Dear Applicant:

Thank you for your interview for a Criminal Justice certified position with the Department of Public Safety. You will need to successfully complete the Criminal Justice pre-employment requirements in order to determine your eligibility for employment in a certified position. Please read the attached Applicant Instructions document for directions on continuing this process.

Contact the CJ Processing Specialist at the Piedmont Triad Regional Employment Office at (336)308-4745 to schedule an appointment for further pre-employment testing and completion of your hiring paperwork.

Your appointment at the Piedmont Triad Regional Employment Office will take the majority of the day; please plan accordingly. Cell phones are not allowed at your appointment. Also, note that appropriate workplace dress is appreciated. Shorts, blue jeans or revealing attire are not appropriate.

For assistance or further information regarding your appointment or the employment process with the Department of Public Safety, please call this office.

Sincerely,

CJ Processing Specialist
Piedmont Triad Regional Employment Office

Attachments
1. CJ Pre-Employment Processing, Applicant Instructions-Phase I
2. List of Acceptable Documents (I9 & E-Verify)
3. Form F-5A Report of Appointment/Application for Certification
4. Employment Application Addendum
5. NC-4 Employee Withholding Allowance Certificate
6. W-4 Employee Withholding Allowance Certificate
7. Mandatory Direct Deposit Notification form
8. Direct Deposit Enrollment form
9. Directions to REO

Internal Use Only:

Candidate Name: ______________________________ Work Location: __________________
Agency Representative: ______________________ Date: __________________

ADDRESS:
157A Dublin Square Road
Asheboro, NC 27203

Telephone: (336) 308-4745
Fax: (336) 318-4872

www.ncdps.gov
An Equal Opportunity Employer
STEP 1. SCHEDULE AN APPOINTMENT AT THE REGIONAL EMPLOYMENT OFFICE

Call the CJ Processing Specialist at the Piedmont Triad Regional Employment Office at (336)308-4745 to schedule your pre-employment processing appointment.

STEP 2. COMPLETE FORM F-5A, REPORT OF APPOINTMENT/APPLICATION FOR CERTIFICATION FORM

Complete only the front side of Form F-5A and, if needed, the F-5A Continuation Sheet. You must list all criminal convictions, except for minor traffic violations, in item 6. You must report the following convictions: DWI/DUI (alcohol or drugs), Duty to Stop in the Event of an Accident, and Speeding to Elude Arrest. You must report Game and Wildlife violations as these are criminal offenses. Do not sign or date the F-5A; your signature will be witnessed and notarized at the Regional Employment Office.

STEP 3. EMPLOYMENT APPLICATION

Applicants for Correctional Officer, Probation Parole Officer, and Probation/Parole Associate positions should provide up-to-date personal, education and work history information to be included as part of the original Employment Application. If your name, address, phone, e-mail, education and (or) work history information has changed since your original application, please complete the Employment Application Addendum enclosed and bring this form to your appointment at the Regional Employment Office.

STEP 4. DOCUMENTS TO BRING TO YOUR REGIONAL EMPLOYMENT OFFICE APPOINTMENT

This does not represent an offer of employment. If a conditional offer of employment is extended to you during your appointment at the Regional Employment Office, be prepared to provide the following documentation as a condition of employment:

1. Driver’s License. A picture ID is required for security and testing purposes.
2. Proof of U.S. citizenship (birth certificate, naturalization papers, etc). U.S. citizenship is a CJ Standards requirement.
3. Social Security Card. Your social security card must be provided for proof of legal name.
4. Proof of high school graduation or GED and proof of degree(s) completed (if applicable). Original documents are required.
   - For proof of high school graduation: the high school diploma or an official transcript or letter from the school is acceptable. (Proof of high school is not required if college degree was obtained from an appropriately accredited college.)
   - If you have completed college, bring the original college diploma or if you have an official sealed transcript, bring the sealed transcript to verify your degree.
   - If you obtained education outside the US and its territories, official validation of the equivalent education level in the US is required.
   - Proof of education must be provided in the English language.
6. Completed Tax Forms (NC-4 and W-4)
7. Completed Direct Deposit Notification & Enrollment forms
8. All military veterans must provide an undeleted copy of a DD214, Report of Separation (long form). If you received infractions, charges or convictions while in the military contact this office for additional instructions.
9. Completed Form F-5A (unsigned) & Continuation Sheet (if needed)
10. Employment Application Addendum (If applicable for CO, PPO, PPA Only)
11. TB Skin Test Results or TB screening results if positive in the past (current results within the last 12 months) (TB test is not required for Community Corrections certified positions.)
12. Be prepared to provide medical history information to include a list of medications taken within the last 12 months, as you will be required to complete a Medical History Statement during your Processing appointment.

