**CITY OF FAIR GROVE**



**Police Department Application Instructions**

Thank you for your interest in applying for a position with the Fair Grove Police Department. Please take a moment to read through these instructions before completing your application packet.

In order to complete the electronic application, click “Enable Editing” to begin. Fill out all applicable forms, boxes and spaces as requested. When ready to submit, save your file and email it to the address listed below. NOTE – \*\*This application works best with Microsoft Word 2013\*\*

Be sure to read through the entire application packet and fill out all questions and spaces completely. If you cannot answer a particular question, please denote this with ‘‘N/A”. Do not leave any spaces blank. Incomplete applications will not be considered.

Please list all pertinent licenses, certifications and skills you hold by their applicable name (i.e. SFST, Radar/LIDAR, BAC Type III, etc.)

For applicants who are attending a recognized law enforcement academy who have not graduated at the time of application, please note your anticipated graduation date on the Missouri POST Certification Number line.

When mailing or delivering your packet to the Fair Grove Police Department or Fair Grove City Hall, be sure to include copies of all of your law enforcement/public safety licenses and certificates for review. Completed applications can be emailed to [Recruiting@fairgrove.org](mailto:Recruiting@fairgrove.org).

**FAIR GROVE POLICE DEPARTMENT**



POLICE OFFICER APPLICATION

Applicant Name: Click or tap here to enter text.

Missouri POST Certification Number: Click or tap here to enter text.

Position Sought:

Full-Time Police Officer

Part-Time Police Officer

Reserve Police Officer

**Application Information Form**

The CITY OF FAIR GROVE is and Equal Opportunity/Affirmative Action Employer. We request that you voluntarily provide the following information which will be used to study recruitment and employment patterns and to provide, as requested, statistical data to certain federal compliance agencies. This information WILL NOT be used in the employment process; and failure to provide the requested information WILL NOT jeopardize your opportunity for employment with the CITY OF FAIR GROVE POLICE DEPARTMENT.

Applicant Name: Click or tap here to enter text. DATE: Click or tap to enter a date.

Title of job for which you are applying: Choose an item.

**Sex and RACE/ETHNIC IDENTIFICATION**

**Sex (check one)** Male  Female

**Race/Ethnicity** (To Equal Opportunity, race/ethnic categories are identified as follows:)

White – (Not of Hispanic origin). All persons living in any of the original peoples of Europe, North African or the Middle East.

Black – (Not of Hispanic origin). All persons having origins in any of the Black racial groups of Africa.

Hispanic – All persons of Mexican, Puerto Rican, Cuban or Central or South American or other Spanish culture of origin, regardless of race.

Asian/Pacific Islander – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.

- Other

**REFERRAL SOURCE(S)**

How did you learn about this job position?

City Employee

College/University

Human Resources Department Posting

Job Fair

Newspaper Advertisement

Relative/Friend

Trade Magazine

Unemployment office/Missouri Workforce

Website (specify which site)

Other (specify) Click or tap here to enter text.

PERSONAL REFERENCES

Please list three professional or personal references that may be contacted regarding a character assessment. All references must have been known for no fewer than three (3) years. Do not include family members or current supervisors/managers/employers. All references should include a name, current phone number, address and your relationship with the reference. “See Resume” will not suffice as a reference list.

Reference 1: Name: Click or tap here to enter text.

Occupation: Click or tap here to enter text.

Address: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Relationship and Years Known: Click or tap here to enter text.

Reference 2: Name: Click or tap here to enter text.

Occupation: Click or tap here to enter text.

Address: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Relationship and Years Known: Click or tap here to enter text.

Reference 3: Name: Click or tap here to enter text.

Occupation: Click or tap here to enter text.

Address: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Relationship and Years Known: Click or tap here to enter text.

**APPLICATION FOR EMPLOYMENT**

FAIR GROVE POLICE DEPARTMENT

Last Name, First Name, Middle Initial

Click or tap here to enter text.

Residence Address

Click or tap here to enter text.

City State

Click or tap here to enter text.Choose an item.

Zip Code

Click or tap here to enter text.

Any Alias Name(s):

Click or tap here to enter text.

Driver’s License Number Click or tap here to enter text. Issuing State: Choose an item.

Driver’s License Expiration Date:Click or tap to enter a date.

Social Security Number: Click or tap here to enter text.

Phone Number : Click or tap here to enter text.

Email Address: Click or tap here to enter text.

