



**Gabriel A. Morgan**  
*Sheriff*

# Office of the Sheriff

CITY OF NEWPORT NEWS

P.O. Box 57  
224 – 26<sup>th</sup> Street  
Newport News, VA 23607



(757) 926-8759  
Fax: (757) 926-8429

To all perspective applicants:

Welcome to the Newport News Sheriff's Office Hiring Process. If you haven't already completed an application, please visit the city of Newport News employment site at [www.jobs-nngov.com](http://www.jobs-nngov.com) and fill out the Sheriff's Office application.

Once you have filled out and submitted your application, please print this document. Included in this document are the following required forms:

- Information Sheet
- Agility Test Form
- Authorization for Release of Information Form

Note: Your application can not be processed until all necessary form are received and filled out properly.

Thank you for your interest in the Newport News Sheriff's Office. Once your complete application is received, you will be contacted by the Recruitment and Retention Manager with further information.

Good Luck,

Gabriel A. Morgan  
Sheriff

## **Newport News Sheriff's Office Requirements for Employment**

- **Be at least 21 years of age**
- **Be a United States citizen**
- **Have a high school diploma or a GED equivalency certificate**
- **Have a valid Virginia Drivers License and have no more than a minus two (-2) points on driving record**
- **Have an Honorable Discharge (if veteran of the U.S. Armed Forces)**
- Successful completion of a rigorous physical fitness test, to include an agility portion
- Successful completion of a thorough background investigation, including a polygraph examination
- Successful completion of a health examination to include a physical examination and a urinalysis for drug screening
- Must agree to and sign a contract agreeing to refrain from using any tobacco products while employed (both on and off duty)
- Must agree to all conditions of and sign a two year employment contract requiring reimbursement for training and uniform expenses if conditions are not met

### **Disqualifiers:**

- Criminal Record, to include:
  - Conviction of any felony
  - Conviction of an offense involving moral turpitude
  - Conviction of any misdemeanor crime of domestic violence as defined in Title 18 of the Federal Code
- Drug Usage, to include:
  - Substantiated use or illegal act involving the use of any narcotic, controlled substance or dangerous drug, as defined by Federal and/or State law
  - Any use of marijuana and/or hashish within the past two years (from the date of application)
- Military Service Record (if applicable):
  - Dishonorable or Bad Conduct Discharge
  - Under Honorable Conditions Discharges, Article 15s, etc. will be reviewed on a case by case basis

# Information Sheet

Please ensure the following forms (Authorization for Release of Information, Agility Test Form) are filled out completely and **notarized**. Forms must be submitted within 7 business days from application submission. Submit these forms, along with any other documentation to:

**Newport News Sheriff's Office  
Professional Standards Bureau  
Attn: Recruitment & Retention Manager  
224 26<sup>th</sup> Street  
Newport News, VA 23607**

## Required Documents:

- Copy of Valid Driver's License
- Copy of High School Diploma/transcripts, GED or College Degree
- NNSO-Authorization for Release of Information Form (NOTARIZED)
- Three (3) letters of Recommendation (include names, addresses & phone numbers)
- Virginia Department of Motor Vehicles driving record
- Copy of DD214 Member 4 (if applicable)
- Agility Test Form (NOTARIZED)

## Agility Test Requirements:

|                                  |  |
|----------------------------------|--|
| 165lb Dummy Drag (30' distance)  | 30 seconds                               |
| Running Broad Jump (6' distance) | 2 attempts                               |
| Handgun Trigger Pull Test        | 30 pulls/60 seconds                      |
| Stair climb (2 circuits)         | 50 seconds                               |
| ¼ Mile Run (440 yards)           | 1 min, 40 sec (Males)<br>2 min (Females) |

# Newport News Sheriff's Office



224 26<sup>th</sup> Street  
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Fax (757) 926-8429

## Authorization for Release of Information

To: Any Doctor, Physician, Psychologist, Psychiatrist, Dentist, Hospital, Nursing Home, Medical Association, Health Clinics, Polygraph Examiners, Attorneys at Law

U.S. Armed Forces, Maritime Service, Veterans Administration or Association

Any Academic Dean, Registrar, Principal, Guidance Counselor or authorized person at any School, College, University, Business School, Trade School, High School or Elementary School (public or private)

Any Local, State or Federal Law Enforcement Agency

Any Past or Present Employer, Credit Bureau or Retail Merchants Association, U.S. Selective Service System, Division of Motor Vehicles

I, \_\_\_\_\_, address \_\_\_\_\_

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have applied for employment with the Newport News Sheriff's Office, City of Newport News, Virginia. I am aware that my entire background will be

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investigated thoroughly. I hereby authorize and request the release of any and all information you have concerning my background (including a transcript of any academic record) to Newport News Sheriff's Office investigators or representatives, upon presentation of this release or copy thereof.

I also certify that any person(s) who may furnish such information concerning my background shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be as valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

\_\_\_\_\_  
Signature (include maiden name, if applicable) (Date)

STATE OF \_\_\_\_\_, CITY OF \_\_\_\_\_,

This day, \_\_\_\_\_ personally appeared

before me and acknowledged his/her signature to the above statement.

GIVEN under my hand, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

My Commission Expires: \_\_\_\_\_

Signature: \_\_\_\_\_

# Newport News Sheriff's Office

## Agility Test Waiver Form

**Applicant Name:** \_\_\_\_\_  
(Last) (First) (M.I.)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex:  M  F

In consideration of being permitted to complete the application requirements for employment with the Newport News Sheriff's Office by taking the physical agility test, the undersigned hereby releases the Newport News Sheriff's Office and all of its employees and agents, of and from any and all liability, claims, demands, actions and causes of action, whatsoever, arising out of or related to any loss, damage or injury, including death, that may be sustained by the undersigned as a result of taking said agility test.

The undersigned, being duly aware of the physical exertion, risks and hazards involved in taking said agility test, hereby elects voluntarily to take it, and voluntarily assumes all risks of loss, damage or injury, including death that may be sustained as a result thereof.

In signing this release, the undersigned acknowledges and represents that he/she has read the foregoing, understands it, and signs it voluntarily, and that he/she is at least 21 years of age and of sound mind.

Applicant: \_\_\_\_\_ Witness: \_\_\_\_\_

State of \_\_\_\_\_ City of \_\_\_\_\_

Subscribed and Sworn before me this \_\_\_\_ day of \_\_\_\_\_  
20\_\_\_\_.

My commission expires: \_\_\_\_\_, 20 \_\_\_\_\_.