



MIDDLE RIVER REGIONAL JAIL

350 Technology Drive • Staunton, VA 24401
Phone: (540) 245-5420 Fax: (540) 245-5232

Dear Applicant:

Thank you for your interest in a position with the Middle River Regional Jail. Your application will remain in our active files for one year. If you are interested in any additional positions that become available, contact our Administrative Offices and request your application be considered for that position.

Please complete the Personal History Statement included and attach all requested documents. Virginia State Law requires these documents they must be provided before your application can be processed further. The cover sheet gives specific information on how to fill out the personal history forms. All paperwork must be filled out and returned.

To have an application considered, the following documents **must** be submitted:

1. A complete and signed application
2. Copy of Birth Certificate, High School Diploma and/or copies of college transcripts (if applicable), Social Security Card, Driver's License and Military Discharge (DD214).

Included with this letter are a Middle River Regional Jail application and a description of the selection process. Should you have any questions, please feel free to call our Administrative Offices at (540) 245-5420 extension 1242.

Good luck in your search for a position!

Sincerely,

Jeffery Newton, CJM
Superintendent



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EQUAL EMPLOYMENT OPPORTUNITY / AFFIRMATIVE ACTION APPLICANT INFORMATION FORM

Information required on this form will be used solely for purposes of reporting and evaluating Middle River Regional Jail's process in its equal employment and affirmative action practices. By law, this information CANNOT and WILL NOT be used in a discriminatory manner in determining employability, evaluation of performance or employment promotion.

Please return this form along with your application to our Administrative Offices. Thank you!

Last Name		First Name		Middle Name		
Address (Street address or PO Box)						
Address (City, State and Zip Code)						
Social Security Number		Date		Position Applied For		
How did you learn of this vacancy?		Mail	College Placement Office	Name of College		County Employee
Job Service	Newspaper	State Office	Online	Walk-In	Job Fair	Comm. Org.
Other						



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Last Name		First Name			Middle Name	
All other maiden names by former marriages					Telephone	
Date of Birth (MM-DD-YYYY)		Place of Birth (City, State)			Social Security Number	
Race	Gender	Age	Height	Weight	Hair Color	Eye Color
Position for which you are being recommended						
Current Address (Street)		(City)		(State)	(Zip Code)	
Previous Address (Street)		(City)		(State)	(Zip Code)	
Previous Address						

NOTICE TO APPLICANTS

The Middle River Regional Jail is committed to a drug/alcohol free workplace. As a condition of employment, all candidates are required to be pre-tested for illegal substances prior to employment and will be randomly tested during employment.

Positive results on this pre-employment test will result in the denial of employment with the Middle River Regional Jail.



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APPLICATION FOR EMPLOYMENT

Job applied for		Rate of Pay Expected per		
Full Legal Name (Last)	(First)	(Middle)		
Address (Street - no PO Box)	(City)	(State)	(Zip Code)	Duration (Yrs)
Social Security Number	Telephone Number	Daytime Number		

VERIFICATION OF ELIGIBILITY TO WORK

The Middle River Regional Jail adheres to the Immigration Reform and Control Act of 1986, which requires new employees to present documentation of citizenship or the authorization to work in the United States. If the Middle River Regional Jail employs you, you will have to present, a social security card and U. S. birth certificate plus a driver's license or other photo identification, i.e. state, federal or military I.D.

For purposes of compliance with Section 40.1-11.1 of the Code of Virginia, entitled "Employment of Illegal Immigrants," please state whether you are legally eligible for employment in the United States (you are legally eligible for employment if you are a United States citizen or if you have an appropriate permit to work in the United States through the Department of Justice or the United States Department of Labor).

YES

NO

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make such investigation and inquiries to my personal references, previous employers, and other legally related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or other persons from all liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given on my application form(s) or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the Middle River Regional Jail.

