

Date Received _____

Date Hired _____

Lamar Police Department Employment Application

Read every question and answer each question accurately. All entries, except signature, must be **printed** legibly with black ink, or typewritten. If a question does not apply to you, write "N/A" in the space. Leave no empty spaces. Please provide copies of your diploma or G.E.D., State of Missouri P.O.S.T. certification, and any specialized training certificates you have received that would be relevant.

Name _____ Social Security Number ____-____-____

Address _____ Home Phone (____) _____

Work Phone (____) _____ Are you A U.S. Citizen? _____ Were you Naturalized? _____

Height _____ Weight _____ Hair _____ Eyes _____ D.O.B. ____/____/____ P.O.B _____

List any other names you have ever used:

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1. Starting with your **present** address, list all addresses where you have lived for the past 10 years, including military service.

From	To	Street Address	City	State	Zip

2. Have you ever applied for a position with any police department? No Yes If yes, when: _____

What position _____ What Department _____ Were you hired _____

3. Have you ever received any police training? No Yes If yes, when: _____ Where _____

Type(s) of training: _____

References

4. List four character references who are responsible adults and who have known you well during the past three years or longer. Do not list relatives.

Name	Address Phone (Home and Work, or cell)	Years Acquainted
	Hm () Wk ()	
	Hm () Wk ()	
	Hm () Wk ()	
	Hm () Wk ()	

Driving History

5. List all driver's and chauffeur's licenses you hold now, have previously held, and indicate if you have ever had your license revoked or suspended.

State	Type License	Licnese Number	Expiration Date	Revoked or Suspended ?

6. Have you ever been sentenced to a Driver Improvement school? No Yes If yes, when _____
Where _____

7. List all driving citations or summons you have received as an adult or juvenile, beginning with the most recent.

Month /Year	Charge	City or State	Disposition

8. List all traffic accidents in which you have been involved in for the past five years.

Date	Location / details

9. Have you ever been denied auto insurance or had your insurance cancelled? No Yes If yes, explain _____

Arrest History

10 Have you ever been arrested, charged, questioned, accused, warned or detained, for any offense, or alleged violation of any statute, Ordinance, law or regulation, by any civil or military authority, either in this country or any other country? No Yes

If yes, explain _____

Date	Charge	City, County, State	Disposition	Agency

11. Have the police ever been called to your home for any reason? No Yes If yes, explain _____

School

12. List all schools you have attended; Elementary, Middle, High, College, University

Dates	School Name	City, State, Zip	# of Years	Diploma

13. Have you ever been suspended, expelled, or asked to leave any school for disciplinary reason? No Yes

If yes, explain _____

Employment History

14. Beginning with your present or most recent employer, list ALL places you have worked, in proper reverse order. List periods of school, military service and unemployment. List everything for the past ten years. Keep in proper sequence and omit nothing; including full time, part time, temporary or seasonal. Use an addition piece of 8½ "by 11" paper if necessary.

Dates From / To	Name Address	Job Title	Supervisor Name	Start Salary End Salary
/				
Describe your duties				
Reason for Laving				
Dates From / To	Name Address	Job Title	Supervisor Name	Start Salary End Salary
/				
Describe your duties				
Reason for Laving				
Dates From / To	Name Address	Job Title	Supervisor Name	Start Salary End Salary
/				
Describe your duties				
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/				
Describe your duties				
Reason for Laving				
Dates From / To	Name Address	Job Title	Supervisor Name	Start Salary End Salary
/				
Describe your duties				
Reason for Laving				

15. Have you ever been dismissed or asked to resign from any employment? No Yes If yes, explain in detail, giving company and particulars. _____

The information requested on this application will be used for references by the Lamar Police Department in consideration of your application for employment with the City of Lamar, MO. An extensive background investigation will be conducted into your personal history.

Any false, misleading, or incomplete information substituted for accurate information will be grounds to disqualify you for employment. Applicants may be requested to take a polygraph (lie detector) or a voice stress examination to confirm information in this application. If you should need more space to completely and accurately answer any question, use and addition sheet of 8 1/2" x 11" paper and attach it to this application form.

Please confirm, by signing below, that you have read and understand the entire application.

Signature _____ Date _____

Lamar Police Department

Lamar, Missouri

Certificate of Applicant
Authorization for Release of Information
(Read Carefully Before Signing)

I (print full name) _____ hereby certify that all statements made on or in connection with this application are true, accurate, and complete to the best of knowledge and belief. I understand and agree that any misstatements or omissions of material facts will cause forfeiture on my part of all rights to employment as a Law Enforcement Officer with the Lamar Police Department.

I hereby authorize all law enforcement agencies, the Veterans' Administration, all military agencies, all federal, state and/ or local government agencies, state and federal tax bureaus, credit bureaus, schools and universities, to furnish the holder of this release with all and any available information regarding me in order that he may determine my suitability for police work. _____

I authorize the holder of this release to make inquiry of my present and past employers regarding my character, integrity and reputation. _____

I authorize the release of any and all information regarding my employment, credit, arrest, and/or conviction records, or any other information, whether personal or otherwise, that may or may not be on their records, release said company, person, agency, or academy from all liability for any damage, whatsoever, that may issue from furnishing such information to the holder of this release. The applicant questionnaire may be released to any law enforcement agency. _____

I authorize the Lamar Police Department to obtain arrest information records that may be confidential or closed. _____

A photostatic or Xerox copy of this authorization will be considered as effective and valid as the original. _____

Applicant Signature _____ Date _____

State of _____ County _____ (Or City of St. Louis, MO)

Subscribed and sworn before me, This _____ day of _____ 20_____

NOTARY PUBLIC Signature _____ Commission expires _____

NOTARY PUBLIC Name (typed or printed) _____

NOTARY PUBLIC EMBOSSED SEAL

NOTARY PUBLIC RUBBER STAMP

