



# 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" section at the end of this application. Use the term "DNA" (Does Not Apply) if the question does not apply to you.

Full Name: \_\_\_\_\_

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

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

Phone # \_\_\_\_\_ Email Address: \_\_\_\_\_

Position Applied for: \_\_\_\_\_ Are you over the age of 18? ☐ Yes ☐ No

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

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

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

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

Did you graduate? ☐ Yes ☐ No Degree: \_\_\_\_\_

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

Did you graduate? ☐ Yes ☐ No Degree: \_\_\_\_\_

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

Did you graduate? ☐ Yes ☐ No 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 your most recent position.

**Current**

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

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ May we contact? ☐ Yes ☐ No

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

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ May we contact? ☐ Yes ☐ No

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

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ May we contact? ☐ Yes ☐ No

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

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Dates Employed: from \_\_\_\_\_ to \_\_\_\_\_ May we contact? ☐ Yes ☐ No

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

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

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

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

If YES, explain: \_\_\_\_\_

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

**REFERENCES:**

Name: _____	Relationship: _____
Address: _____	Phone #: _____
Name: _____	Relationship: _____
Address: _____	Phone #: _____
Name: _____	Relationship: _____
Address: _____	Phone #: _____

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONTINUATION:** *Please indicate which question you are answering and then complete in space provided.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***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:** \_\_\_\_\_

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