CITY OF

LOCUST GROVE

POLICE DEPARTMENT

APPLICATION FOR EMPLOYMENT

DATE SUBMITTED:_____

LOCUST GROVE POLICE DEPARTMENT
PRE-EMPLOYMENT QUESTIONNAIRE INSTRUCTION SHEET

This employment application is not an offer of employment, or a contract for employment. The completion of this pre-employment questionnaire, or any other instrument does not stand as an agreement, or promise to hire the applicant, and any statement the contrary by an employee is void. Please follow the below instructions:

1) Please print or type (blue or black ink only)
2) Complete all questions in detail where explanations are necessary.
3) Any questions not pertaining to you individually, list as "N/A"
4) If more writing space is needed throughout this application form, use the reverse side of the page, listing the number of the questions to be further explained.

IMPORTANT

TRUTHFUL and complete responses to this application are a necessity.

Discovery of intentional omissions or incorrect answers will be a basis for termination of the application process, and could result in criminal prosecution under Georgia law section 16-10-20.

This information will be subject to confirmation by administrative investigation, voice stress analysis and other forms of testing.

I understand that if I do not wish to answer a question in this booklet, I may do so, however, my application process will be terminated.

Exclusive of the aforementioned statement, all information which is recorded in this application will be used only in relation to determining the suitability and qualifications of the applicant for employment only, and no other purpose.

_____ _____
SIGNATURE DATE

INSTRUCTIONS

Fill out this questionnaire completely and accurately. Incomplete questionnaires will not be accepted. All statements in your questionnaire are subject to verification. Incorrect statements will disqualify or remove you from possible employment consideration.

PLEASE PRINT

POSITION APPLIED FOR:

_____

PERSONAL HISTORY STATEMENT

1) Name: _____
FIRST MIDDLE LAST

List any other names you have used or have been known by, including maiden name or any name associated with marriage/divorce, and attach a statement giving reasons. If none write N/A.

_____

_____

2) Weight: _____ Height: _____ Hair Color: _____ Eye Color: _____

3) Present Address: _____

_____

4) Home Phone Number: _____

Work Phone Number: _____

5) Social Security Number: _____

6) Date of Birth: _____

7) Place of Birth: _____

8) Are you a citizen of the United States? Yes _____ No _____
*Include a copy of your Birth or Naturalization Certificate

9) List all organizations, clubs and associations of which you are or have been a member, or with which you are or have been associated:

_____

_____

_____

10) What are your hobbies, special skills and abilities, including fluency in speaking foreign languages, which may be utilized by this department.

_____

_____

_____

11) Do you type? Yes _____ No _____ How many words per minute? ____

12) Are you: Single ____ Married ____ Separated ____ Divorced _____

13) If married, list spouses full name (including maiden name), social security number and date of birth.

Name:_____ DOB: _____ SSN: _____

14) If married, are you living with your spouse? Yes ____ No ____
If no, state reason (s):

_____

_____

15) Is your spouse employed? Yes ____ No ____

Employer's Name: _____

Address: _____

_____

Title or Position: _____

Employer's Phone Number: _____

16) Are you related to any person who is the owner of a Bail Bonding Company, or have you worked for anyone in the bonding business? Yes ____ No____

If yes, state full details:

_____

_____

18) Have you ever been bonded? Yes ____ No ____ If yes, for what purpose?

_____

_____

19) Did you ever intentionally perjure yourself in a Court of Law?
Yes___No___

20) Did you ever fraudulently misuse a credit card? Yes ____ No ____
If yes explain:

_____

_____

21) Did you ever forge a check? Yes ____ No ____ If yes, explain:

_____

_____

22) Are you being paid or urged by any person or organization to work for this department? Yes ____ No ____ If yes, explain:

_____

_____

FAMILY HISTORY

Give the name of every adult member of your immediate family who are still living; include father, mother, sisters, brothers, father-in-law and mother-in-law.

Name_____Relationship_____
Address_____
DOB:_____Phone#_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone#_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone#_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone #_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone #_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone#_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone#_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone #_____Occupation_____

Name_____Relationship_____
Address_____
DOB:_____Phone #_____Occupation_____

Has any member of your family ever been arrested for or convicted of a felony crime? Yes_____ No ____ If yes, give particulars below.

NAME	ARRESTING AGENCY	DATE	CHARGE	DISPOSITION

RESIDENCES

List all addresses for the last 15 years, starting with present address at top.

