

STATE OF ARKANSAS

COMMISSION

ON

LAW ENFORCEMENT STANDARDS AND TRAINING

PERSONAL HISTORY STATEMENT



**CAMMACK VILLAGE POLICE DEPARTMENT
2710 N. MCKINLEY
LITTLE ROCK, AR 72207
501-663-4593**

Chief Peter M. Powell

Honesty

One of the fundamental requirements of working in law enforcement is the ability of an individual to adhere to and demonstrate the highest legal and ethical standards. The Cammack Village Police Department has an UNWAVERING stand on untruthfulness and dishonesty that requires the dismissal of any employee who engages in such misconduct.

In addition the state certifying agency, the Arkansas Commission on Law Enforcement Standards and Training (ARCLEST), also operates under the same philosophy and will revoke the officer certification of police officers in Arkansas who are untruthful or dishonest.

If you are untruthful, dishonest, knowingly omit, falsify, conceal or obscure required information or engage in any similar misconduct or deception during any part of the application process, you will be permanently disqualified from ever being employed by the Cammack Village Police Department.

Information regarding a candidate's disqualification is also shared with ARCLEST.



Chief Peter M. Powell

PERSONAL HISTORY STATEMENT

Cammack Village Police Month _____ Day _____ Year _____

INSTRUCTIONS: Fill out this questionnaire completely and accurately. All statements in your questionnaire are Subject to verification. Incorrect statements may bar or remove you from employment. If space provided is Inadequate, add additional pages and identify information by item number. If a question does not apply to you, indicate by writing N/A in the answer blank. Type or print legibly in ink all responses.

PERSONAL:

1. NAME _____ / _____ / _____
 First Middle Last Social Security Number

Nicknames or Aliases _____

2. Height _____ inches Weight _____ lbs.

3. Present Mailing Address: _____
 Street and Number City State Zip Code

Permanent Mailing Address: _____
 Street and Number City State Zip Code

Telephone Number: Home: _____ Business: _____

4. Date of Birth: _____ Place of Birth: _____

5. Citizenship: U.S. Born U.S. Naturalized Other-Specify: _____

6. List organizations, clubs and associations of which you are or have been a member, or with which you are or have been associated.

7. List hobbies and/or special skills. _____

MARITAL:

8. Marital Status (check one) Single Married Divorced

Engaged Separated Widowed

9. Names of Spouse or Fiancée. _____

10. If married, are you living with your spouse? **F3-1** _____ Yes _____ No

If not, state reasons: _____

11. Have you ever been separated or divorced? ____Yes ____No. If yes, give date and location of court or jurisdiction.

12. Give the following information concerning your spouse's parents:

	NAME	ADDRESS
Father		
Mother		

13. List below every child born to you.

NAME	BIRTHDATE	PLACE OF BIRTH	WITH WHOM RESIDES

14. Are you now supporting all children born to you, adopted by you and stepchildren? ____Yes ____No

15. Have you ever been involved as defendant in a paternity proceeding?

If yes, give date and court or jurisdiction _____

REFERENCES:

16. Give the names of five responsible persons, other than relatives or past employers, who could provide information about your character, ability, experience, personality and other qualities:

NAME	ADDRESS	TELEPHONE

FAMILY HISTORY:

17. List your parents, brothers and sisters:

	NAME	ADDRESS	TELEPHONE
Father			
Mother			
Bro./Sis.			
Bro./Sis.			
Bro./Sis.			

18. Has any member of your immediate family ever been arrested for or convicted of a felony offense?
 _____ Yes _____ No. If yes, complete the following:

<u>DATE</u>	<u>LOCATION</u>	<u>CHARGE</u>	<u>DISPOSITION</u>
_____	_____	_____	_____
_____	_____	_____	_____

FINANCIAL:

19. Do you have life insurance and/or hospitalization insurance? _____ Yes _____ No

20. Have you a savings account? _____ Yes _____ No

Bank _____ City and State. _____

Bank _____ City and State. _____

21. Do you have a checking account?

Bank _____ City and State. _____

Bank _____ City and State. _____

22. Do you own or have an interest in any type of business dealing in alcohol?

_____ Yes _____ No. If yes, give name, location and type of business. _____

23. Do you own or are you buying your own home? _____ Yes _____ No

Is there a mortgage on the property? _____ Yes _____ No

Bank or Company _____ City and State _____

24. Do you own or are you buying other real estate? _____ Yes _____ No

Bank or Company _____ City and State _____

25. List motor vehicles that you own or are buying or leasing:

Make	Model	Year	Amount Owed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

26. What other income other than salary do you have at present? Include spouse's salary.

27. List Credit References:

Name of Firm	_____	_____
Street Address	_____	City and State
_____	_____	_____
_____	_____	Amount Owed _____
Name of Firm	_____	_____
Street Address	_____	City and State
_____	_____	_____
_____	_____	Amount Owed _____
Name of Firm	_____	_____
Street Address	_____	City and State
_____	_____	_____
_____	_____	Amount Owed _____
Name of Firm	_____	_____
Street Address	_____	City and State
_____	_____	_____
_____	_____	Amount Owed _____
Name of Firm	_____	_____
Street Address	_____	City and State
_____	_____	_____