**MILITARY SERVICE**

**No Service/Did Not Serve -**

Service Branch: Choose an item. Dates of Service: Click or tap here to enter text.

Serial Number: Click or tap here to enter text.

Type of Discharge: Click or tap here to enter text.

**APPLICATION FOR EMPLOYMENT**

FAIR GROVE POLICE DEPARTMENT

Have you ever been discharged or asked to resign from employment: Yes  No

Have you ever been convicted of, or pled guilty to, any federal, state or municipal criminal offense? (Including any traffic and misdemeanor offenses Yes  No

If “Yes”, please list any and all convictions and dates, including any arrests regardless of conviction

Click or tap here to enter text.

Do you object to an inquiry of your present employer with regards to your current employment? Yes  No

Are you a citizen of the United States? Yes  No

If “No”, are you legally permitted to work in this country Yes  No

Work permit type and number: Click or tap here to enter text.

Date issued: Click or tap here to enter text.

Do you currently possess a Social Security Card? Yes  No

**EDUCATION RECORD**

Did you graduate from high school? Yes  No

Name and address of last high school attended: Click or tap here to enter text.

If “No”, what was the last grade completed Click or tap here to enter text.

If “No”, do you have a high school equivalency certificate? Yes  No

**VOCATIONAL EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| NAME AND LOCATION | COURSE STUDY | DIPLOMA, CERTIFICATION OR DEGREE | CREDIT HOURS EARNED |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |

**COLLEGE OR UNIVERSITY (UNDERGRADUATED, GRADUATE OR PROFESSIONAL)**

|  |  |  |  |
| --- | --- | --- | --- |
| NAME AND LOCATION | COURSE STUDY | DIPLOMA, CERTIFICATION OR DEGREE | CREDIT HOURS EARNED |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |

Did you graduate from a college, university or technical/vocational/junior college? Yes  No

If your employment or education records are filed under a different name, please provide those names:

Click or tap here to enter text.

**POLICE APPLICANTS ONLY**

Have you successfully completed a state certified law enforcement academy? Yes  No

If “Yes”, which academy Click or tap here to enter text. and graduation date? Click or tap to enter a date.

**Please answer the following questions if you are currently enrolled in a Missouri POST certified law enforcement academy:**

List your academy name, location, academy/learning coordinator’s name or contact person(s):

Click or tap here to enter text.

When do you anticipate receiving your POST license?

Click or tap to enter a date.

Please list your law enforcement skills and training:

Click or tap here to enter text.

Please list your valid or non-expiring law enforcement or public safety certifications and licenses you currently hold:

Click or tap here to enter text.

Do you have any relatives who are employees of the Fair Grove Police Department or City of Fair Grove?

Yes  No

If “Yes”, list their names and departments they work in: Click or tap here to enter text.

List any social media accounts you currently use: Choose an item.

**EMPLOYMENT HISTORY**

List below in order of MOST RECENT to LEAST RECENT, your employment history, beginning with your current employer for the past ten (10) years. If more than one position or classification has been held within a given organization or company, list each position or classification as a separate period of employment. Be sure to specifically describe each assignment or military service. Under “Specific Duties”, explain your tasks including any kind of work, supervisory or technical responsibilities so as to give a clear picture of the jobs you have performed.

\*\*See Resume\*\* will not suffice as a listing of previous employment and will not be considered

1. Present/Most recent employer: Click or tap here to enter text. Job Title: Click or tap here to enter text.

Employer Address: Click or tap here to enter text.

Dates Employed: Click or tap to enter a date. to Click or tap to enter a date.

Employer Phone Number: Click or tap here to enter text.

Supervisor: Click or tap here to enter text. Total Years Employed: Choose an item.

Starting Salary: Click or tap here to enter text. Current Salary: Click or tap here to enter text.

If part time, #of hours worked each week: Choose an item.

Duties performed: Click or tap here to enter text.

Reason for leaving: Click or tap here to enter text. May we contact? Yes  No

1. Present/Most recent employer: Click or tap here to enter text. Job Title: Click or tap here to enter text.

Employer Address: Click or tap here to enter text.

Dates Employed: Click or tap to enter a date. to Click or tap to enter a date.

Employer Phone Number: Click or tap here to enter text.

Supervisor: Click or tap here to enter text. Total Years Employed: Choose an item.

Starting Salary: Click or tap here to enter text. Current Salary: Click or tap here to enter text.

