



# *Freeport Police Department*

## APPLICATION FOR EMPLOYMENT

**INSTRUCTIONS:** Please complete this application completely and accurately. All statements are subject to verification. If you need more space to complete an answer please use the continuation sheet at the end of this application. Use the term "DNA" (does not apply) if the question does not apply to you.

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Position applied for: \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_

Typing skills: \_\_\_\_\_ words per minute. (A computer typing test will be administered)

Have you ever been employed by the City of Freeport before?       Yes       No

Are you legally eligible for employment in the United States?       Yes       No

**EDUCATION:** Name and location of school.

High School: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ Degree: \_\_\_\_\_

Business / Trade: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ Degree: \_\_\_\_\_

College/University: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ Degree: \_\_\_\_\_

Graduate/Prof.: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ Degree: \_\_\_\_\_

**CONTINUING EDUCATION and/or SPECIAL TRAINING or SKILLS:**

List additional information that would be of benefit in the job for which you are applying i.e., computer experience.

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**PREVIOUS EMPLOYMENT:** Begin with the most recent position.

Current or most recent employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ Job Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ May we contact?  Yes  No

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ Job Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ May we contact?  Yes  No

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ Job Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ May we contact?  Yes  No

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ Job Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ May we contact?  Yes  No

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ Job Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ May we contact?  Yes  No

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ Job Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ May we contact?  Yes  No

**CRIMINAL HISTORY:** (as an adult)

Have you ever been convicted of a criminal offense?  Yes  No

If yes, explain: \_\_\_\_\_

Date: \_\_\_\_\_ By Whom (Police Agency): \_\_\_\_\_

**\*\*A conviction record will not necessarily bar you from employment with this agency.\*\***

**REFERENCES:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**ADDITIONAL INFORMATION:** Please include any other information you think would be helpful when considering your application for employment.

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**CONTINUATION:** Indicate which question you are answering and then complete in the space provided.

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*Please read and understand this statement before signing your application:*

The information I have provided in this Application for Employment is true, correct and complete. False, incomplete, or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the Freeport Police Department to contact and obtain information about me from previous employers, educational institutions, and “references” I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 30 days. After that date, unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand the Freeport Police Department may terminate my employment at any time, with or without cause and without prior notice, unless required by law.

**I fully understand and accept all terms and conditions in the above statement.**

**Applicant’s Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

*FOR EMPLOYER'S USE ONLY*

<b>REFERENCE CHECK</b>		
Employer	Person Contacted	Results

<b>TEST RESULTS</b>		
Test Administered	Score	Pass/Fail

<b>INTERVIEW RESULTS</b>
Interviewer Name and Comments