28. What is your total indebtedness at present? _____

29. Have your creditors treated you fairly? _____ If not, explain: _____

30. Have you ever been sued? _____ Yes _____ No. If yes, give details: _____

RESIDENCES:

31. List Addresses for past 10 years starting with present address at top:

FROM MO. YR.	TO MO. YR.	ADDRESS/RESIDENCE	CITY & STATE	LANDLORD
	PRESENT			

WORK HISTORY:

32. Are you now or have you ever been engaged in any business as an owner, partner, or corporate board member?

_____ Yes _____ No. If yes, give details below: _____

33. If you have ever been discharged or forced to resign because of misconduct or unsatisfactory service, give details: _____

34. Have your employers always treated you fairly? _____ Yes _____ No. If no, explain: _____

35. Do you object to wearing a uniform? _____ Yes _____ No

36. Do you object to working nights? _____ Yes _____ No

37. Do you object to working shifts? _____ Yes _____ No

38. List all jobs you have held in the last ten years. Put your present or most recent job first. If you need more space, you may attach additional sheets. Include military service in proper time sequence and temporary part-time jobs.

A. Title of present or last position _____ Starting _____ Last _____
Salary _____ Salary _____
Date Employed: _____ Name and Title of Supervisor: _____ No. employees supervised by you: _____
Date Separated: _____ Employer _____ Address _____
Full-time Yrs. _____ Mos. _____ Duties _____
Part-time Yrs. _____ Mos. _____
If part-time, # of hours worked _____ Reason for leaving: _____
Per week: _____

B. Title of present or last position _____ Starting _____ Last _____
Salary _____ Salary _____
Date Employed: _____ Name and Title of Supervisor: _____ No. employees supervised by you: _____
Date Separated: _____ Employer _____ Address _____
Full-time Yrs. _____ Mos. _____ Duties _____
Part-time Yrs. _____ Mos. _____
If part-time, # of hours worked _____ Reason for leaving: _____
Per week: _____

C. Title of present or last position _____ Starting _____ Last _____
Salary _____ Salary _____
Date Employed: _____ Name and Title of Supervisor: _____ No. employees supervised by you: _____
Date Separated: _____ Employer _____ Address _____
Full-time Yrs. _____ Mos. _____ Duties _____
Part-time Yrs. _____ Mos. _____
If part-time, # of hours worked _____ Reason for leaving: _____
Per week: _____

D. Title of present or last position _____ Starting _____ Last _____
Salary _____ Salary _____
Date Employed: _____ Name and Title of Supervisor: _____ No. employees supervised by you: _____
Date Separated: _____ Employer _____ Address _____
Full-time Yrs. _____ Mos. _____ Duties _____
Part-time Yrs. _____ Mos. _____
If part-time, # of hours worked _____ Reason for leaving: _____
Per week: _____

39. Have you previously submitted an application for employment with this agency? ___Yes___ No
Approximate date: _____

MILITARY SERVICE

40. Were you ever in the U.S. Military Service or any other military organization? ___Yes___ No

Branch of Service _____ Unit _____ Date of Enlistment _____

Date of Discharge _____ Service Number _____ Highest Rank _____

41. List medals and decorations: _____

42. Type of Discharge: _____

43. If you are presently a member of the National Guard or any military reserve, give the unit, location, and describe your obligation: _____

44. List all schools attended:

Name of School	Location (City and State)	From Mo. & Yr.	To Mo. & Yr.	Year Completed
Grade				
High School				
College or University				

45. Did you either graduate from high school or pass the high school equivalency test? YES NO

46. List college degrees received and major field of each. Include incomplete courses:

47. Were you ever expelled from any school or were you ever disciplined by any school official?
___ Yes ___ No. If yes, explain: _____

ARREST AND MILITARY DISCIPLINARY

Answer all of the following questions completely and accurately. Any falsifications or misstatements of fact may be sufficient to disqualify you. (Exclude minor traffic violations.)