FROM MO/YR	TO MO/YR	ADDRESS	CITY/STATE/ZIP

EDUCATION

1) Circle the highest year completed:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

High School Graduate? Yes____ No ____

High School Name:_____
Address (city/state):_____
Year Graduated:_____

High School Equivalency/GED? Yes ____ No ____
Date:_____

2) Indicate below, the schools you have attended, location (city/state) and the years attended. Include your diploma for high school and all colleges attended.

Grammer School:_____Years Attended:_____
Location (city/state):_____

Grammer School:_____ Years Attended:_____
Location (city/state):_____

Junior High School:_____ Years Attended:_____
Location (city/state):_____

Junior High School:_____ Years Attended:_____
Location (city/state):_____

High School:_____ Years Attended:_____
Location (city/state):_____

High School:_____ Years Attended:_____
Location (city/state):_____

College:_____ Years Attended:_____
Location (city/state):_____
Graduated? Yes____ No ____ If yes, what date?_____

College:_____ Years Attended:_____
Location (city/state): _____
Graduated ? Yes____ No ____ If yes, what Date?_____

3) If you have any technical skills, not necessarily acquired through formal education, list them here:

_____
_____
_____
_____

4) Were you ever expelled or suspended from any school, or were you ever disciplined by any school official? Yes ____ No ____ If yes, explain:

_____
_____
_____

5) Have you ever attended a State Mandate School for Police, Sheriff, or Correctional Officer? Yes ____ No ____

6) Certification Number:_____
School Name:_____
Location (city/state):_____
Dates Attended:_____

7) Do you possess any skills, mechanical or technical expertise, or knowledge relating to specific topics, acquired through attendance at a school, academy or training center, that may benefit the Locust Grove Police Department?
Yes ____ No ____

If so, please list these skills or topics, and the name of the learning institution from which the related knowledge was obtained.

SKILL OR TOPIC	LEARNING INSTITUTION	CERTIFICATE OF COMPLETION (Y/N)

REFERENCES

Fill in below, the names of five (5) persons not related to you, who have known you for the past five (5) years. All persons you name may be asked to appraise your character, ability, experience, personality and other qualities.

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

ACQUAINTANCES

List the name of four (4) persons not related to you, (**not** former employers), who are friends, fellow students or fellow co-workers.

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

NAME	HOME #	WORK #
ADDRESS	CITY	STATE/ZIP
BUSINESS, OCCUPATION, OR PROFESSION		

WORK HISTORY

1) What is your present occupation? _____

2) How did you find out about this position? _____

3) Are you seeking permanent employment with this department? Yes___ No___

4) Have you ever applied with the City of Locust Grove? Yes___ No___
If so, when? _____

5) Have you ever applied with any other law enforcement agency? _____
If so, list agency and date of application: _____

6) Why did you leave your last job? _____
_____

7) Why would you leave your present job for this position? _____
_____
_____

8) Did a supervisor ever reprimand you for being late or for being absent?
Yes ___ No ___ If yes, explain _____

9) Did a supervisor ever reprimand you for misconduct or not doing your job right? Yes ___ No___ If yes, explain:_____
_____

10) Were you ever fired or disciplined because of an accident? Yes ___ No ___
If yes, please explain _____

11) Have you been asked to resign or been fired from a job? Yes___ No ___
If yes, how many times has this occurred ? _____
Explain the circumstances: _____

12) Have your employers always treated you fairly? _____

13) Have had experience with shift work? Yes ___ No ___

14) Do you object to working:

Days	Yes ___	No ___
Nights	Yes ___	No ___
Weekends	Yes ___	No ___
Holidays	Yes ___	No ___

15) If it became necessary in the course of your law enforcement duties to take a human life, would you have any reluctance to do so because of religious or other beliefs? Yes ___ No ___ If yes, explain: _____

_____

16) Have you ever been sued? Yes ___ No ___
Have you ever sued anyone? Yes ___ No ___
If yes, give details:_____

17) List all jobs you have held in the last (10) years. Put your present or most recent job first. If you need more space, you may attach additional sheets. Include military service in proper time sequence and temporary part-time employment no matter how little time was involved.