Use Black Ink on All Forms
Criminal Justice Education and Training Standards Commission
Criminal Justice Standards Division

REPORT OF APPOINTMENT/APPLICATION FOR CERTIFICATION

Revised (08/2009)

For Criminal Justice Standards Use Only:

Certification: ___________________________ TRA: ________________ FP: ________________ Mailed: ________________

Certification: □ DOC Correctional Officer □ DOC Probation/Parole □ DOC Surveillance

Name: ___________________________________________ Social Security # _______________________

First                 Middle                 Last

Date of Birth: __________________________

1. Answer the following questions:
(a) Have you ever held a position requiring criminal justice certification? □ Yes □ No
(b) If yes, has your criminal justice certification ever been suspended or revoked?
   □ Yes □ No

   (If yes, please give details on a separate sheet)
(c) Have you ever been denied employment with a criminal justice agency?
   □ Yes □ No

   (If yes, please give details on a separate sheet)

2. Is any member(s) of your family now in prison or jail or on either probation or parole?
   □ Yes □ No

   If yes, please list on a separate sheet the name(s), relationship, and specify whether relative is in prison (name and location of prison), or in jail, or on probation or parole.

3. Have you ever used any illegal drugs? (If yes, please explain on a separate sheet). □ Yes □ No

Military Service: If you have ever served in the U.S. Military or been a member of any military organization, please complete Questions 4-5.

4. What was your last discharge? Date: ________________ □ Honorable □ General □ Dishonorable □ Other

5. Were you ever court-martialed, tried on charges, or were you the subject of a summary court, deck court, or nonjudicial punishment (Captain’s mast, company punishment, Article 15, etc.) or any other disciplinary action? (If yes, please give details on a separate sheet).

Criminal Conviction Record: All convictions other than minor traffic violations must be reported in the applicant’s own handwriting below. Please note that a “DWI/DUI (alcohol or drugs),” “Duty to Stop in the Event of an Accident,” and “Speeding to Elude Arrest” are NOT minor traffic violations and, therefore, MUST be reported below. Provide all information completely and accurately. Any falsifications or misstatements of fact may be sufficient to disqualify you.

If any doubt exists in your mind as to whether you were convicted of a criminal offense at some point in your life, you should check the block labeled, “Criminal Convictions as Reported Below” and give details. You should check the “No Criminal Convictions” block ONLY if you have never been convicted of a Misdemeanor or Felony, or your record/citation was expunged by a judge’s court order. Check one of the following:

6. □ No Criminal Convictions

   (List additional convictions on Page 3)

   (a) Offense: ___________________________ Law Enf. Agency/County/State: ___________________________

       Date of Conviction: ________________ Disposition of Case: ___________________________

       Misdemeanor ☐ Felony ☐ Probation ☐ Yes ☐ No (If yes, give details on Page 3).

   (b) Offense: ___________________________ Law Enf. Agency/County/State: ___________________________

       Date of Conviction: ________________ Disposition of Case: ___________________________

       Misdemeanor ☐ Felony ☐ Probation ☐ Yes ☐ No (If yes, give details on Page 3).

   (c) Offense: ___________________________ Law Enf. Agency/County/State: ___________________________

       Date of Conviction: ________________ Disposition of Case: ___________________________

       Misdemeanor ☐ Felony ☐ Probation ☐ Yes ☐ No (If yes, give details on Page 3).

   (d) Offense: ___________________________ Law Enf. Agency/County/State: ___________________________

       Date of Conviction: ________________ Disposition of Case: ___________________________

       Misdemeanor ☐ Felony ☐ Probation ☐ Yes ☐ No (If yes, give details on Page 3).

   (e) Offense: ___________________________ Law Enf. Agency/County/State: ___________________________

       Date of Conviction: ________________ Disposition of Case: ___________________________

       Misdemeanor ☐ Felony ☐ Probation ☐ Yes ☐ No (If yes, give details on Page 3).

