



APPLICATION FOR POLICE EMPLOYMENT

Please Print

AN EQUAL OPPORTUNITY EMPLOYER

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department

Date of Application _____

Name _____ Social Security # _____
Last First Middle

Address _____
Street City State Zip Code

Telephone # () Other Phone # ()

E-mail Address _____

Have you ever been employed here before? If yes, give dates _____ Yes No

Are you legally eligible for employment in this country? Yes No

Date available for work ____ / ____ / ____ What is your desired salary range? \$ _____

Are you able to meet the attendance requirements of the position: Yes No

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? Yes No

If yes, please provide date(s) and details _____

Answering "yes" to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Driver's License Number and Issuing State _____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the City Manager.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.



I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____ / ____ / ____

Perry Police Department Application Procedures

Applicants must complete and return all application and background forms to the City of Perry on or before any return date listed in the advertisement. This job application must be submitted, a resume only is not sufficient.

With this initial application (attached), at a minimum you must provide copies of the following documents:

High School Diploma (or G.E.D. certificate)
College Transcript
Military Discharge (DD214)
Birth Certificate
Recent photograph (head & shoulders) to assist with background investigation

These documents will not be returned. Do not send originals.

Your application must be received on or before any return date listed in advertisement.

Those applicants who appear qualified may receive additional materials and forms that must be completed and returned to complete the application process.

Those applicants who appear best suited for the position will be subject to an extensive background investigation, criminal history checks, written examinations, physical agility testing, oral examinations, and psychological examinations during the hiring process.

Applicants who provide an incomplete application, fail to provide requested information, who provide misleading or false information, or submit information after the specified deadline(s) will be removed from further consideration for employment.

Those applicants passing all of these examinations, tests, and checks may be subject to drug testing, psychological examination(s), and/ or polygraph examination. Those successful candidates may then be subject to the post offer pension physical examination. The City may require the candidate to submit to a second physical examination by the City's physician, based on direct threat considerations.

Applicants for the position of part-time (also known as reserve) police officer, or police dispatcher may be administered a post-offer physical examination instead of the pension physical examination.

Your application will remain on file for a period of one (1) year after the date of the application. This pool of applications may be utilized during this period to fill any openings during that time period. The fact that you were not selected for any immediate openings does not necessarily mean that you will not be considered for other openings that arise during this one year period.

The City of Perry is an Equal Opportunity Employer.

GENERAL INFORMATION

--	--	--

LAST NAME

FIRST

MIDDLE

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY NUMBER: _____ D.O.B. _____

DRIVER'S LICENSE NUMBER: _____ STATE: _____

HOME PHONE: () _____ OTHER PHONE: () _____

EMAIL ADDRESS: _____

(If you indicate an email address, all correspondence regarding your application will be sent to your email address. This is the preferred method. If you do not indicate an email address, all correspondence will be sent by US Mail to the address you listed above)

List any other name(s) you have been known by: _____

List any other social security numbers you have used: _____

Date of application: _____ Date available for work: _____

Check the appropriate box for each question	YES	NO
The positions of police officer, and police dispatcher, involve shift work. This includes working during daytime, evening, nighttime, weekends and holidays. Are you available to work shift work?		
For the position of police dispatcher, you must be at least 18 years of age. For the position of police officer you must be at least 21 years of age. Are you at least the minimum age for the position you are applying for?		
This position may involve operating a motor vehicle. Do you have a current valid driver's license?		
Has your driver's license ever been suspended, revoked, canceled, or otherwise denied?		
Have you ever been convicted of a felony in this state, or any other state?		
Do you have any previous experience in the capacity for which you are applying?		
Are you certified as a police officer in this, or any other state? If yes, indicate state:		

Have you ever worked for this City? [] Yes [] No
 If yes, list name(s) used and dates: _____

Are you related to any City employee, or any member of the City Council? [] Yes [] No

Have you applied with this Police Department before? [] Yes [] No
 If yes, list name(s) used and dates: _____

**DRIVING HISTORY
CRIMINAL HISTORY**

Your driver's license number: _____ Issuing State: _____

List all traffic tickets you have received in the last 5 years.

Date	Charge	City/County/State	Disposition

Do you have liability insurance on the vehicles you operate? Yes No
 Have you ever had your insurance policy canceled? Yes No

List below all traffic accidents you have been involved in, regardless of fault, in the last 5 years:

Date	Location (city, county, state)	Cause of accident

Since age 18, have you ever been arrested? Yes No
 If yes, complete the following:

Date	Charge	Where arrested	Disposition

The City is concerned with your ability to perform the job and will not at this time consider your need for reasonable accommodation, except as necessary to complete the application process. If after reviewing your application form, verifying your responses, conducting a background investigation, it appears you would need reasonable accommodation to perform the essential job functions or demonstrate performance in the examination process, the parties will explore these alternatives. Remember, the City conducts a pre-employment exam, which will determine whether you can do the essential functions of the job without substantial risk or harm to yourself and/or the public.

Place a check mark in the appropriate box	YES	NO
Are you a United States Citizen?		
If no, are you legally eligible to work in the United States?		

(Verification will be required upon employment, and failure to furnish such documentation will be cause for separation)

Have you applied with any other police department in the last 5 years? Yes No

If yes, list:

Date	Department	City	State

The use of these drugs as necessary for medical procedures, and under the supervision of a medical doctor, should be excluded when considering your answer:

Have you ever used illegal drugs, to include speed, PCP, marijuana, heroin, crack, cocaine or their derivatives? Yes No

Have you ever sniffed glue, paint, lacquer, gasoline, or any other substance with the intent of getting "high?" Yes No

Have you used any of the above substances within the last 6 months? Yes No

Have you ever been fingerprinted?

Yes No

If yes, complete:

Date	By whom (agency)	Purpose

Has your spouse ever been arrested since age 18? If so, list:

Date	Reason arrested	Location of arrest

EDUCATION

List all Colleges, Universities that you have attended.

College	City/State	Major	Minor	Degree earned

11. List the High School(s) you attended

School name	City, State	Grade completed

Do you have a high school diploma, or G.E.D.? Yes No

Have you ever been expelled or suspended from any school, dropped out, or withdrawn because of poor scholastic standing? Yes No

If yes, explain: _____

EMPLOYMENT HISTORY

Starting with your current, or most recent, employer, list all jobs you have held for the last 10 years.

From	To	Employer name/address	City/State	Phone	Type of duties & Reason for leaving

If you have no prior law enforcement experience, explain what actions you have taken that you feel help qualify you for this position:

Have you ever been fired, suspended, or put on inactive status (other than for prior workers compensation cases) by any of your previous employers? **Yes** **No**

If yes, specify which employer and circumstances:

Do you have any special licenses, training, or volunteer experience that would help us determine your suitability for this position? If so, list:

17. If you are a CLEET certified officer, provide academy number, location, and date.

Type of academy: CLEET Basic CLEET Reserve Academy

List any military experience you may have:

Dates	Service Branch	Duties	Type of discharge

19. Have you in the last 10 years been engaged in any business as an owner, partner (active or silent), or officer? **Yes** **No** If yes, complete:

Date(s)	Name of Business	Nature of Business	Your association

This question deals with subversive organizations. For this purpose, subversive organizations shall mean any group or organization which does not support local, State, and Federal Laws, and which advances it's beliefs through violence and/or force.

Have you advocated, advised, or taught the doctrine that the government of the United States of America or any state or political subdivision thereof should be overthrown by force, violence, or any unlawful means? **Yes** **No**

Are you now, or have you ever been a member of, any subversive organization?
 Yes **No**

Have you ever been connected, or affiliated in any manner with, or have you ever attended meetings of any subversive organizations?
 Yes **No**

Have you ever paid, collected, or solicited any money, dues, or contributions to, for or on behalf of any subversive organization? **Yes** **No**

If any response to a question in this section is "yes", attach a statement to this application indicating the circumstances.

FINANCIAL

List any outstanding loans that you are the signer, or co-signer of:

Date	Lender	Original loan amount	Current status

Have you ever been more than 30 days delinquent on an outstanding loan, credit card, or other credit account? **Yes** **No** If yes, please explain:

RELATIVES

Provide the following information about yourself:

Spouse name	address	City, State, Zip	# years married

Spouse birthdate	Spouse place of birth (City, State)

Former spouse name	address	City, State Zip	Year divorced

Children's name(s)	address	City, State, Zip	Age

Brother/sister name	address	City, State, Zip	Phone number

Father's name	address	City, State, Zip	Phone number

Mother's maiden name	address	City, State, Zip	Phone number

25. Which of your previous jobs did you like best, and why?

26. Which of your previous jobs did you least like, and why?

Have you ever been served with a Summons or Subpoena to appear in Court? (Do not count Jury Duty, or in a law enforcement officer capacity? **Yes** **No**

Do you know of any other information that we have not asked for that, if discovered, could be detrimental to the consideration of your application? If so, you have the opportunity to disclose this information below at this time. If you have omitted or withheld any information that was asked for in this application, it may be cause for the rejection of your application, or if you are accepted for employment, it may be cause for the termination of your employment. (We are not in this question interested in your physical or mental ability to do the job).

Have you ever stolen anything of value? **Yes** **No**

If your answer is yes, please indicate when, what it was, your age at the time, the circumstances and how often it happened.

STATEMENT OF TRUTHFULNESS AND PERMISSION TO INVESTIGATE

(to be signed in the presence of a Notary Public)

READ CAREFULLY BEFORE SIGNING!

I certify that I am the person named above and within this application, and that the facts and information given within this application are true and complete to the best of my knowledge. In signing this statement I do so with the understanding that the truthfulness of all statements herein will be investigated and if any are found incorrect, incomplete, or misleading, may render me ineligible for employment with the City of Perry.

I hereby grant permission to the City of Perry to investigate any information contained in this application. I understand that this application is not a contract of employment. I hereby release the City of Perry and its agents from all liability in making any investigation and inquiry relative to information contained in the application forms. I understand that if employed, false or misleading statements given in this application or interview(s), or the failure to provide or document the requested information, may result in discharge of employment. I understand that I am required to abide by all rules, regulations, and policies of the City of Perry if I am accepted for employment and that if so accepted I will serve a probationary period of at least twelve (12) months.

I hereby authorize any City, County, State, Federal Agency, or former employer or any individual listed in this application form to furnish to any officer of the City of Perry Police Department any information concerning me necessary to process this application. A copy and/or facsimile copy of this authorization shall be considered as valid as the original.

I agree to submit to a pre-employment drug screen and a post offer medical examination.

Date: _____ Signature: _____

Subscribed and sworn to by _____, before me, a Notary Public, this

_____ day of _____, 2_____.

Notary Public

(seal)

My commission expires: _____

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I hereby authorize any sworn Police Officer or other authorized representative of the City of Perry Police Department bearing this release, or a copy thereof, within six (6) months of its date, to obtain information from your files pertaining to my employment, credit, financial status, credit history, or educational records, including but not limited to credit history, academics, achievements, attendance, athletics, personal (non-medical) history, employment history, financial payments and obligations, and disciplinary records. I hereby direct you to release such information upon request of the bearer.

This release is executed with full knowledge and understanding that the information is for the official use of the Perry Police Department. Consent is granted for the Perry Police Department to furnish such information as is described above, as third parties, in the course of fulfilling its official responsibilities.

I hereby release you as the custodian of such records, and any school, college, university, or other educational institution, credit bureau, lending institutions, consumer reporting agency, or retail business establishment 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 hereby acknowledge that information obtained in the background investigation is confidential and will not be released to the applicant. I acknowledge that this is important in order to obtain objective and unbiased information. I will not attempt to obtain from the City of Perry a copy of any background information obtained by the City of Perry.

A copy of this authority to release will be as valid as the original. Should there be any question as to the validity of this release, you may contact me as indicated below.

Date: _____ Signature: _____

Printed full name: _____

Current address: _____

Phone number: (_____) _____

Subscribed and sworn to before me, a Notary Public, this

_____ day of _____, 2_____.

Notary Public

(seal)

My commission expires: _____

**CITY OF PERRY POLICE DEPARTMENT CONFIDENTIAL
INFORMATION AGREEMENT FORM**

A thorough investigation will be conducted to determine your qualifications for the position for which you have applied. To a great extent, your ability to be qualified for employment will depend on information obtained on this application, and in confidential interviews with persons with whom you have been associated, including the personal references and relatives you have listed in the application, as well as other persons.

If the reason(s) for your non-acceptance are of a temporary nature, whereby you could be accepted at a later date, you will be so notified. Failure to be certified and hired at the present time does not indicate that you cannot re-apply at a later date, but that other candidates provided experience, education, and background data that appeared more suitable for employment.

By completing and returning this initial application you have completed one step in the process of applying for employment with the City of Perry Police Department. If your initial application is suitable, you may receive additional materials that must be completed and returned within the deadline period for those materials, and failure to complete and return any such materials, providing insufficient or misleading information, or failure to submit to, or appear for, further testing and evaluations will result in your application being withdrawn from further consideration.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENT

Date: _____ Signature: _____

Once you have completed the application, and have verified your answers, this application, along with the required documents, should be submitted immediately to:

MAIL:
City of Perry
PO Drawer 798
Perry, Oklahoma 73077

DELIVERED:
622 Cedar Street
Perry, Oklahoma 73077

E-MAILED:
hr@cityofperryok.com

FAXED:
580-336-4111