

North Carolina Sheriffs' Education and Training and Standards Commission North Carolina Department Of Justice Post Office Drawer 629 Raleigh, North Carolina 27602

Telephone: (919) 779-8213 Fax: (919) 662-4515



Report of Appointment - Form F-4 (revised 02/2014)

INSTRUCTIONS: Please type or print all information clearly. This form shall be completed for each individual irrespective of whether service is to be full-time, part-time, paid, unpaid, regular, reserve, auxiliary, honorary, or special. This appointment must be submitted to the Standards Division no later than 10 days after applicant has been appointed pursuant to 12 NCAC 10B .0403(a). A copy must be maintained in the appointing agency's personnel files.

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	ointing Agency ess		<u> </u>	
	ODIN I NG		-	
	ne Number			
	intee's Name:			
	ess	(Middle)	(Last) Zip Code	
	of Birth	Operator's License Number	<u> </u>	
Race	ler: Male Female Asian American Asian American	an Hispanic Cauc	asian Other	
Socia	al Security Number		ullet	
_		Detention Officer Date of Appointme Part Time Full Time	<u> </u>	
docum	ection must be completed indicating that		and Lateral Transfers re code have been met with the necessary forms and ubmitting this application. Original substantiating	
	Oath of Office (Required for Deputy Po	sitions.)		
	Fingerprint Requirement	Submitted Directly to S.B.I./F.B.I. Submitted with application		
	Authorization for Release of In	nformation Form(s)		
	F -1 Medical History Statement (valid for one year) (Signed, and dated by Applicant and Licensed Physician, Nurse Practitioner or Physician's Assistant)			
	F-2 and F-2a Medical Examination Report (valid for one year) (Signed, and dated by Applicant and Licensed Physician, Nurse Practitioner or Physician's Assistant)			
	Drug Screen Results (valid for 60 days)			
	Education Requirement Verifi	· — —	G.E.D. Report Other	
	Firearms Qualification [Day/Night Deputy Scores Enclosed Unauthorized	t Handgun, Shotgun (if authorized), and Comba Detention Officer Scores Enclosed Unauthorized	t Course]	

	F-3 Personal History Statement (Signed, dated by applicant and notarized no more t	nan 120 days prior to the date of appointment)			
	Criminal History Records Checks (Certified county-wide records check from each jurisdiction where the applicant has resided for last 10 years and from the jurisdiction where the applicant attended high school)				
	Summary of Background Investigation (Signed and Dated by Person Conducting Investigation) Attachment must include records checks from:				
	a state wide search of the Admin	istrative Office of the Courts (AOC) compu	terized system;		
	the national criminal record data (DCI) network;	base accessible through the Division of Crin	ninal Information		
	the North Carolina Department of license issued in North Carolina;	of Motor Vehicles, if the applicant has ever pand	possessed a driver's		
	out-of-state motor vehicles check driver's license by a state other t	c from the appropriate agency, if applicant h han North Carolina.	as ever been issued a		
	Copies of any charges (Listed by applicant or revealed in the back)	ekground investigation.)			
Other	<u>Information</u>				
	Previous Law Enforcement Ag	ency	Date of Separation		
	Has the applicant completed th	e <u>mandated</u> in-service training with t	the prior agency(s)? If so, specify		
	The topics completed and when:				
requires employ	applicant for certification, I attest that I aments, that the information provided aborement and certification process is thorough,	ve and all other information submitted by complete and accurate to the best of my known	oyment that I meet or exceed each of those me, both written and oral throughout the owledge. I further understand and agree that hay be the sole basis for termination of my		
employ continu	ment and/or denial or revocation of my ce ed employment and certification are conti	rtification at any time; now or later. If app	licable, I specifically acknowledge that my d check and other criminal history records		
have a to, plea issued	continuing duty to notify the Commissio d guilty to, or am found guilty of; and by a judicial official and which provide:	n of all criminal offenses which I am arre all Domestic Violence Orders (50B) or C	his document. I further understand that I sted for or charged with, plead no contest Civil No Contact Orders (50C) which are sent. This notice must be made in writing disposition of the charge.		
Signatu	re of Applicant/Candidate		Date		
required necessal any real information	ation. The candidate meets or exceeds earlier employment procedures as established ry to insure compliance with the rules of the sonable time by representatives of the C	the Commission and incorporated into the Code are being retained in the personnel commission. I acknowledge that any omist or this Agency, throughout the employment	above named appointee as a candidate for d this agency has properly conducted the 12 NCAC 10B. Copies of all documents files of this agency and may be inspected at sion, falsification, or misrepresentation of nt and/or certification process may result in		
Signatu	re (Sheriff or Authorized Representativ	e) Title	Date		