



SHERIFF, OHIO COUNTY

51 Sixteenth Street, Wheeling, West Virginia 26003

Law Enforcement 304-234-3680

Records 304-234-3792

To: Sheriff's Office Applicants

From: Chief Deputy Drage Flick

Re: Special Information

- The hiring eligibility list generated by this Civil Service Examination is effective for 24 months from the date the test scores are received, unless it is exhausted before then.
- Applicants who have served in any branch of the United States Armed Forces, active or reserve, will receive 5 preference points. Provided a copy of your DD-214 or a photocopy of a current Military ID MUST be on file with your application, BEFORE the results of this test are received.
- Applicants who are West Virginia Certified Law Enforcement Officers (you attended the West Virginia State Police Academy – Basic Officer Training Program), will receive 5 preference points. Provided a photocopy of your Law Enforcement Officer Training Certificate issued by the Governor's Committee on Crime Delinquency and Correction MUST be on file with your application, BEFORE the results of this test are received.
- The results of this test will be emailed to you, if you have provided an E-Mail address. If you DO NOT receive a passing score, your name and score WILL NOT appear on the list. You may contact me to inquire about your score and ranking. Results normally take 10 – 12 days from the test date.
- The top 10 – 15 applicants, ranked by final score, will receive a letter containing information about the next phase of testing, Physical Fitness. Fitness requirements can be found at www.ohcoso.com/2015pat.pdf. If there is more than 6 months between your physical fitness test and a possible hiring date, you will have to pass this portion of the testing process again.
- Any applicant who changes their address, phone number, or other contact information has the responsibility of notifying our office. If we attempt to contact you and are unsuccessful due to your failure to update, you will be removed from the eligibility list.
- Additional information about salary, benefits, and general information can be viewed at www.ohcoso.com/2015testinfo.pdf
- This year, the Civil Service Examination will be given at 2 different times to accommodate the needs of candidates. Please make sure that you indicate your day/time preference in the appropriate section on the application. Applications without a selection will be discarded. Both tests will be given at the Highlands Conference Center, adjacent to **West Liberty University - Highlands Campus.**
- All members hired after January 1, 2010 must pass an annual Physical Fitness Test or be subject to termination.
- Please use the information, listed below, to contact our office with questions or information about the test or testing process. DD-214's or WV Law Enforcement Certificates should be dropped off or mailed directly to me. Address, phone number, or other changes should be directed to me as well.

Chief Deputy Drage Flick

Phone (304)-234-3881

Fax (304)-234-3650

dflick@ohcoso.com



OHIO COUNTY COMMISSION

Deputy Sheriff Examination

1500 Chapline Street, Room 215
Wheeling, West Virginia 26003



APPLICATION FOR EXAMINATION - DEPUTY SHERIFF

INSTRUCTIONS: Read application thoroughly before providing the requested information. TYPE OR PRINT IN BLACK INK all information required. Fill out this application completely and accurately. All statements in your application are subject to verification. **False, inaccurate or incomplete information may subject you to disqualification.** If the writing space provided is inadequate, use the continuation sheet at the end of this application and identify the additional information by the question number. You may attach additional pages if needed. For any question that does not apply, use "N/A" as your answer. DO NOT leave blanks.

1. Name _____

_____ Last
_____ First
_____ Middle
_____ Suffix
2. List any other names, aliases you have used, including maiden name if applicable

_____ Last
_____ First
_____ Middle
_____ Suffix
3. Home address _____
No PO boxes

_____ Number, Street
_____ City, State
_____ Zip
4. Home phone (include area code) _____
5. Work phone (include area code) _____ (optional)
6. Cellular phone (include area code) _____
7. E-mail address _____
8. Date of Birth _____

_____ Month
_____ Day
_____ Year

Applicants must be between the ages of 18 - 45 on the day of the test.
9. Place of Birth _____

_____ City
_____ State
_____ Zip
10. Social security number: _____
11. Sex: ___ Male ___ Female
12. Color of eyes _____ Color of hair _____
13. Distinguishing marks or scars _____
14. Are you a United States Citizen? ___ yes ___ no If yes, ___ Native born

___ Naturalized
- Are you prevented from lawfully becoming employed in the country because of visa or immigration status? ___ Yes

___ No
15. _____

Drivers license number
State issued by
Expiration date
Class

Date rcvd:		Sheriff's Office use ONLY	
By:	Copy:	Mil	WVLE Exam 1 Exam 2

16. EDUCATION

	Name of School City, State	Dates attended		Graduate? # Credit hours	Academic Responsibility
		FROM	TO		
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Vocational / Business				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Other / Higher Education				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time

17. List any professional licenses or certificates you currently hold, including certification as a law enforcement officer, paramedic, emt, etc.

18. Have you ever served in any branch of the United States Military, Yes
including Guard or Reserve? No
If you answered yes, please list the branch, unit, dates of service, highest rank obtained,
rank at discharge and type of discharge.

