

***Submit completed application in person or email:
jeremytaylor@cityofcordele.com. Use "Application" in the subject line***

Cordele Police Department

501 N 7th St
CORDELE, GA 31015
(229) 276-2921

Employment Application



Applicant's full name: _____

Position applied for:

☐

Patrol Officer

☐

Detective

☐

Front Desk Clerk

☐

Animal Control

☐

School Crossing Guard

☐

FOR OFFICIAL USE ONLY

☐

Assigned for Background

Received by HR
(Date and Initial)

Reviewed by CPD
(Date and Initial)

☐

Not Assigned for Background

Updated 07-09-19

CORDELE POLICE DEPARTMENT

How did you find out about this position? _____

Personal Documentation List

Your interest in employment with the Cordele Police Department is greatly appreciated. In order to properly process your background investigation, a photocopy of the following documents.

Required Documents

_____ Social Security Card
_____ or Naturalization Card or
_____ Authorization to work in the U.S.
_____ Valid Drivers License
_____ High School Diploma

Required when Applicable

_____ Police Academy Diploma
_____ P.O.S.T Certifications
_____ Military DD-214 (Member 4)

Criminal and Driver History Consent

I hereby give my consent for the **CORDELE POLICE DEPARTMENT** to receive any Georgia or III criminal history record information pertaining to me, as authorized under state and federal law for individuals seeking employment with a criminal justice agency. I further authorize **CORDELE POLICE DEPARTMENT** to receive a copy of my Georgia Drivers History as part of my application for criminal justice employment, or for use relative to the performance of my official duties with the agency.

Full Name (print) _____

Address _____ City/State/Zip _____

Sex _____ Race _____ Date of Birth _____ Social Security Number _____

Driver's License Number _____ State _____

I understand that this authorization is valid for 180 days from date of my signature.

Signature _____ Date _____

DO NOT WRITE IN THIS BLOCK. FOR POLICE DEPARTMENT USE ONLY.

Special employment provisions (check applicable): - civilian (Purpose code 'J')
- P.O.S.T. certified (Purpose code 'Z')

A CHECK OF CRIMINAL HISTORY FILES WAS CONDUCTED AND REVEALED THAT THE ABOVE NAMED
INDIVIDUAL HAS **NO RECORD** _____
THE ATTACHED _____ RECORD OF _____ PAGES

SEARCH CONDUCTED BY: _____ DATE: _____

CORDELE POLICE DEPARTMENT

Personal History Statement

Applicant Name: _____
Last First Middle

Other Names Used: (Maiden Name, Nicknames) _____

Date of Birth: _____ Place of Birth (city and state): _____

Social Security Number: _____ - _____ - _____ Weight: _____ Height: _____ Eye Color: _____ Hair: _____

Are you authorized to work in the U.S.? Yes No
(If "Yes", verification will be required upon
employment)

Are you of legal age to work as a police officer (at least twenty-one (21) years old)? Yes No

Present Address: _____

Phone Numbers: Cell: _____ - _____ - _____ Home: _____ - _____ - _____ Work: _____ - _____ - _____

E-mail address(es): _____

List Social Media Pages (User Name) (Facebook, Pinterest, Twitter, etc.) _

Driving History Statement

Do you have a current Driver's License? Yes: ☐ No: ☐

Current Driver's License Number: _____ State: _____ Expires: _____

Employment History

Please list the last three (3) employers including Military Service. List the most current employer first:

1) Name of Employer: _____

Dates of Employment: From: _____ To: _____

Job Title: _____ Supervisor: _____

Description of Duties:

Address: _____

Phone number: _____ E-mail _____

Reason for Leaving: _____ Final Pay Rate: _____

CORDELE POLICE DEPARTMENT

2) Name of Employer: _____

Dates of Employment: From: _____ To: _____

Job Title: _____ Supervisor: _____

Description of Duties:

Address: _____

Phone number: _____ E-mail _____

Reason for Leaving: _____ Final Pay Rate: _____

3) Name of Employer: _____

Dates of Employment: From: _____ To: _____

Job Title: _____ Supervisor: _____

Description of Duties:

Address: _____

Phone number: _____ E-mail _____

Reason for Leaving: _____ Final Pay Rate: _____

Military Employment History

Have you ever served, or are you currently in the United States Military? Yes: ☐ No: ☐

If "No", you can move on to the next page.

Branch: _____ Date of Service: From: _____ To: _____

Job duties: _____ Type of Discharge: _____

Record of Education

List the name and address of the Schools attended:

High School

Name and Address: _____

Course of Study: _____

Degree attained: _____ Dates Attended: _____ Quarter or semester hours: _____

College or Technical School

Name and Address: _____

Course of Study: _____

Degree attained: _____ Dates Attended: _____ Quarter or semester hours: _____