

Salary \$ _____ per _____ (Hour, Week, Month)

Reason For Leaving
Or wanting to leave: _____

May we contact this employer? Yes No

Second Most Recent Employer

Full Time Part Time
 Volunteer

Company Name City/state () _____
Phone Number of Supervisor

From _____ to _____
Date Employed Job Title Supervisor Name

DUTIES: _____

Salary \$ _____ per _____ (Hour, Week, Month)

Reason For Leaving _____

May we contact this employer? Yes No

Third Most Recent Employer

Full Time Part Time
 Volunteer

Company Name City/state () _____
Phone Number of Supervisor

From _____ to _____
Date Employed Job Title Supervisor Name

DUTIES: _____

Salary \$ _____ per _____ (Hour, Week, Month)

Reason For Leaving _____

May we contact this employer? Yes No

Fourth Most Recent Employer

Full Time Part Time
 Volunteer

Company Name City/state () _____
Phone Number of Supervisor

From _____ to _____
Date Employed Job Title Supervisor Name

DUTIES: _____

Salary \$ _____ per _____ (Hour, Week, Month)

Reason For Leaving _____

May we contact this employer? Yes No

Fifth Most Recent Employer

Full Time Part Time
 Volunteer

Company Name City/state () _____
Phone Number of Supervisor

From _____ to _____

Date Employed

Job Title

Supervisor Name

DUTIES: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason For Leaving _____

May we contact this employer? Yes No

Sixth Most Recent Employer

Full Time Part Time
 Volunteer

Company Name City/state Phone Number of Supervisor () _____

From _____ to _____
Date Employed Job Title Supervisor Name

DUTIES: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason For Leaving _____

May we contact this employer? Yes No

Seventh Most Recent Employer

Full Time Part Time
 Volunteer

Company Name City/state Phone Number of Supervisor () _____

From _____ to _____
Date Employed Job Title Supervisor Name

DUTIES: _____

Salary \$ _____ per _____ (Hour, Week, Month) Reason For Leaving _____

May we contact this employer? Yes No

ATTACH ADDITIONAL SHEETS IF NECESSARY to provide 10 years work experience

MILITARY EXPERIENCE:

Branch of Service: _____ Dates of Service: _____ Discharge Classification: _____

DRIVING RECORD: You are applying for a position that will require driving. Please complete the following.

Driver's License Number: _____ Class: _____ State of Issue: _____

Expiration date: _____ List type, date, and disposition of all traffic violations within past 5 years.

WORK REFERENCES: Include only individuals familiar with your work ability. Do not include relatives.

Name

Phone #

Address, City, State, Zip

1 _____

2 _____

3 _____

Are you related to anyone currently employed by the Township of Brownstown? If yes, provide name and relationship.

Name/s _____ Relationship _____

_____ Relationship _____

_____ Relationship _____

Screening Checklist for Police Officer Applicants

I, _____ (*print name*), am willing to undergo a comprehensive background investigation, including contacts with all references, employers, co-workers, close personal associates and family, and agree to allow a representative of the Brownstown Police Department to review my driving record, credit history, criminal records and history, and military records. I understand that I will submit to a pre-employment psychological evaluation, physical evaluations and a urinalysis drug test. I am aware that failure to fully submit to these listed reviews and evaluations will be grounds for disqualification from the selection process.

Signature _____

AN IMPORTANT MESSAGE ABOUT TRUTHFULLNESS...

One of the fundamental requirements of working in law enforcement is the ability of an individual to adhere to and demonstrate the highest legal and ethical standards. The Brownstown Police Department has an unwavering stand on untruthfulness and dishonesty that can result in the dismissal of an employee who engages in such misconduct.

The same standard applies in the hiring and selection process. Unfortunately, it is our experience that a number of applicants in each hiring process will fail due to such misconduct. **If you are untruthful, dishonest, knowingly omit, falsify, conceal or obscure required information, or engage in any similar misconduct or deception during any part of the application and hiring process, you may be permanently disqualified from being employed by the Brownstown Police Department.** Information regarding a candidate's disqualification may also be made available to other law enforcement agencies with an authorized request.

Please circle the correct answer to the following questions. If you answer "yes" to any question you must provide additional information about the circumstances, including dates. Attach additional pages if necessary. A "Yes" answer may not automatically bar an applicant from employment, however, you must provide detailed information about each "Yes" response. Failure to provide the information requested will disqualify you from the process. The relationship of the conviction to the job, as well as the severity and the passage of time will all be considered.

Have you ever:

1. Been convicted by any court of a felony or entered a guilty or nolo contendere plea? Yes or No _____
2. Used any illegal drugs in the last 2 years? Yes or No _____
3. Used any hallucinogenic drugs? Yes or No _____
4. Used Heroin, PCP, steroids or methamphetamine? Yes or No _____
5. Been arrested for DWI or DUI in the last three years? Yes or No _____
7. Sold any illegal drug at any time in your life? Yes or No _____
8. Been convicted of, or entered a guilty plea to any assault in a domestic setting? Yes or No _____
9. Falsified any document, form, testimony, or pleading as an officer of the court or as a witness? Yes or No _____
10. Omitted, misstated or falsely stated any information, in writing or orally during an application process with any agency? Yes or No _____

