing this application, I swear or affirm that the information provided is true and complete. I also understand that providing false or incomplete information in this application is grounds for disqualification of my application or termination of my employment if hired. I also authorize the Charleston Police Department to check for and to obtain and review any criminal arrest history which I may have and to investigate and obtain a copy of my driving record for the purposes of determining my suitability for employment as a Charleston Police Officer. I realize this is a Pre-Application and upon passing minimal requirements I will be required to fill out a detailed Police Officer Application and return it to the Charleston City Clerk's Office.

 Signature

 Date

Where did you hear about this Job Opportunity?

Self-initiated Poster Magazine Newspaper Flyer Word of Mouth
 Radio Television Internet Billboard Other _____