



FORISTELL POLICE DEPARTMENT
Chief Douglas Johnson
 10 Highway T
 Foristell, MO 63348
 Office-(636) 463-2107
 Fax-(636)673-1088



APPLICATION FOR EMPLOYMENT

Name: (last) _____ (first) _____ (middle) _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell: _____

Date of Birth: _____ Age: _____

Place of Birth: _____ SSN# _____

Driver's License Number: _____ State Issued: _____

Current Place Employment: _____ Occupation: _____

Business Address: _____ Business Phone: _____

Are you currently authorized to work in the United States? Yes No

Have you ever changed your name? Yes No

If yes list previous names: _____

Education:

Circle the highest grade completed: 9 10 11 12 College/University: _____

High School Diploma GED Degree Type of Degree: _____

List all schools and Colleges attended (Trade Schools including any prior police training) Attach all training certificates

School Name	Location (city, state)	Course of study	Year attended

List all addresses for the past 15 Years (starting with your most current)

Address	City	State	Zip	From	To

Name and present address of spouse(s) if divorced or separated:

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

List all of your children and Dependents, including stepchildren and adopted ones and give the following:

Name	D.O.B.	Address	Resides with

Beginning with your spouse, list full names of your immediate family such as Father, Mother (maiden name), Brothers, and Sisters

Name	Relation	Address	Occupation	D.O.B.

List three (3) character references (not related to you), who are responsible adults and who have known you well during the past three (3) years or more.

Name: _____ Address: _____
How long acquainted: _____ Occupation: _____
Business Address: _____
Residence Phone: _____ Business Phone: _____

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How long acquainted: _____ Occupation: _____
Business Address: _____
Residence Phone: _____ Business Phone: _____

Beginning with your present or last employer, list all employment in proper order. List periods of school, military services, and unemployment. List everything for the past 10 years. Keep in proper sequence. (full/part time, temporary, and/or seasonal employment)

Employer Name: _____
Address: _____
Job Title: _____ Supervisor: _____
Dates of employment: From _____ To _____

Describe your duties:
Reason for leaving:

Employer Name: _____
Address: _____
Job Title: _____ Supervisor: _____
Dates of employment: From _____ To _____

Describe your duties:
Reason for leaving:

Employer Name: _____

Address: _____

Job Title: _____ Supervisor: _____

Dates of employment: From _____ To _____

Describe your duties:
Reason for leaving:

Employer Name: _____

Address: _____

Job Title: _____ Supervisor: _____

Dates of employment: From _____ To _____

Describe your duties:
Reason for leaving:

Have you ever been involved in a traffic accident, either as a driver or a passenger? () YES ()NO

If yes, describe:

Have you ever been arrested, charged, questioned, accused, warned, or detained for any offense or alleged violation of any statute, ordinance, law, or regulation by any civil or military authority, either in this state or any other state or country (including traffic violations) () YES ()NO

If yes, describe below:

DATE	CHARGE	CITY, STATE, and COUNTRY	POLICE AGENCY	DISPOSITION

Have You ever been convicted of a crime other than a minor traffic violation? () Yes () No

If yes, explain in detail:

Have you ever served in the military? () Yes () No If yes, List below:

Month/Year	Branch or organization	Discharge date	Type of discharge	Rank

List all drivers and commercial license(s) you hold now or have previously held in this state or other state(s). Indicate if you ever had your license suspended and/or revoked.

State	Type of License (Class)	Expiration date	License number	Suspended/Revoked Yes/No

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, fascists, 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 the state of Missouri, or which seeks to alter the form of government of the United States or the state of Missouri, by any unlawful or unconstitutional means?

() Yes () No if Yes, please explain: _____

Have the police ever been called to your home for any reason? () Yes () No If Yes, Explain:

Are you acquainted with any Police Department employees? ()Yes ()No if yes, list below

Name and Rank	Police Agency

Have you ever used narcotic drugs, Barbiturates, Amphetamines, Marijuana, or any other Hallucinogenic drugs?

() Yes () No if yes, please explain: _____

Use the Following space to continue an answer to a question or give additional information on yourself that you might feel is important for your consideration for employment with the Foristell Police Department:

I hereby declare the information provided by me in this application is true, current and complete to the best of my knowledge. I understand that if I am accepted , any misstatements or omission of facts on this application shall be considered cause for dismissal.

I authorize the Foristell Police Department to obtain an investigative report containing information obtained through personal interviews with my neighbors, friends, and acquaintances. This report, if obtained, may include information as to my character, general reputation, personal characteristics, and mode of living. I understand I have the right to make a written request within a reasonable period of time, to receive information about the nature and scope of any such investigation.

Signature of applicant

Date

Attach
A
Recent
Photo
Here

Authority For Release of Information

Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: _____ SSN: _____ Place of Birth: _____

County of Birth: _____ City of Birth: _____ State: _____

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

The intent of the authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions, including records of deposits, withdrawals and balances of checking and savings accounts, and loans, and also the records commercial or retail credit agencies (including credit reports and/or ratings); public utility companies; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and the salary records, real and personal property tax statements and records, and other financial statements and records wherever filed, records of complaint, arrest, trial and/or conviction for alleged or actual violations of law, including criminal, civil and/or traffic records, the results of any polygraph examinations, records of complaint of a civil nature made by or against me, wherever filed, and to include the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case which I presently have had an interest.

I reiterate, and emphasize that the intent of this authorization is to provide full and free access to the background and history of personal life, for the specific purpose of pursuing a background investigation, which may provide pertinent data for the Foristell Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, however personal confidential it may appear to be, and sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon the release authorization will be considered in determining my suitability for employment by the Foristell Police Department. I understand that all the materials pertaining to this background investigation become the property of the Foristell Police Department and will not be returned to me. I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me.

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

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Signature: _____ Street Address: _____

City: _____ State: _____ Zip Code: _____

Subscribed and sworn before me this

_____ day of _____ 20____

My commission expires _____ 20____

Notary: _____