If part time, #of hours worked each week: Choose an item.

Duties performed: Click or tap here to enter text.

Reason for leaving: Click or tap here to enter text. May we contact? Yes  No

1. Present/Most recent employer: Click or tap here to enter text. Job Title: Click or tap here to enter text.

Employer Address: Click or tap here to enter text.

Dates Employed: Click or tap to enter a date. to Click or tap to enter a date.

Employer Phone Number: Click or tap here to enter text.

Supervisor: Click or tap here to enter text. Total Years Employed: Choose an item.

Starting Salary: Click or tap here to enter text. Current Salary: Click or tap here to enter text.

If part time, #of hours worked each week: Choose an item.

Duties performed: Click or tap here to enter text.

Reason for leaving: Click or tap here to enter text. May we contact? Yes  No

1. Present/Most recent employer: Click or tap here to enter text. Job Title: Click or tap here to enter text.

Employer Address: Click or tap here to enter text.

Dates Employed: Click or tap to enter a date. to Click or tap to enter a date.

Employer Phone Number: Click or tap here to enter text.

Supervisor: Click or tap here to enter text. Total Years Employed: Choose an item.

Starting Salary: Click or tap here to enter text. Current Salary: Click or tap here to enter text.

If part time, #of hours worked each week: Choose an item.

Duties performed: Click or tap here to enter text.

Reason for leaving: Click or tap here to enter text. May we contact? Yes  No

**EMPLOYMENT HISTORY**

Please list any gaps in employment and reasons for the gaps: Click or tap here to enter text.

If any of your previous employers required an additional certification, license or skill, please list them here including any and all expiration dates for certifications or licenses:

Click or tap here to enter text.

**AUTHORIZATION FOR RELEASE OF INFORMATION AGREEMENT**

I, (full name) Click or tap here to enter text., hereby authorize any representative of the City of Fair Grove and/or the Fair Grove Police Department bearing this request to obtain any information in your files pertaining to my employment and I hereby direct you to release such information upon request of the bearer. I do hereby authorize a review of, and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the City of Fair Grove, whether said records are of public, private or confidential in nature. The intent of this authorization is to provide full and free access to the background history of myself for the specific purpose of pursuing a background investigation that may provide pertinent data for the City of Fair Grove to consider in determining my suitability for employment. It is my specific intent to provide access to personal or confidential information as it may appear.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and my reputation, my military service records, my education records, my financial status, my driving record, my criminal history record (including any arrest records), any information contained in investigatory files, efficiency ratings, complaints or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had interest; attendance records, polygraph examinations, and any internal affairs investigations and disciplines, including any files which are deemed to be confidential and/or are sealed.

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release you, as a custodian of such records of your organization, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct you to release such information upon request of the duly accredited representative of the City of Fair Grove regardless of any agreement I may have made with you to the contrary.

For and in consideration of the City of Fair Grove’s acceptance of processing my application for employment, I agree to hold the City of Fair Grove, its agents and employees harmless from any and all small claims and liability associated with my application for employment or in any way connected with the decision if to employ me with the City of Fair Grove. I understand my rights under Title V (5), United States Code, Section 552a: the Privacy Act of 1974, with regards to access and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the City of Fair Grove in conjunction with employment procedures.

This waiver is valid for a period of one (1) year from the date of my signature.

Should there be any questions as to the validity of this release, you may contact me at the address listed on this form.

I agree to indemnify and hold harmless the person to whom this request is presented and his/her agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney fee arising out of or due to complying with this request.

*Please fill out all information requested below. By typing your name, you are certifying you are the signatory party to this release.*

FULL NAME: Click or tap here to enter text.

RESIDENCE ADDRESS: Click or tap here to enter text.

CITY: Click or tap here to enter text. STATE: Choose an item. ZIP CODE: Click or tap here to enter text.

PHONE NUMBER: Click or tap here to enter text.

DATE OF BIRTH: Click or tap here to enter text. SSN: Click or tap here to enter text.

DRIVER’S LICENSE NUMBER: Click or tap here to enter text. STATE: Choose an item.

OTHER STATES IN WHICH YOU HAVE HELD A DRIVER’S LICENSE: Choose an item.

OTHER NAMES AND/OR ALIASES USED: Click or tap here to enter text.

SIGNATURE: Click or tap here to enter text. Initials: Click or tap here to enter text. DATE: Click or tap to enter a date.