Signed:

PERSONAL HISTORY STATEMENT

NAME (First, Middle, Last)	MAIDEN NAME (First, Middle, Last)
LIST ANY OTHER NAME OR NAMES YOU HAVE USED IF DIFFERENT FROM INDICATED ABOVE (include all nicknames)	
HAVE YOU EVERY LEGALLY CHANGED YOUR NAME? <div style="display: flex; justify-content: space-around;"> YES NO </div>	IF YES, COURT JURISDICTION AND DATE
NAME CHANGE FROM	NAME CHANGE TO
CURRENT PHYSICAL ADDRESS (NO PO BOX)	TELEPHONE NUMBERS HOME: WORK:
SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM-DD-YYYY)
PLACE OF BIRTH (City and State)	PLACE WHERE YOU GREW UP (City and State)
IF APPLICABLE, PLACE OF NATURALIZATION (City & State)	DATE OF NATURALIZATION CERTIFICATE NUMBER
FATHER INFORMATION NAME: ADDRESS: CITY, STATE, ZIP:	FATHER'S OCCUPATION: TELEPHONE NUMBERS HOME: WORK:
MOTHER INFORMATION NAME: ADDRESS: CITY, STATE, ZIP:	MOTHER'S OCCUPATION: TELEPHONE NUMBERS HOME: WORK:
IF YOU WERE RAISED BY SOMEONE OTHER THAN YOUR NATURAL PARENTS, INDICATE WHO YOU LIVED WITH BETWEEN THE AGES OF 13 YEARS OLD AND 18 YEARS OLD	
NAME: ADDRESS: CITY, STATE, ZIP:	RELATIONSHIP: TELEPHONE NUMBERS HOME: WORK:
IF EITHER PARENT IS REMARRIED, GIVE NAME AND ADDRESS OF STEP PARENTS A: B:	

PERSONAL DATA

List the name(s) of your Brother(s) and/or Sister(s), giving ages and addresses of each. Also list any Stepbrother(s) and/or Stepsister(s). *Continue on separate page*

NAME	AGE	ADDRESS			
What is your current Marital Status?	SINGLE	MARRIED	SEPARATED	DIVORCED	WIDOWED

List the name(s) of your spouse and children / stepchildren below:

NAME	AGE	ADDRESS			

Have you used / tried / experimented with any habit forming or unlawful drug such as, but not limited to, Hallucinogens, Barbiturates, Marijuana, or any controlled substance in any form?

YES	NO	If YES, please explain below
DRUG TYPE	TOTAL USAGE	LAST DATE USED (MM/YY)

Are you now or have you ever been a member or supported the basic tenets and belief of any group association or organization, which advocates aggression or violence towards any person or group of persons because of race, religion or ethnic origin?

YES	NO	If YES, please give complete details

Have you ever applied for employment with any Law Enforcement or Correctional Entity to include Federal, State or Local Employer?

YES	NO	If YES, please list below	
DATE	AGENCY	POSITION	STATUS

Have you ever been denied employment with any Law Enforcement or Correctional Entity to include Federal, State or Local Employer? (Exclude medical reasons)

YES	NO	If YES, please explain below

EDUCATION

Have you ever attended or been enrolled in a police or correctional academy or school? YES NO				
If YES, please give:				
NAME OF SCHOOL	COURSE		DATES ATTENDED	
	High School	G.E.D.	College/University	Graduate/Professional
School Name				
Grade / Year complete	9 10 11 12		1 2 3 4	1 2 3 4
Year Graduated				
Describe specialized training, apprenticeship, skills or selected extracurricular activities				

MILITARY DATA

Have you ever been a member of any branch of Military Services / Armed Forces in the United States or Foreign Country?				
YES	NO	If YES, please provide		
BRANCH NAME:		NUMBER OF ENLISTMENTS:		
SERVICE NUMBER:		HIGHEST RANK:		
DATE ENTERED:		PRIMARY DUTIES:		
DATE DISCHARGED OR PENDING:		TYPE OF DISCHARGE:		
		Honorable	General	Dishonorable
During your Military Service as outlined above, were you ever disciplined? YES NO				
Did you ever receive a Summary or Deck Court Martial (including Article 15)? YES NO				
Did you ever appear before your commanding officer or other person representing him for disciplinary reasons?				
YES	NO	If YES, List:		
DATE	CHARGE(S)		DISPOSITION	

EMPLOYMENT EXPERIENCE

List each job held. Start with your present or most recent job. Include military service and volunteer activities. YOUR APPLICATION WILL NOT BE CONSIDERED UNLESS YOU PROVIDE ALL INFORMATION REQUESTED BELOW. STATING “SEE RESUME” WILL MAKE YOUR APPLICATION INVALID.