7. Do you have any pending charges or a Domestic Violence Order? □ Yes □ No (If yes, give details on a separate sheet).
Form F-5A (DOC) report of appointment/application for certification
Side Two (2) Continued

**Report of Appointment** (To be completed by the Regional Employment Office ONLY):

<table>
<thead>
<tr>
<th>Beacon #</th>
<th>Beacon #</th>
<th>Beacon #</th>
</tr>
</thead>
</table>

**Position Title:** ____________________________________________  **Effective Date (EOD):** ____________________________

This section must be completed indicating requirements of the Administrative Code (12 NCAC 9G) have been met with necessary forms and documentation having been placed in applicant’s personnel file prior to appointment. Failure to complete any item will result in the return of this form.

### Education Information:

- **High School Verified:**
  - Diploma
  - GED Report
  - Transcript
  - Other: ______________

- **College Verified:**
  - Diploma
  - Degree Verification
  - Transcript
  - Other: ______________

- **College Degree:** Type of Degree Awarded (AAS, BA, BS, etc.)

### Criminal History:

- **Date Fingerprint Scanned/Rolled:**
- **Date DCI Checks Completed:**

### Medical Information:

- **Date Psychological Screening Conducted:** ________________
- **Medical Examination Report (F-2):**
  - **Yes**
  - **No**

- **Date Physical Exam Conducted:** ______________________
- **Name of Physician/Physician Assistant/Nurse Practitioner:** ______________________________________________

**STATE OF NORTH CAROLINA**

I hereby certify that each and every statement made on this form, and the N. C. State Application for Employment (PD-107) is true and complete. As the applicant for certification, I attest that I am aware of the minimum standards for employment, that I meet each of those requirements, that the information provided and all other information submitted by me, both oral and written throughout the employment certification process is accurate to the best of my knowledge. **I further understand and agree that any omission, falsification, or misrepresentation of any factor or portion of such information can be the sole basis for termination of my employment and/or denial, suspension or revocation of my certification at any time. I further understand that I have a continuing duty to notify the Commission of all criminal offenses which I am arrested for or charged with, plead no contest to, plead guilty to or am found guilty of. I acknowledge by my signature that my continued employment and certification are contingent on the results of the fingerprint record check and other criminal history records being consistent with the information provided in my State Application.**

Subscribed and sworn to before me, this the _______ day of __________________, 20__ This the _______ day of __________________, 20__

______________________________  ________________________________
Notary Public (Official Seal)          (Applicant’s Signature in Full)

My Commission Expires:  _____________________, 20__

I, as an official representative of the appointing agency, do submit to the Commission the above-named appointee as a candidate for certification. The candidate meets or exceeds each of the minimum standards for employment and this agency has properly conducted the required employment procedures as established by the Commission and incorporated into 12 NCAC 9G. All documents necessary to insure compliance with the rules of the Code are being retained in the personnel files of this agency and may be inspected at any reasonable time by representatives of the Commission. **I acknowledge that any omission, falsification, or misrepresentation of information or procedures, by either the candidate or this Agency, throughout the employment and/or certification process may result in certification being denied, suspended or revoked by the Commission at any time, now or later, and may result in sanctions against this Agency.**

Signature of Executive Officer or Registered Authorized Representative __________________________  Date ________________
(Note: Continuation of Question #6 from Page One. Complete if necessary.)

**Criminal Conviction Record:** All convictions other than minor traffic violations must be reported in the applicant’s own handwriting below. Please note that a “DWI/DUI (alcohol or drugs),” “Duty to Stop in the Event of an Accident,” and “Speeding to Elude Arrest” are NOT minor traffic violations and, therefore, MUST be reported below. Provide all information completely and accurately. Any falsifications or misstatements of fact may be sufficient to disqualify you. If any doubt exists in your mind as to whether you were convicted of a criminal offense at some point in your life, you should check the block labeled, “Criminal Convictions as Reported Below” and give details. You should check the “No Criminal Convictions” block ONLY if you have never been convicted of a Misdemeanor or Felony, or your record/citation was expunged by a judge’s court order. Check one of the following:

6. [ ] No Criminal Convictions  [ ] Criminal Convictions as Reported Below

   (f) Offense: ________________________________________Law Enf. Agency/County/State: ________________________________________
   Date of Conviction: ______________________________ Disposition of Case: ________________________________________________
   Misdemeanor [ ] Felony [ ] Probation [ ] Yes [ ] No  (If yes, give details below).

