Bridgeville Police Department

APPLICATION INSTRUCTIONS

1. Answers must be typed, or handwritten legibly in black ink

2. Answer all questions completely and accurately. Incomplete applications will not be accepted.

3. Answer each question thoroughly and honestly.

4. The following documents must be submitted with this application
   - Birth Certificate (photocopy)
   - High School Diploma (photocopy)
   - College Transcripts
   - Driver’s License (photocopy)
   - Signed Social Security Card (photocopy)
   - Military discharge papers (photocopy)
   - Certified copy of driving record

5. If you have any contact of an investigative or prosecutable nature with any law enforcement agency during any phase of the selection process, immediately contact the Chief of Police or senior officer on duty.
BRIDGEVILLE POLICE DEPARTMENT

APPLICATION FOR EMPLOYMENT

(PLEASE PRINT CLEARLY)

To Applicant: We deeply appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualification and may assist us in possible future upgrading.

PERSONAL INFORMATION

Name: ____________________________ Date of Birth: __________

   Last       First       Middle

Social Security No: _______________ Driver’s License No: __________ State: ________

Present Address: 

   No.       Street       City       State       Zip

Telephone No: _______________________

Position(s) applied for: __________________ Rate of pay expected $ ______ per week

Do you have any physical condition, which may limit your ability to perform the particular job for which you are applying? ______ If yes, describe such condition: ________________________________

_____________________________________________________________________________

_____________________________________________________________________________

What method of transportation will you use to get to work? _______________________

Would you work full-time? ______ Part-time? ______ If part time, specify what days and hours: _______________________

Were you previously employed by us? ______ If yes, when? _______________________

List any friends or relatives working for us: ___________________________________________

Name(s)

If you application is considered favorably, on what date will you be available for work? ________
EMPLOYMENT HISTORY

List below all present and past employment, beginning with your most recent. If additional space is needed, please attach another sheet.

<table>
<thead>
<tr>
<th>Name, Address and Phone Number of Company and Type of Business</th>
<th>From</th>
<th>To</th>
<th>Describe the work you did</th>
<th>Starting Weekly Salary</th>
<th>Ending Weekly Salary</th>
<th>Name of Supervisor</th>
<th>Reason for Leaving</th>
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**EMPLOYMENT CONTINUATION**

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<tr>
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<th>To</th>
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Phone #
Type of business:

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Type of business:

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</table>

Phone #
Type of business:
# EDUCATION

<table>
<thead>
<tr>
<th>SCHOOL</th>
<th>NAME AND ADDRESS OF SCHOOL</th>
<th>COURSE OF STUDY</th>
<th>CHECK LAST YEAR COMPLETED</th>
<th>DID YOU GRADUATE?</th>
<th>LIST DIPLOMA OR DEGREE</th>
</tr>
</thead>
<tbody>
<tr>
<td>ELEMENTARY</td>
<td></td>
<td></td>
<td>5 6 7 8</td>
<td></td>
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<tr>
<td>HIGH SCHOOL</td>
<td></td>
<td></td>
<td>9 10 11 12</td>
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<tr>
<td>COLLEGE</td>
<td></td>
<td></td>
<td>1 2 3 4</td>
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<tr>
<td>OTHER (SPECIFY)</td>
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<tr>
<td>OTHER (SPECIFY)</td>
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</table>

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with our organization?

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# PERSONAL REFERENCES
(Not Former Employers or Relatives)

<table>
<thead>
<tr>
<th>Name and Occupation</th>
<th>Address</th>
<th>Phone Number(s)</th>
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# PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

In making this application for employment, I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends, or others whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report that is made.

DATE ___________________ APPLICANT'S SIGNATURE ___________________
Confidential Employee History

1. Applicant’s Current Address:
   Address ________________________________
   City __________ County __________ DE ______ Zip ______
   Phone Number(____) ____________________

2. Applicant’s Social Security Number _______ - _______ - _______

3. Spouse’s Name and Address (if different)
   Name __________________________________
   Address __________________________________
   City __________ County __________ DE ______ Zip ______
   Phone Number(____) ____________________

4. Children’s Name and Ages:

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>Address (if different than applicant)</th>
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</table>

Former Spouse(s) Name and Address

Name __________________________________

Address __________________________________

City __________ County __________ DE ______ Zip ______

Phone Number(____) ____________________
<table>
<thead>
<tr>
<th>Name of Drug</th>
<th>Tried</th>
<th>Purchased</th>
<th>Sold</th>
<th>First Time (mm/yy)</th>
<th>Last Time (mm/yy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana/THC</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Hashish</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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<tr>
<td>PCP/ Angle Dust</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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<tr>
<td>STP/ Speed</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Mushrooms/ Psilocybin</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Heroin</td>
<td># of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Cocaine</td>
<td># of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Crack</td>
<td># of times ___</td>
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<td>Quaaludes</td>
<td># of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Opium</td>
<td># of times ___</td>
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<td>Uppers/ Downers</td>
<td># of times ___</td>
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<td>Valium</td>
<td># of times ___</td>
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<td>Speedballs</td>
<td># of times ___</td>
<td>#of times ___</td>
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<td>Rohypnol</td>
<td># of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Inhalants/ Whippets</td>
<td># of times ___</td>
<td>#of times ___</td>
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<td>LSD</td>
<td># of times ___</td>
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<tr>
<td>GHB/GBL</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Steroids</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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<tr>
<td>Other Drugs Name:_________</td>
<td># of times ___</td>
<td>#of times ___</td>
<td>#of times ___</td>
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</tbody>
</table>
Residences

Actual places of residence for the past 10 years - list chronologically all address, including residences while attending school and in the military. Attach a separate sheet of paper for additional residences if necessary.

<table>
<thead>
<tr>
<th>From: mo/yr</th>
<th>To: mo/yr</th>
<th>Street Address</th>
<th>City</th>
<th>County</th>
<th>State</th>
<th>Zip</th>
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**Arrest History/Court Data**

1. Have you ever been arrested, charged or received a notice or summons to appear for any criminal violations  __Yes  __No

2. Have you ever been convicted or charged with any felony or misdemeanor  __Yes  __No

3. To your Knowledge, have any of your family members been arrested for a felony or misdemeanor  __Yes  __No

4. If you answered yes to questions 1, 2, or 3, please explain in detail on separate piece of paper.