EMPLOYER NAME	DATES			WORK PERFORMED	
	FROM	TO			
ADDRESS	CITY	STATE	ZIP		
JOB TITLE SUPERVISOR	SALARY				
	STARTING	FINAL			
TELEPHONE	STATUS				
	FULL TIME	PART TIME		TRAINING	
REASON FOR LEAVING	HOURS PER WEEK				
EMPLOYER NAME	DATES				WORK PERFORMED
	FROM	TO			
ADDRESS	CITY				
JOB TITLE SUPERVISOR	SALARY				
	STARTING	FINAL			
TELEPHONE	STATUS				
	FULL TIME	PART TIME		TRAINING	
REASON FOR LEAVING	HOURS PER WEEK				
EMPLOYER NAME	DATES				WORK PERFORMED
	FROM	TO			
ADDRESS	CITY				
JOB TITLE SUPERVISOR	SALARY				
	STARTING	FINAL			
TELEPHONE	STATUS				
	FULL TIME	PART TIME		TRAINING	
REASON FOR LEAVING	HOURS PER WEEK				

REFERENCES

LIST THREE PEOPLE WHO WOULD HAVE KNOWLEDGE OF YOUR QUALIFICATIONS.
PLEASE DO NOT INCLUDE RELATIVES.

NAME	ADDRESS	TELEPHONE	OCCUPATION

NOTICE TO APPLICANTS:

CRIMINAL INVESTIGATION

It is the policy of Middle River Regional Jail to request criminal and driving records (for certain positions) on applicants during the screening process. Officers must be eligible for a Virginia Operators License and remain eligible in order to work for the Middle River Regional Jail.

Applicants with criminal or traffic convictions may be rejected for employment where there is a demonstrable relationship to the job for which the applicant is applying. The Middle River Regional Jail will consider the nature, gravity, and time of the offence rather than automatically excluding applicants solely on the basis of a conviction. Arrest records will have no bearing on the selection process; however, an applicant may be required to provide additional information before being allowed to continue in the selection process.

If, when requested, you do not sign the "Criminal History" or "Motor Violation Record Request" form, you will not be considered for employment.

For applicants for positions at the Middle River Regional Jail

Applicants for positions at the Middle River Regional Jail will be required to submit fingerprints for an FBI criminal history records check. In addition, a Financial Report may be required.

Have you ever been convicted of any felony, any crime involving moral turpitude, or any offence involving the sexual molestation, physical or sexual abuse or rape of a child? YES NO

If Yes, describe in full:

ARREST RECORD

Have you ever been charged or arrested for any Criminal Offense? YES NO

If Yes, List:

DATE	JURISDICTION	CHARGE(S)	DISPOSITION

DRIVING RECORD

In what state are you currently licensed to drive?	
Permit Number:	Expiration Date:

Has your permit or privilege to drive ever been suspended or revoked? YES NO

List all Traffic Tickets that you have ever received in Virginia and all other states:

DATE	JURISDICTION	REASON(S)

THANK YOU

Thank you for your interest in Middle River Regional Jail.

WHAT HAPPENS NEXT

Your application will be reviewed and placed in our ACTIVE FILES for consideration. It is your responsibility to have all the required supporting documents sent to the Recruiter.

WHEN A VACANCY OCCURS

After the position announcement closing date, your application will be reviewed by the Recruiter to determine if you meet the criteria as set by the Middle River Regional Jail. If your credentials have met the qualifications for the position, your application will be sent to the Superintendent for review.

The Superintendent determines which candidate will be interviewed. After this determination, the Office Administrator will be in contact with those of you who are scheduled for an interview.

NOTIFICATION OF EMPLOYMENT

The official notification of employment comes from the Superintendent. If selected for a position, the Office Administrator will inform you of your starting date and the terms and conditions of employment. You will be asked to come to the Jail to enroll in the benefits program.

APPLICATION RENEWAL

Your main application will remain in the ACTIVE FILES for one year from the date of receipt. It will be retained as INACTIVE for two additional years unless an application renewal is requested. Your application will be returned to the ACTIVE FILES only upon receipt of the renewal request. For each additional position you are interested in, you need to call the Administrative Offices and ask that your application be considered for the position.

You are encouraged to keep the Administration informed of changes, which occur in the information submitted in your original application. If you have questions concerning the selection process, you are encouraged to call the Administrative Offices.

EQUAL OPPORTUNITY EMPLOYER

Middle River Regional Jail does not discriminate on the basis of race, color, national origin, gender, religion, age or disability in employment.

Revised July 2020