   (g) Offense: ________________________________________Law Enf. Agency/County/State: ________________________________________
   Date of Conviction: ______________________________ Disposition of Case: ________________________________________________
   Misdemeanor [ ] Felony [ ] Probation [ ] Yes [ ] No  (If yes, give details below).

   (h) Offense: ________________________________________Law Enf. Agency/County/State: ________________________________________
   Date of Conviction: ______________________________ Disposition of Case: ________________________________________________
   Misdemeanor [ ] Felony [ ] Probation [ ] Yes [ ] No  (If yes, give details below).

   (i) Offense: ________________________________________Law Enf. Agency/County/State: ________________________________________
   Date of Conviction: ______________________________ Disposition of Case: ________________________________________________
   Misdemeanor [ ] Felony [ ] Probation [ ] Yes [ ] No  (If yes, give details below).

   (j) Offense: ________________________________________Law Enf. Agency/County/State: ________________________________________
   Date of Conviction: ______________________________ Disposition of Case: ________________________________________________
   Misdemeanor [ ] Felony [ ] Probation [ ] Yes [ ] No  (If yes, give details below).

   (List additional convictions or pending charges on a separate sheet)

**Question # and Explanation:**

Applicant Signature: ___________________________ Date: ___________________________

Signature of Executive Officer or Registered Authorized Representative: ___________________________ Date: ___________________________
**PERSONAL INFORMATION**

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<th>EXAM ID #:</th>
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<tbody>
<tr>
<td>NAME: (Last, First, Middle)</td>
<td>SOCIAL SECURITY NUMBER (last 4 digits):</td>
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<tr>
<td>ADDRESS: (Street, City, State, Zip Code)</td>
<td>□ No change □ Change per below:</td>
</tr>
<tr>
<td>PHONE NUMBER: □ No change □ Change per below:</td>
<td>EMAIL ADDRESS: □ No change □ Change per below:</td>
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**EDUCATION**

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<td>LOCATION: (City, State)</td>
<td>DID YOU GRADUATE?</td>
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<tr>
<td>□ Yes □ No</td>
<td>DEGREE RECEIVED:</td>
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<tr>
<td>MAJOR:</td>
<td>UNITS COMPLETED:</td>
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**WORK EXPERIENCE**

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<tr>
<td>POSITION TITLE:</td>
<td>SUPERVISOR:</td>
<td>MAY WE CONTACT THIS EMPLOYER?</td>
</tr>
<tr>
<td>□ Yes □ No</td>
<td>HOURS PER WEEK:</td>
<td>SALARY:</td>
</tr>
<tr>
<td>DUTIES:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**REASON FOR LEAVING:**

I certify that I have given true, accurate and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, associations, registration and licensing boards, and others to furnish whatever detail is available concerning my qualifications. I authorize investigation of all statements made in this application and understand that false information or documentation, or a failure to disclose relevant information may be grounds for rejection of my application, disciplinary action or dismissal if I am employed, and (or) criminal action. I further understand that dismissal upon employment shall be mandatory if fraudulent disclosures are given to meet position qualifications (Authority: GS 126-30, GS 14-122.1). I also understand that it is my responsibility to update my contact information should there be any changes in my name, address, phone number, or e-mail address.

Applicant Signature: Date:
From I-73/74 (Hwy 220) take Exit 72 for US 64 (Dixie Drive) EAST towards Raleigh. Turn Left onto NC Hwy 42 West. Turn Right onto Dublin Square Road. Turn into the 2nd driveway on the Left.
The forms/documents listed below must be printed and given to the applicant; all reside on the DPS forms page. To ensure the most current version of the forms/documents listed is always used, please do not save them to your hard drive. The links should be accessed and forms/documents printed via the links for each applicant.

Required forms/documents are listed in Step 4 of the CJ Pre-employment Processing Applicant Instructions - Phase I document. Links to applicable forms/documents are as follows:

- **List of Acceptable I-9 documents**: This link is to the I-9 form. Please print the last page of this form. The I-9 form is a direct link to the form owner's site; therefore, it is updated automatically to ensure the most current version is always available.

- NC Department of Revenue Employee's Withholding Allowance Certificate
  1. **NC-4**
  2. **NC-4 EZ**

- **W-4**: Internal Revenue Service Employee's Withholding Allowance Certificate

- **Mandatory Direct Deposit Notification**

- **OSCPXA01**: Direct Deposit Enrollment and Change Form