48. Have you ever been **arrested** or **detained** by police? ___ Yes ___ No. If yes, give details below:

Incident: _____ Police Agency _____

Date _____ Disposition of Case _____

Incident: _____ Police Agency _____

Date _____ Disposition of Case _____

49. Have you ever been placed on probation? ____ Yes ____ No. If yes, give details below: _____

50. Have you ever been required to pay a fine in excess of \$25.00? ____ Yes ____ No. If yes, give details below: _____

51. Have you ever been reported as a missing person or as a runaway? ____ Yes ____ No. If yes, give complete details, including Jurisdiction, dates, and outcome: _____

52. Were you ever court-martialed, tried on charges, or were you the subject of a summary court, deck court, captain's Mast or company punishment, or any other disciplinary action while a member of the armed forces?

____ Yes ____ No. If yes, explain below:

53. List any disciplinary action taken against you in the National Guard or other reserve unit: _____

54. If you have ever been fingerprinted by a police agency other than for an arrest, give details below. Your answers will be checked with the FBI and other agencies.

Agency _____ Date _____ Purpose _____

Agency _____ Date _____ Purpose _____

Agency _____ Date _____ Purpose _____

55. Can you operate a motor vehicle? ____ Yes ____ No

56. Do you possess a valid operator's license from the State of Arkansas? ____ Yes ____ No

Operator's License Number _____ Date issued _____

57. Do you possess an operator's license issued by any state other than Arkansas? ____ Yes ____ No

If yes, give state and number, _____

58. Was your operator's license ever suspended or revoked? _____ Yes _____ No. If yes, state which and give reasons: _____

59. Was your license ever restored. _____ Yes _____ No. When? _____

60. Have you ever been refused an operator's license by any state? _____ Yes _____

61. Have your driving privileges ever been restricted? ___ Yes ___ No. If yes, give details: _____

62. Has a motor vehicle being driven by you ever been involved in an accident? _____ Yes _____ No.

If yes, give the complete details for each accident whether collision or non-collision: _____

Date: _____ Police Investigation? _____ Yes _____ No

Location: _____ Cause of Accident _____

Date: _____ Police Investigation? _____ Yes _____ No

Location: _____ Cause of Accident _____

63. List any convictions for minor traffic violations:

LOCATION	APPROX. DATE	NATURE OF VIOLATION	PENALTY OR DISPOSITION

ATTITUDES

64. What do you consider to be the current social problems of greatest concern?

65. What are your experiences and beliefs concerning the use of alcoholic beverages?

66. What are your experiences and beliefs concerning the use of marijuana and/or other mind-altering drugs?

67. What are your feelings about the use of deadly force if it became necessary in the performance of official duties?

CAREER OBJECTIVES

68. Explain briefly your reasons for applying for this position: _____

I hereby certify that all statements made in this questionnaire are true and complete and understand that any misstatements of material facts will subject me to disqualification or dismissal.

NOTICE - False swearing is a Class A misdemeanor. Punishable under Arkansas Code 5-53-103.

Signature in Full

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC, THIS _____ DAY

OF _____, 2024

MY COMMISSION EXPIRES _____

AUTHORIZATION TO RELEASE INFORMATION

I _____ as an applicant for employment with the Cammack Village Police Department, agree in order to process my application, certain information must be obtained. This release is valid for a period of one year from the date shown below.

I hereby authorize, request, and direct educational institutions; my references; my employers (past and present); financial institutions of any kind; credit bureau or consumer reporting agencies; medical institutions and doctors; military records; and any other person; institution; or organization; and all governmental agencies, (local, state, federal, or foreign) wherever said individuals or organizations are situated; to release to the Chief of Police of Cammack Village or his representative any document, information; record or file that he deems material to the processing of my application for employment; said information can be furnished if the request there for is made in person or in writing.

Further I hereby release you as custodian of such records and all of said individuals and organizations; including it's officers, employee's or related personnel; both individually and collectively; from any and all liabilities 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.

Further, I appoint the Chief of Police of Cammack Village or his representative as my agent and attorney in fact for the sole purpose of collecting information for processing my application and direct that he be permitted to inspect all of said files and information; and be permitted to make copies thereof at his discretion. This request can be treated as if I were making the request in person. Should there be any question as to the validity of this release you may contact me as indicated below.

Name: _____

Address: _____ Phone # _____

Social Security# _____ Date of Birth _____

Signature: _____

This instrument was acknowledged before me on the ___ day of _____ 2024.

By _____

Notary Public