



**GOVERNMENT OF THE VIRGIN ISLANDS  
BUREAU OF MOTOR VEHICLES  
PRE-EMPLOYMENT INTERVIEW**



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

Marital Status: Single/Married/Divorced/Widow

Alias or Nicknames: \_\_\_\_\_

Mr. /Mrs. /Ms. \_\_\_\_\_ Tel. No: \_\_\_\_\_

Physical address: \_\_\_\_\_ P.O. Box \_\_\_\_\_ 008 \_\_\_\_\_

Social security No: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Job Applied For: \_\_\_\_\_

Have you been qualified and notified for this position by Government Personnel? Y/N \_\_\_\_\_

Have you worked for the Government before? Y/N your starting date? \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

High School Attended: \_\_\_\_\_ Last grade completed: \_\_\_\_\_

University: \_\_\_\_\_

Present employment: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Present Salary: \_\_\_\_\_

Are you in good health? Y/N Have you had any medical complaints, or been hospitalized within the last three years? Y/N If yes, please Explain:

\_\_\_\_\_

If you are accepted for employment, when can you start working? \_\_\_\_\_

Have you ever been arrested or convicted of a crime? Y/N If yes, please explain: \_\_\_\_\_



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PLEASE KEEP YOUR PRESENT EMPLOYMENT, UNTIL YOU ARE NOTIFIED BY THE BUREAU OF MOTOR VEHICLES THAT YOUR EMPLOYMENT NOPA HAS BEEN APPROVED AND RECEIVED\*\*\*\*\*

Please state below in your own words why would you want to work with the Bureau of Motor Vehicles:

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\_\_\_\_\_  
**Signature**

**This section is for the use of the Bureau of Motor Vehicles Section only.**

**Action to be taken:**

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