

West Virginia Law Enforcement Agency to which you are seeking employment:

Agency Name

Effective Date : _____/_____/_____

NOTE: Employing agency must complete and submit Change-In-Status reflecting employment in addition to this form being completed



In accordance with WV Code §30-29-11(d); by affixing your signature to this form, the applicant named herein does authorize the Law Enforcement Professional Standards (LEPS) Subcommittee or its designee the release of his or her personnel file from the law-enforcement agency with which they were most recently employed and affirms that the information provided on this form is true and correct.

Signed by: _____/_____
Printed Name Signature

Email address () Phone Number Ext _____



STATE OF
WEST
VIRGINIA
COUNTY OF
Day of _____ 20____.

Taken, Subscribed and Sworn to
Before Me This

My Commission Expires _____.