From: _____ To: _____
Title:_____
Name of Employer:_____
Street Address: _____
Phone#_____
Your Duties: _____
Name and Title of Supervisor: _____
Gross Salary Per Month: _____
Reason For Leaving: _____

From: _____ To: _____ Title:_____
Name of Employer:_____
Street Address: _____
Phone#_____
Your Duties: _____
Name and Title of Supervisor: _____
Gross Salary Per Month: _____
Reason For Leaving: _____

From: _____ To: _____ Title:_____
Name of Employer:_____
Street Address: _____
Phone# _____
Your Duties: _____
Name and Title of Supervisor: _____
Gross Salary Per Month: _____
Reason For Leaving: _____

From: _____ To: _____ Title: _____
Name of Employer: _____
Street Address: _____
Phone# _____
Your Duties: _____
Name and Title of Supervisor: _____
Gross Salary Per Month: _____
Reason For Leaving: _____

From: _____ To: _____ Title: _____
Name of Employer: _____
Street Address: _____
Phone# _____
Your Duties: _____
Name and Title of Supervisor: _____
Gross Salary Per Month: _____
Reason For Leaving: _____

From: _____ To: _____ Title: _____
Name of Employer: _____
Street Address: _____
Phone# _____
Your Duties: _____
Name and Title of Supervisor: _____
Gross Salary Per Month: _____
Reason For Leaving: _____

MILITARY

1) Have you ever served in a military or naval organization of the United States? Yes ___ No ___ If yes, which branch of service? _____

2) What was the highest rank held? _____

3) What is the type of your discharge? (Honorable, Dishonorable, General, Medical Honorable Conditions, etc.) Be exact: _____

4) Date and location of entrance to active duty: _____

5) Date and location of discharge: _____

6) Are you now or where you ever an active or inactive member of any branch of the U.S. Reserve Force? Yes _____ No_____
If yes, which branch? _____
Unit: _____ Rank: _____
Address: _____
From_____To_____

7) Are you now or were you ever a member of the National Guard?
State: _____ Regiment: _____ Unit: _____
Rank: _____ From: _____ To: _____
Type of Discharge: _____

8) Were you ever the subject of any disciplinary action while a member of the armed forces? Yes ___ No ___ If yes, explain: _____
_____

9) Are you now, or have you ever received any disability compensation from any of the Armed Services or VA? Yes ___ No ___ If yes, explain:_____

ILLEGAL DRUGS

1. Have you ever sold or possessed with the intent to distribute legal drugs, marijuana, or other illegal drugs? Yes____ No ____ If yes, please explain:
_____
_____

2. Are you currently using any illegal drug or controlled substance? Yes__ No__
If yes, please explain: _____

GAMBLING

1. In the last ten (10) years, what is the extent of your gambling on the following:

   Horses_____ Numbers_____
   Dice_____
   Slot Machines_____ Pinball
   Machines_____
   Sports_____Lottery_____

2. Do you have gambling debts? Yes _____ No _____ If yes, please explain:_____
   _____

3. Have you ever borrowed money to gamble? Yes ___ No ___
   If yes, please explain:_____

4. Would you gamble more if you had the money? Yes ___ No ___

5. Did you ever work for a gambler or racketeer? Yes ___ No ___
   If yes, please explain: _____

CRIMINAL ACTIVITY

IT IS IMPORTANT THAT YOU ANSWER EACH OF THE FOLLOWING QUESTIONS TRUTHFULLY. IF YOU WOULD LIKE TO WRITE ANY EXPLANATIONS, PLEASE USE THE BACK OF THIS PAGE.

OFFENSE(S)	YES	NO	AGE AT THE TIME
Breaking & Entering			
Drug Pushing (Sales)			
Possession of Narcotics			
Possession of Marijuana			
DWI OR DUI			
Passing Bad Checks			
Burglary			
Armed Robbery			
Grand Theft Auto			
Shoplifting			
Assault			
Murder			
Theft From an Employer			
Extortion			
Possession of Controlled Substance			
Sex Crimes (Rape, Child Molestation, Incest, Agg. Sodomy			
Steal Anything			

1) Have you ever been fingerprinted? If yes, give details below:

Agency:_____ Date: _____ Purpose:_____
Agency:_____ Date: _____ Purpose:_____
Agency:_____ Date: _____ Purpose:_____

2) Are you a fugitive from justice? Yes ___ No ___

3) Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group or combination of persons which is Totalitarian, Fascist, Communist, or Subversive, or which has adopted or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means?

4) Have you ever been arrested or detained by the police?_____
If yes, please explain:_____

5) Have you ever been convicted of a felony or misdemeanor?_____

6) Have you ever been placed on probation or parole?_____

GRATUITIES

Some companies have strict rules about accepting gratuities and others have little or no guidelines. In some jobs, regular gratuities are a way of life. In such companies, refusing a gift may actually alienate a valuable business contract.

