

**MARSHALL COUNTY DEPUTY
SHERIFFS CIVIL SERVICE
COMMISSION**

EXAM APPLICANTS

Dear Sir or Madam:

The Marshall County Deputy Sheriff's Civil Service Commission will be conducting a written exam for entry level deputy sheriff **on April 3rd AT 9:00 AM** at the John Marshall High School football. Be prepared to take the PT Test and the written examination this day.

Please be advised you will be required to have a photo ID at the time of the examinations. An officer will direct you to the testing location.

A copy of the **required** physical agility is attached. All applications must be received in the Marshall County Clerk's Office no later than two weeks prior to the test date.

Applications must be received by **Friday March 19th at 4PM**
Any applications not received within the allotted time frame will be scheduled for the next available test date.

If you have any questions, call the County Clerk's Office at 304-845-1220 and ask for Jeanne.

Sincerely,

Jeanne Shook, Secretary

DOCTOR'S CERTIFICATION OF FITNESS TO PERFORM AGILITY TEST

I have reviewed the attached three (3) elements of the West Virginia Governor's Committee on Crime, Delinquency and Correction Physical Agility Test and find that the candidate identified below can/cannot (*circle one*) perform the elements of the test safely.

CANDIDATE'S NAME: _____

AGENCY TO WHICH
APPLICATION IS MADE: _____

DATE OF EXAMINATION: _____

DOCTOR'S SIGNATURE: _____



MARSHALL COUNTY DEPUTY SHERIFF'S CIVIL SERVICE COMMISSION



PHYSICAL AGILITY TEST

Applicant: _____

DATE: _____

SIT UPS

Designed to measure abdominal muscular endurance. The score is the number of bent knee sit-ups performed in one (1) minute. The minimum standard for this test is 35 sit-ups.

P ____ F ____

PUSH-UPS

Designed to measure upper body muscular endurance and absolute strength. The score is the number of conventional push-ups performed in one (1) minute. The minimum standard for this test is 25.

P ____ F ____

1.5 MILE RUN

Designed to measure cardiovascular capacity. The score is in minutes and seconds. The Minimum standard for this test is completion of the run in 14 minutes and 06 seconds.

____ MIN ____ SEC

Fireman Carry

Designed to measure strength and muscular endurance. Applicant must carry a 150 pound dummy 10 yards.

P ____ F ____

Each test is graded as PASS or FAIL. Acceptance is based upon successfully passing all four measures.

Signature of Test Administrators: _____



**MARSHALL COUNTY DEPUTY
SHERIFFS CIVIL SERVICE COMMISSION**

**APPLICATION FOR EXAMINATION
FOR DEPUTY SHERIFF**



TYPE OR PRINT LEGIBLY IN INK. APPLICATION NOT COMPLETED IN ITS ENTIRETY MAY BE REJECTED.

NAME _____

First **Middle** **Last**

SOCIAL SECURITY # ____ / ____ / ____ **DRIVERS LICENSE #** ____ / _____

State

Date of Birth _____ **Email** _____

RESIDENCE _____

Street **City** **State** **Zip**

TELEPHONE # (____) ____-_____ **OTHER PHONE # (____) ____-_____**

MINIMUM QUALIFICATIONS
(Check all that apply and attach verification)

_____ **At Least 18 years old** _____ **High School Diploma/GED**

EDUCATION

| NAME AND LOCATION | YEARS COMPLETED | DIPLOMA OR DEGREE |
|-------------------|-----------------|-------------------|
| High School | | |
| College | | |
| Other | | |

MILITARY

| BRANCH OF ARMED SERVICES | FROM | TO | RANK OR GRADE |
|--------------------------|------|----|---------------|
| | / | / | / / |
| | / | / | / / |



**APPLICATION FOR EXAMINATION
FOR DEPUTY SHERIFF**

EMPLOYMENT

| FROM / TO | EMPLOYER | ADDRESS | DUTIES |
|-----------|----------|---------|--------|
| / | | | |
| / | | | |
| / | | | |

REFERENCES

(List four, do not list relatives)

| NAME AND ADDRESS | VOCATION | PHONE NUMBER |
|------------------|----------|--------------|
| | | |
| | | |
| | | |
| | | |

SKILLS

(Outline additional specialized experience or skill you possess)

Q & A

Have you had a valid driver's license for two years prior to the date of this application? ___ Yes ___ No

Has your driver's license ever been revoked or suspended? ___ Yes ___ No If Yes explain

Have you ever been convicted of a misdemeanor crime? ___ Yes ___ No If Yes explain

Have you ever been convicted of a felony ___ Yes ___ No If Yes explain _____



**APPLICATION FOR EXAMINATION
FOR DEPUTY SHERIFF**

Have you ever been convicted of a traffic violation? ____ Yes ____ No If Yes explain _____

Have you ever been convicted of a "crime of domestic violence"? ____ Yes ____ No If yes explain _____

Have you ever been convicted of any crime relating to a firearm? ____ Yes ____ No If yes explain _____

CERTIFICATION

I hereby certify that there are no willful misrepresentations in and falsifications of the above statements and answers to questions. I am aware that should investigation disclose such misrepresentations and falsifications, my application will be rejected and I will be disqualified from applying in the future for any position under the jurisdiction of the Civil Service Commission for Marshall County.

Signature of Applicant

Date

ADDITIONAL DOCUMENTS REQUIRED

(Submit COPIES only)

- BIRTH CERTIFICATE (Hospital Certificate Unacceptable)**
- HIGH SCHOOL DIPLOMA/GED**
- MILITARY FORM DD214**
- LAW ENFORCEMENT CERTIFICATION CERTIFICATE**

Five points will be awarded for Military Service **OR** Currently Certified Police Officer

A PICTURE ID MUST BE PRESENTED AT TIME OF EXAMS