

Application for Employment

Thank you for your interest in employment with the Desloge Police Department.

Attached you will find an application for completion. Please ensure <u>all</u> questions are answered, those questions that do not apply to the position you are seeking should be marked N/A (non-applicable). On page 3 you will find an area where your signature needs to be notarized. This should be done before you turn in your application. Also, listed on page 15 are documents in which copies need to be attached to your application. Applications that are mailed in and are not notarized or have proper attachments will be returned for completion.

<u>APPLICATIONS WILL NOT BE PROCESSED OR REVIEWED WITHOUT FULL COMPLETION OF THE APPLICATION AND/OR REQUESTED DOCUMENT COPIES.</u> All applicants must possess a high school diploma or equivalent and be at least 21 years of age.

Beginning wages are as follows:

Entry Level - \$20.00 per hour After 6 months - \$21.20 per hour

Lateral Transfer - Credit for 1/2 of Full-time experience

All employees receive benefits to include health insurance, dental insurance (dependents for health and dental may be added at employee's expense if desired), life insurance, retirement plans, plus vacation, sick and holiday benefits.

Upon completion of your application, you will be notified when testing dates are scheduled and when to come in and start the testing process. Further instructions will be given at that time concerning the next step in the application process. Depending on what position you are seeking, the hiring process <u>may</u> include written testing, background investigations, medical physicals, drug testing, psychological examination, physical agility testing, voice analysis testing and oral interviews. The hiring process is contingent upon available vacancies.

Applications will remain on file for a period of one year. Updates to your application may be made at any time.

We, at the Desloge Police Department once again would like to thank you for your interest in employment with our agency. We look forward to seeing you in the future as the application process takes place.

Good Luck,

James Bullock Chief of Police Desloge Police Department

-AN EQUAL OPPORTUNITY EMPLOYER-



Application for Employment

#### To Whom It May Concern:

I am an applicant for a position with the Desloge Police Department. The Department needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I applied. It is the public's interest that all relevant information concerning my personal and employment history be disclosed to the above Department.

I hereby authorize any representative of the Desloge Police Department bearing this release to obtain any information in your files pertaining to my employment records, and I hereby direct you to release such information upon request of the bearer. I do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself by and to any duly authorized agent of the Desloge Police Department, whether said records are of public, private or confidential nature. The intent of this authorization is to give my consent for full and complete disclosure. I reiterate and emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal life for the specific purpose of pursuing a background investigation that may provide pertinent data for the Desloge Police Department to consider in determining my suitability for employment in that Department. It is my specific intent to provide access to personnel information, however personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history record, including any arrest records, any information contained in investigative files, efficiency ratings, complaints or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have or have had an interest, attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed.

I hereby release you, your organization and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release you, as the custodian of such records of your organization, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it. I direct you to release such information upon request of the duly accredited representative of the Desloge Police Department regardless of any agreement I have made with you previously to the contrary. The law enforcement organization requesting the information pursuant to this release will discontinue processing my application if you refuse to disclose the information requested.

For and in consideration of the Desloge Police Department acceptance and processing of my application for employment, I agree to hold the Desloge Police Department, its agents and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me with the Desloge Police Department. I understand that should information of a serious criminal nature surface as a result of this investigation such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and disclosure of records, and I waive those rights with the



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understanding that information furnished will be used by the Desloge Police Department in conjunction with employment procedures.

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

This waiver is valid for a period of one year from the date of my signature.

Should there be any questions as to the validity of this release, you may contact me at the address listed on this form.

I agree to pay any and all charges for fees concerning this request and can be billed for such charges at the address listed on this form.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees arising out of or by reason of complying with this request.

Name	_	
Address	_	
City, State, Zip	_	
Phone Number (with area code)	_	
	_	
Signature		
Subscribed and sworn before me this, 20	day of	(Seal)
Notary Public	_	



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#### **PERSONAL DATA**

(This application must be typed or hand printed)

Date of			Position
Application:		_	Seeking:
Name		JR/SR	
First Middle		, ,	Maiden
Date of Birth/	/		
Month Da		Place	of Birth
Social Security Number		_	HeightWeight
Build			Nationality
Marital Status: Single	☐ Married ☐ Sep	parated 🗌 Div	orced 🗌 Widowed
Sex: F M(To be used	for background c	heck only)	
Do you have the legal right *Your employment may be applicant to live and work i	subject to verificat	tion of the Unite	tates?*
List any names that you ha	ve used other tha	n that printed a	above
N Of C			
Name Of Spouse First	Middle	Last	Maiden
Home Telephone		Work Telep	c bhone
Are you a registered voter?	? Yes N	No If yes, wher	re?
Do you have a valid driver'	s license?	s 🗌 No If ye	s, what state?
Are you able to obtain a va	lid Missouri Drive	er's License?	☐ Yes ☐ No
List all of your children and	d dependents incl	uding stepchild	ren and adopted children.
Full Name	Date of Birth	Birthplace	Residence Address
			<del></del>



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		(Use additiona	al sheets if necessary)		
tarting wi ncluding r	th your presen	nt address, list all add )	resses where you have	lived for the past t	en years,
rom:	То:	Address	City/Zip	County	State
o you hav	e any skills th	at would aid you as a	police officer?		



