

POLO POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied for	Date of Application
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How did you learn about us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-in
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other

Last Name	First Name	Middle Name
Address	Street	City
		State
		Zip Code
Telephone Number		Social Security Number

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If yes, give date. _____

Have you ever been employed with us before? Yes No

If yes, give date. _____

Are you currently employed? Yes No

May we contact your employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? Yes No

Proof of citizenship or immigration status will be required upon employment

On what date would you be available to work? _____

Are you available to work: Full Time Part Time Shift work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you ever been arrested and/or convicted of a felony? Yes No

If yes, explain: _____

Employment Experience: Start with your present or last job, include any job-related military service assignments, and volunteer activities. You may exclude organizations which race, color, religion, national origin, disabilities or protected status.

Employer _____	Dates employed _____	Worked _____	Performed _____
Address _____			
Telephone numbers _____	Hourly rate/Salary _____	Startling _____	Final _____
Job Title _____	Supervisor _____		
Reason for leaving _____			

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Job Title _____	Supervisor _____		
Reason for leaving _____			

Please attach continuation if more space is needed.

List professional, trade, business, or civic activities and offices held. _____

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience

Specialized skills

(check skills/equipment operated)

Microsoft Works _____
RIUCR Reporting _____

Microsoft windows _____
Radar Speed Gun _____

Perform Pro _____
Weapons Certification _____

Computer Languages (list) _____

Breathalyzer operator _____ Other _____

Do you have a valid Driver's license? _____ Yes _____ No

State any additional information you feel may be helpful to us in considering your application _____

References

Name _____ Phone number _____

Address _____

Name _____ Phone number _____

Address _____

Name _____ Phone number _____

Address _____

List your addresses for the last 5 years _____

Applicant's statement: I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature _____ Date _____

Notes: