



Initial Application for Employment Nitro 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 Initial Application should be hand delivered or mailed to:

Nitro Police Department
Attention: Police Recruiting
497 1st ave South Nitro,
WV 25143

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 Nitro 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 Nitro Police Officer. I realize this is an initial application and upon passing minimal requirements I will be required to fill out a detailed Police Officer Application and return it to the Nitro Police Department.

Signature _____

Date _____