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How does your spouse feel about your being in law enforcement?				
How do your parents feel about your being in law enforcement?				
Check the block indicating your education level:  ☐ GED Certificate ☐ High School Diploma ☐ Associates Degree ☐ Bachelor's Degree ☐ Master's Degree ☐ Doctoral Degree ☐ Technical or Vocational School ☐ Other: Explain				
List all schools you have attended:				
From To School Name Address & Zip Type of Diploma				
What was the major emphasis of study in schools attended?				
Have you ever been dropped from the rolls, expelled, or suspended or asked to leave any school for any reasons? Yes No If yes, explain below:				



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the most recent:					
Address/Zip_					
Telephone			Supervis	or's	
Number			Name		
Title or Job					
Description					
Dates of			Starting	Ending	
Employment _			Salary	Salary	
Reason for Lea	From aving	То			
Address/Zip _ Telephone Number Title or Job Description Dates of Employment _	From	То	Supervis	Ending Salary	
Address/Zip _					
			Supervis		
Telephone					
Number			Name		
Number Title or Job					
Number Title or Job Description					
Number Title or Job Description Dates of				Ending	



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Reason for Leaving				
<u> </u>				
ployer				
Address/Zip				_
Telephone		Supervi		
Number				
Title or Job				
Description				_
Dates of		Starting	Ending	
Employment		_		
From	To	-		
Reason for Leaving				
ployer				
Address/Lip				_
Telephone		Supervi	sor's	
Number		-		
Title or Job		14a1116 _		
Description				
Dates of		Starting	Ending	-
Employment		Salary	Salary	
From	To			
Reason for Leaving				
ployer				
Address/Zip				
				_
Telephone		Supervi		
Number				
Title or Job				
Description				_
Dates of		Starting	Ending	
Employment		Salary	Salary	
From	То			
Reason for Leaving				



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		MILITARY SERV	ICE	
<ul><li>2. Present I</li><li>3. Have you</li><li>4. Type of I</li><li>*A Dishonord</li></ul>	Draft Classification is served in the Ar Discharge*	med Forces? 🗌 YES 🗌		nployment. Other
Describe you	ır military service	2:		
Dates	Branch	Discharge Date	Discharge Type	Rank
-		d entry into any militar		YES NO If yes,
court, Captai	n's Mast, compan	y punishment or subjec	on charges, taken to sun t to any other type of dis ribe	sciplinary action
7. Have you	ı ever served in a	ny foreign military orga	nizations? 🗌 Yes 🗌 No	o If yes, describe _
8. List your	duty stations in	the military:		
From	То	Location		
O 1471				
9. What wa	s your military of	ccupations/training?		



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10. List yo	ur military schools and trai	ning:	
11. List yo	ur awards and medals:		
12. List all	military serial numbers:		
	AR	REST/CONVICTION:	<u>S</u>
Have you ever violations?	plead guilty to or been four Yes No	nd guilty of any felon	y, misdemeanor, and/or ordinance
<u>Violation</u>	<u>Date</u>	<b>Disposition</b>	From Where
<ul> <li>Include</li> </ul>	e all traffic violations that y	ou have pled guilty to	).
		REFERENCES	
Beginning with	n your spouse, list the full n	ames of the members	s of your immediate family.
Name	Relationship	Address/Zip	



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	five character references (not refor at least five years.	latives or in-laws) who are res	sponsible adults and hav
•	Name	Phone #	Work #
	Mailing address		Zip
	Years Acquainted	Occupation	
	Name	Phone #	Work #
	Mailing address		Zip
	Years Acquainted	Occupation	
	Name	Phone #	Work #
	Mailing address		Zip
	Years Acquainted	Occupation	
	Name	Phone #	Work #
	Mailing address		Zip
	Years Acquainted	Occupation	
	Name	Phone #	Work #
	Mailing address		Zip
	Years Acquainted	Occupation	



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Do you have any relatives employed by the City of Desloge? $\square$ Yes $\square$ No $\square$ If yes, please explain:
Have you ever been tested or considered for employment by the City of Desloge?
POLICE TRAINING AND EXPERIENCE
Are you a graduate of a bona fide police academy?
Name of academy
Address of academy
Dates Attended to # Of Training Hours
List other law enforcement training and seminars, including dates and locations. Attach additional sheets if necessary.
Have you ever worked as a police officer, police reserve officer, dispatcher, or in any other capacity related to law enforcement?



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Were you ever disciplined as a police officer or law enforcement employee. $\square$ Yes $\square$ No If yes, explain, including nature of alleged offense and disposition (reprimand, suspension, etc.). Attach additional sheets if necessary.
List any awards and commendations you have received:
Have you applied for a position in law enforcement prior to this? $\square$ Yes $\square$ No
Date Agency Disposition



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List all automobiles yo	ou own:			
Make Model	Year	License	VIN	
Provide the name of y	our automobile insu	rer(s):		
Company	Address		Agent	
Have you ever been de	enied automobile ins	urance or had i	nsurance cancelled?	☐ Yes ☐ No
Lux Klan, students for	a democratic society  No If yes, list the	, Black Panther	munist Party, American Party, Minutemen, or a the dates you belonged	ny similar
movement or group, or subversive, or which hacts of force or violence States or the State of M	r combination of per las adopted or shows te to deny other pers Missouri, or which se ri, by any unlawful or	rsons, which is to sa policy of advons of their rigle eks to alter the	r domestic organization cotalitarian, fascist, commodating or approving the hts under the Constitution form of government of the lal means?	munists, e commission of on of the United the United States,



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#### REQUIREMENTS

This application WILL NOT be processed or reviewed without the following documents attached:

- 1. Birth Certificate
- 2. Copies of all training certificates and degrees declared
- 3. Copy of high school diploma or equivalency
- 4. Copy of valid Missouri or other drivers license
- 5. Military Form DD214 (If applicable)

Please use the front and back of this page to further explain all answers you did not have room for in this application. Please note the question in your response.