Since the rules vary from company to company, the final section of this application will deal with gratuities.

1) In the last five (5) years, have you held a job where you received any gratuities?
Yes ___ No ___ If yes, explain: _____

2) If the answer was yes, what was the approximate value of all gratuities you have received during this five year period? $_____

3) Did your former company(s) have rules regarding acceptance of gratuities? _____

4) If yes, briefly explain the rules in the space below. Examples would be "no rule at all", "gratuities limited to gifts under $ _____ in value", "gratuities limited to meals or food and drinks consumed at one sitting", or "no gratuities allowed."

_____

_____

THEFT FROM EMPLOYERS

Many people have taken something from a place where they worked that they really didn't have permission to take. This includes actual taking, illegally giving away merchandise to friends, relatives or co-workers, borrowing with or without permission and failing to return merchandise, property or company equipment, or to make reimbursement. Figure out how much, in dollars, you may have taken from all employers combined during the last five (5) years, and list the amount closest to that total dollars in merchandise you have taken.
$_____

Briefly explain:_____
_____

DRIVING RECORD

1. Do you have a current driver's license? Yes ___ No ___

2. What state? _____

3. Driver's license number: _____

4. Expiration date: _____

5. Does it contain any physical restrictions? Yes ___ No ____
   If yes, explain:_____

6. List below all traffic citations you have ever received (except for parking):

   Location (city):_____
   Approximate Date:_____
   Violation:_____
   Penalty/Disposition:_____

   Location (city):_____
   Approximate Date:_____
   Violation:_____
   Penalty/Disposition:_____

   Location (city):_____
   Approximate Date:_____
   Violation:_____
   Penalty/Disposition:_____

7. Did you ever possess an operator's license issued by any state other than Georgia?
   Yes ___ No ___ If yes, give state and license number:_____

8. Was your license ever suspended or revoked? Yes ___ No ___ If yes, state which and give reason: _____

9. Do you have liability insurance at the present time? Yes ___ No ___

10. Were you ever denied auto insurance? Yes ___ No ___

AFFIDAVIT OF APPLICANT

I hereby certify that I have read and understand all questions and instructions in this application, and that my answers are true and complete.

I understand that any untruthful misstatement of material fact will result in:

1. Disqualification of my application or dismissal from employment with the Locust Grove Police Department, and

2. Prosecution for the offense of False Swearing (Georgia Code 1981, S16-10-71), a felony, punishable by a maximum fine of $ 10,000.00 plus imprisonment for not less than one (1) year no more than five (5) years, or both.

_____ _____

APPLICANT'S SIGNATURE **DATE SIGNED**

STATE OF GEORGIA
COUNTY OF HENRY

Before me personally appeared _____ who says that he/she executed the above statement of his/her own free will and accord, with full knowledge of the purpose therefore.

Sworn to me and subscribed in my presence this _____ day of _____, 2018.

_____

NOTARY PUBLIC

LOCUST GROVE POLICE DEPARTMENT AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Locust Grove Police Department, whether the said records are of public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies, (including credit reports and/or ratings), and other financial statements and records wherever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners and the U.S. Veteran's Administration; employment and pre-employment records, including internal investigative reports, background reports, polygraph reports and charts; efficiency rating, complaints or grievances filed by or against me; and the records and recollections of attorneys at law or of other counsel; whether representing me or another person in any case, either criminal or civil, in which I presently have or have had an interest; and any other document or article of information deemed pertinent for the purpose of assessing my suitability for employment.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability as a candidate for employment by Locust Grove. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and, I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

Signature _____

Address _____

_____

NOTARY _____

DATE _____

CITY OF LOCUST GROVE
POLICE DEPARTMENT

BACKGROUND INVESTIGATION RELEASE FORM

I hereby authorize the ***LOCUST GROVE POLICE DEPARTMENT*** *to receive any criminal history and/or driver history record information pertaining to me which may be in the files of any local, state, or federal agency, on this date, or anytime during my employment.*

Full Name Printed: _____

Current Address: _____

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

Drivers License Number _____ ***State*** _____

Other states in which you have been issued a drivers license: _____

Other states in which you have resided: _____

I hereby attest that this information furnished by me is true and correct,

This _____ ***day of*** _____ ***, 2018***

Legal Signature _____

10/18