** To receive 5 Military Preference points, a copy of your DD214 must be attached to this application. If you are still on active duty or serving in the Guard or Reserve, a photocopy of your military ID should be attached.*

19. REFERENCES Please list 5 references, not related to you.

NAME	ADDRESS	DAYTIME PHONE	OTHER PHONE	YEARS KNOWN

20. Have you ever been a law enforcement officer or held a similar position? Yes No
If you answered yes, please list the location, dates of employment, and reason for leaving.
** Please attach a copy of your West Virginia Law Enforcement Certificate to this application*

Applicant Name: _____

21. EMPLOYMENT HISTORY

List all jobs you have held for the last 10 years, including periods of unemployment. List your present or most recent job first. Include Military service in proper time sequence. Also include temporary, part-time, and volunteer jobs.

1.	<u>Employer</u>	<u>Telephone #</u>	<u>From:</u>
			Month / Year
	<u>Address</u>		<u>To:</u>
			Month / Year
	<u>Supervisor's Name and Title</u>		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
	<u>Your Title:</u>	<u>Type of Business:</u>	
	<u>Your Duties:</u>	<u>Salary per Month:</u>	
	<u>Reason for leaving:</u> _____		

2.	<u>Employer</u>	<u>Telephone #</u>	<u>From:</u>
			Month / Year
	<u>Address</u>		<u>To:</u>
			Month / Year
	<u>Supervisor's Name and Title</u>		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
	<u>Your Title:</u>	<u>Type of Business:</u>	
	<u>Your Duties:</u>	<u>Salary per Month:</u>	
	<u>Reason for leaving:</u> _____		

3.	<u>Employer</u>	<u>Telephone #</u>	<u>From:</u>
			Month / Year
	<u>Address</u>		<u>To:</u>
			Month / Year
	<u>Supervisor's Name and Title</u>		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
	<u>Your Title:</u>	<u>Type of Business:</u>	
	<u>Your Duties:</u>	<u>Salary per Month:</u>	
	<u>Reason for leaving:</u> _____		

Indicate by number any of the above employers whom you do not wish us to contact _____

Attach additional sheets if needed.

Applicant Name: _____

22. Have you ever been arrested? yes no
23. Have you ever pled "guilty", "no contest" , or have been convicted of any criminal offense, other than a minor traffic violation? yes
 no
24. Were you ever fired, forced to resign from a position, or resigned in lieu of being fired? yes
 no

If you answered yes to any of these three questions, please explain below.

25. Have you ever been convicted of an act of violence or Domestic Violence? yes no
- Have you graduated from High School or obtained a G.E.D? yes no
- Have you ever been adjudicated to be mentally incompetent? yes no
- Are you the subject of a Restraining Order or Domestic Violence Protective Order? yes no
- Are you a West Virginia resident or will you become a West Virginia Resident prior to your hire date? yes no
- Will you be at least 18 but less than 45 years old on the test date? yes no
- Are you a habitual criminal? yes no
- Are you a frequent user of non-prescribed prescription or illegal drugs? yes no
- Are you addicted to drugs or alcohol? yes no
- Have you received counseling due to addiction to drugs or alcohol? yes no
- Are you willing to submit to pre-employment drug screening? yes no
- Have you ever attempted a deception or fraud in conjunction with a civil service examination? yes no
- Do you believe that you can pass the physical fitness test adopted by the Ohio County Sheriff's Office? Information can be found at **www.ohcoso.com** yes no
- Are you opposed to using force to fulfill the duties of a Deputy Sheriff? yes no
- Do you have uncorrected or corrected visual acuity of 23/30 in both eyes combined ? yes no
- Are you colorblind? yes no
- Do you have normal hearing in each ear? yes no
- Are you aware that you will have to be examined by a physician and meet the physical requirements necessary to fulfill the responsibilities of a law enforcement officer? yes no
- Are you aware that you will have to submit to a polygraph examination? yes no
- Are you aware that if hired you will be required to pass a physical fitness test annually? yes no

Applicant Name: _____

26. Is there any reason known to you why you might not be able to consistently and promptly perform any of the job duties of Deputy Sheriff? ___ yes ___ no

If you answered yes, please explain below.

27. Explain your reason for applying for this position.

EXAMINATION PREFERENCE

The Civil Service Test will be given at 2-different times. Please select only one date/time.
Once your application has been received, no change to your selection may be made.
Your selection must be clearly marked or you will not be permitted to take either examination!

K YXb YgXUnžA Um%ž&\$% ! 7:00pm *Saturday, A Um&ž&\$% ! 9:00am*

I herby certify that there are no willful misrepresentations or falsifications in this application, and all my answers are true and correct to the best of my knowledge and belief. If it is discovered that I did misrepresent any information or falsify any information on this application, I may be held responsible for any expenses incurred during my background and polygraph examination.

_____ Date

_____ Signature of Applicant
If submitted digitally, type your name and you can sign at the test.

Completed applications must be received or postmarked no later than
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Mail or hand deliver to: Ohio County Commission
Deputy Sheriff Examination
1500 Chapline Street, Room 215
Wheeling, WV 26003

Applicant Name: _____

