

## Gervais Police Department Employment Application

Date:					Position	on:							
Name:			st			First					Mi	iddle	
Addres	ee.												
Addres		Νι	ımber & Stre	et				State			Ziį	p	
Home	Phone:				Work Ph	none:							
Cell: _					_ E-Mail:	<u> </u>							
Date o	f Birth: _												
Other	name(s)	you have	used or are	knov	wn by (ind	cluding maide	en name if	applica	able): _				
Please	e list all so	chools atte	nded starting	ı with		UCATION ecent and end	ing with hig	gh schoo	ol.				
From Mo/Yr	To Mo/Yr	Name/Location of School			ool	Graduated Y/N	Major	Major			Degree		
					OFDT		<u> </u>						
List all	current ar	ıd applicat	ole certification	ns, in		IFICATIONS lice certification							
Certification			Exp. Date			Certificati	ion		Ехр. І	Date			
	•	ever		in	the	RY SERVIC Armed	Forces		the			States?	
Date o	f Entry:								e and	Туре	of [	Discharge:	
I (2)auu	-enorme	u:											

## **EMPLOYMENT**

From Date	Current Employer		Phone					
To Date	Mailing Address		Supervisor's Name					
Position/Duties		Reason for Le	l aving					
May we contact?Yes	No	1						
From Date	Employer		Phone					
To Date	Mailing Address	Supervisor's Name						
Position/Duties		Reason for Le	aving					
May we contact?Yes	No							
From Date	Employer		Phone					
To Date	Mailing Address		Supervisor's Name					
Position/Duties		Reason for Le	aving					
May we contact?Yes	No							
From Date	Employer		Phone					
To Date	Mailing Address		Supervisor's Name					
Position/Duties		Reason for Le	aving					
May we contact?Yes	No	1						
COURT AND POLICE RECORD  Have you ever been arrested or charged with any crime that is punishable as a misdemeanor or violation, other than traffic citations? YesNoIf yes, explain fully, including date, location, charge(s) and final disposition. (Use additional pages if necessary.)  Have you ever been arrested or charged with any crime that is punishable as a felony under state or federal law? YesNoIf yes, explain fully including date, location, charge(s) and final disposition. (Use additional pages if necessary.)								
A control Programme	DRIVING STATUS							
Are you licensed to operate a motor vehicle? YesNo DL # & State:No Have you ever had your driver's license suspended, revoked or cancelled? YesNo If yes, please explain:								

## **ADDITIONAL CONSIDERATIONS**

Signed	Date
tions of the preceding statemes such misrepresentation, falsification, falsification for employment, subsequent in omission, it will be just cause finvestigation and agree to not status change, or any information.	nere are no willful misrepresentations or omissions in or falsifica- ents and answers. I am aware that should investigation disclose cation or omissions in any documents I submit or statements I n process, my application will be rejected. If after my acceptance nvestigation should disclose misrepresentation, falsification or for immediate dismissal. I understand that this is a continuing ify the Gervais Police Department of any address, job or marital tion that may reflect any changes. I understand that my date of mation is being collected on this application in order to ensure I ons for this position.
Why are you interested in this	position?
List any additional qualification	is, specialized training and/or skills for the position.
List any additional qualification	ns, specialized training and/or skills for the position.