

 <p style="text-align: center;">WEST VIRGINIA DIVISION OF JUVENILE SERVICES</p>	<p><u>POLICY NUMBER:</u></p> <p style="font-size: 2em; text-align: center;">129.00</p>	<p><u>PAGES:</u></p> <p style="text-align: center;">2</p>
<p><u>CHAPTER:</u> Administration and Management</p>	<p><u>REFERENCE AND RELATED STANDARDS:</u> WV Code Chapter §§ 49-5-16a and 49-5E-1 et seq.; ACA 3-JTS-1C-15; ACA 3-JDF-1C-13; and ACA 3-JCRF-1C-10; Prison Rape Elimination Act (PREA) of 2012, §115.317</p>	
<p><u>SUBJECT:</u> Conditions of Initial and Continued Employment</p>		
<p><u>DATE:</u> April 1, 2015</p>		

POLICY

It is the policy of the West Virginia Division of Juvenile Services to ensure all applicants are appropriately screened prior to employment and employees maintain required conditions of employment.

CANCELLATION

This policy has been reviewed and supersedes Policy 129.00 dated October 9, 2014.

APPLICABILITY

This Policy applies to all Division of Juvenile Services' applicants and employees.

PROCEDURES

1. It is mandatory that all DJS facilities/centers/offices use the same hiring forms.
 - a. Pre-Employment Checklist (Attachment #1): This is a cover sheet for the entire package, indicating whether the applicant is suitable for employment or not.
 - b. Reference Request for Employment (Attachment #2) and Reference Check Form (Attachment #3): This is a form for reference checks from a minimum of three employers.
 - c. Conditions for Initial and Continued Employment (Attachment #4): This form is for Administrative use in determining selection for employment.

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2. A background investigation will be performed on all persons applying for a position with the Division of Juvenile Services.
 - a. The agency shall consult any State or local child abuse registry for information on substantiated allegations of sexual abuse by any potential hire.
 - b. The agency shall consider any incidents of sexual harassment when hiring or promoting any employee.
3. The agency shall conduct a criminal background records check and a child abuse registry check at least every five years for all current employees.
4. Exclusions for employment and automatic rejections include, but are not limited to:
 - a. Prior dismissals from State Government.
 - b. Anyone who has engaged in sexual abuse in a prison, jail, lockup, juvenile facility or other institution; who has been convicted of engaging or attempting to engage in sexual activity facilitated by force, or if the victim did not consent or was unable to consent or refuse; or who has been civilly or administratively adjudicated to have engaged in the above.
 - c. Falsifying any information on any Application or Employment Document or lying during an Interview.
 - d. At least three (3) former employers state that the applicant would not be re-hired.
 - e. Failure to meet minimum requirements of the specified Job Title, i.e.
5. This policy will be adopted in its entirety.

RIGHTS RESERVED

The Director reserves the right to modify, suspend or cancel any provision herein in part or entirety, without advance notice, unless prohibited by law.

APPROVED:



 Director

4/1/15

 Date

**State of West Virginia
DIVISION OF JUVENILE SERVICES
Pre-Employment Checklist**

Name of Applicant: _____

Date: _____

Report Made By: _____

Results:

**Psychological Testing
Where Required** **Recommended
Not Recommended**

**Physical Agility
Where Required** **Pass
Fail**

**Physical Examination
Where Required** **Recommend
Not Recommended**

**Valid Unrestricted Drivers License
Where Required** **Yes
No**

**Fingerprint Results
All Applicants** **Acceptable
Unacceptable**

**Background Investigation
All Applicants** **Acceptable
Unacceptable**

**Child Abuse Registry
All Applicants** **Acceptable
Unacceptable**

**Former Employer
All Applicants** **Would rehire
Would NOT rehire**

**Selective Service Registration
Where Required** **Registered
Not Registered**

Suitable for Employment **Not Suitable For Employment**

Signature of Reporting Employee

WV Division of Juvenile Services
Reference Request for Employment or Continued Employment
with the WV DJS

Date: _____

To: _____ Re: _____

Attention: _____

The applicant named below has provided your name as a reference; a signed release is also provided. We would appreciate it if you would verify the information provided by the applicant on the attached form and answer the additional questions.

We must rely on persons such as yourself to help us determine whether applicants meet the requirements of good character and work ethics. Therefore, we ask that you answer all questions on the attached form as fully and specifically as you can and return the letter and form within seven (7) days.

Facility Contact Name (Print) Title

Facility Contact Name (Signature) Name of Facility

Authorization to Release Information

I, the undersigned, am being considered for employment with the West Virginia Division of Juvenile Services and have willingly consented to having my references contacted for information regarding employment, volunteer, or other activities. Accordingly, I authorize all current and former employers, educational institutions, governmental entities, organizations or individuals to truthfully respond to the enclosed reference request and to provide all the information requested.

I authorize the WV Division of Juvenile Services to conduct a background check on me which includes contacting references, employers, state social services agencies and law enforcement agencies for the purpose of conducting a back ground check, and authorize those persons contacted to release information to the West Virginia Division of Juvenile Services as requested.

This includes my authorization to allow the WV Department of Health and Human Resources to search Child Protective Services records, Adult Protective Services records, Institutional Investigation Unit records and foster care provider records maintained by the WV Department of Health and Human Resources. I also authorize the WV DHHR to inform the person or agency named on this form of the results of the background check, including any history I have had with Social Services.

I release the WV DJS, WV DHHR (pursuant to W.Va. Code § 49-7-1(c)1), law enforcement agencies and/or all its agents in providing information pursuant to this authorization from any and all liabilities, claims or lawsuits.

Name of Applicant (print): _____

Title of Job Applied For: _____

Applicant Signature _____ Date: _____

Reference Check Form

Applicant:	Position Applied For:
Reference:	Title:
Reference's Employer	Reference's Relationship to Applicant:

_____ has applied for a job with the WV Division of Juvenile Services. I understand that he/she worked for you as a (an) _____. Please provide the information requested below.

1. What were this person's dates of employment? _____

2. What were this person's responsibilities in order of importance? _____

3. How would you rate this person's quality and volume of work? _____

4. How would you rate this person's interaction with customers and co-workers? _____

5. What were this person's principal strengths and weaknesses with regard to his/her work? _____

6. How would you compare this person's performance to others with similar duties? _____

7. How would you describe this person's work habits? (i.e., attendance, punctuality, observing office rules and completing assignments on time) _____

8. If you are an institutional employer, please provide any information regarding substantiated allegations of sexual abuse or any resignation during a pending investigation of alleged sexual abuse* _____

* As identified by the Prison Rape Elimination Act of 2003, 42 U.S.C. § 1561 et. seq.

9. Is applicant still employed? YES NO

10. Reason applicant left your employment:

To accept other employment Resigned

Resigned under threat of disciplinary action or during pending investigation of any allegation (explain)

Dismissed (specify reason for dismissal)

Other (please specify)

11. Has the applicant:

Shown any propensity towards violence or violent behavior YES NO

Been involved in sexual harassment (as the harasser) YES NO

12. Would you recommend this person for this position? YES NO

13. Would you re-hire this person? YES NO

14. Are there any additional comments you would like to make? _____

Individual requesting reference: NAME _____ Title _____ DATE _____

* As identified by the Prison Rape Elimination Act of 2003, 42 U.S.C. § 1561 et. seq.

State of West Virginia
DIVISION OF JUVENILE SERVICES
Conditions for Initial and Continued Employment

Prior to employment, the following conditions must be met:

1. Satisfactorily complete and pass an initial interview.
2. Successfully complete and pass a psychological examination. (Treatment only)
3. Successfully complete a medical examination.
4. Successfully complete and pass an initial physical agility test. (Correctional Officers only)
5. Successfully complete and pass a chemical drug screening test, as required.
6. Character and suitability for employment must be verified through an agency inquiry, including, but not limited to, criminal background, child abuse registry, employment history, education, etc.
7. Possess a valid unrestricted driver's license, as required.

Conditions for continuing employment include:

8. Successfully complete forty (40) hours of orientation training.
9. Successfully complete forty (40) hours of annual in-service training requirements.
10. Successfully complete specialized training, as required.
11. Successfully complete the Division of Juvenile Services Basic Training Academy, or request and receive an approved waiver from DJS Training Department. (CO/TX only)
12. Successfully complete a one year probationary period. (Correctional Officer)
Successfully complete a six month probationary period. (All others)
13. Subject to mandatory overtime requirements and must be available for temporary assignment to any location in the State of West Virginia.

I have read and understand the minimum requirements and the conditions of employment as an employee with the West Virginia Division of Juvenile Services. I further understand that if I do not meet all of the minimum requirements of the above, I will not be eligible for employment or may not be retained as an employee.

Date

Signature of Applicant

Date

Signature of Witness