



**SCOTT CITY
POLICE DEPARTMENT**

**Email Completed Application to:
cschmitt@scottlec.org**

Application For Employment

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

Other Names (including nicknames) you have used or are known by.

Date of Birth: ____/____/____ SSN: ____-____-____ Driver's License: _____ ST: _____

Height: _____ Weight: _____ Sex: Male Female Race: _____

Place of Birth: _____ Daytime Phone :(____)-____-_____

Please list your Current Address and phone number:

Street: _____ City: _____ State: _____ Zip Code: _____

Phone :(____)-____-_____ Can we contact you at this address and Phone? YES NO

If No, Please list an Address and Phone number you may be contacted at:

Street: _____ City: _____ State: _____ Zip Code: _____

Daytime Phone Number:(____)-____-_____ Evening Phone Number:(____)-____-_____

Hours that will be best for contact: _____

You must be a citizen of the United States or a permanent resident alien who is eligible for and has applied for citizenship. Can you provide such documentation? YES NO

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Education The commission on Peace Officer Standards and Training requires a peace officer to possess a U.S. High School Diploma or its equivalent. Please indicate your current situation with regards to this requirement by filling out the following information.

Grammar School

School Attended: _____ Years attended _____ to _____
Address: _____
City: _____ State: _____ Zip code: _____
Highest Grade Completed: _____

Grammar School

School Attended: _____ Years attended _____ to _____
Address: _____
City: _____ State: _____ Zip code: _____
Highest Grade Completed: _____

Grammar School

School Attended: _____ Years attended _____ to _____
Address: _____
City: _____ State: _____ Zip code: _____
Highest Grade Completed: _____

High School or GED

Name of School: _____ Highest Grade Completed: _____
Address: _____
City: _____ State: _____ Zipcode: _____
Graduated: YES NO Dates Attended From _____ to _____

Name of School: _____ Highest Grade Completed: _____
Address: _____
City: _____ State: _____ Zipcode: _____
Graduated: YES NO Dates Attended From _____ to _____

Name of School: _____ Highest Grade Completed: _____
Address: _____
City: _____ State: _____ Zipcode: _____
Graduated: YES NO Dates Attended From _____ to _____

If you attended additional Grammar or High Schools, please list them on a separate paper.

College

College Attended: _____ Credit Hours Completed: —

Address: _____

City: _____ State: _____ Zip Code: _____

Degree Attained: _____

Dates Attended From: _____ to _____

College Attended: _____ Credit Hours Completed: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Degree Attained: _____

Dates Attended From: _____ to _____

College Attended: _____ Credit Hours Completed: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Degree Attained: _____

Dates Attended From: _____ to _____

Please list additional College education on a separate piece of paper.

Law Enforcement Certification Courses

i.e. state police officer certification

Certification _____

Where Attained: _____

City: _____ State: _____ Zip Code: _____

Description of Course: _____

Certification _____

Where Attained: _____

City: _____ State: _____ Zip Code: _____

Description of Course: _____

Relatives that you have a close personal relationship.

Name/ Relationship	Address	Phone Number
Name/ Relationship	Address	Phone Number
Name/ Relationship	Address	Phone Number
Name/ Relationship	Address	Phone Number
Name/ Relationship	Address	Phone Number
Name/ Relationship	Address	Phone Number
Name/ Relationship	Address	Phone Number

References other than Family:

Name	Address	Phone Number
Name	Address	Phone Number
Name	Address	Phone Number

Use a separate paper if needed.

Department Use Only

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Employment & Experience

Beginning with your most current employment, please list all jobs (including part time, temporary, and voluntary positions) you have held in the past 15 years. (For the purpose of this personal history statement, volunteer work should be included as employment) For identification and verification, please indicate the nature of the activity: i.e. full time, part time, or voluntary. If you have held intervening periods of military service or unemployment, please list those periods in sequence in the spaces provided.

Dates of Employment From: _____ To: _____ Full Time Part Time Volunteer
Employer: _____ Supervisor: _____
Address: _____ City: _____ St. _____ Phone: _____
Title or Duties:

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Employer: _____ Supervisor: _____
Address: _____ City: _____ St. _____ Phone: _____
Title or Duties:

Military Service

If you are under the age of 26, please provide the following:

Selective Service Number: _____ Registration Date: _____

Place of Registration: _____

Have you ever served in the Armed Forces, National Guard, or Military Reserves: YES NO

If Yes, provide the following information:

Branch of Service: _____ Service Number: _____

Date of Service From: _____ To: _____

Type of Discharge: _____

Are you currently participating in any military reserve or National Guard program: YES NO

If yes, please provide Details:

Please list Past commanding officers, posts, and contact information:

Officer Name	Post	Contact Information

Please list any other military information that you think may be relevant to obtaining employment at this department:

Please provide the following information about your bank and charge accounts:

Name of Firm	Address	Phone Number	Account Number

Have you ever filed or declared bankruptcy: YES NO

Describe:

Have any of your bills been turned over to a Court or collection agency: YES NO

Describe:

Have you ever had goods you purchased repossessed: YES NO

Describe:

Have you ever had your wages, or bank accounts garnished: YES NO

Describe:

Legal

Have you ever been arrested or convicted for any crime that would constitute a felony, or serious Misdemeanor: YES NO

If yes, Provide the following:

Date	Police Agency/Location	Circumstances

Have you ever been placed on probation as an adult: YES NO

If Yes, please explain:

Please list all the citations you have received in the past five (5) years.

Have you been involved in a traffic accident in the last five (5) years.

Date	Location	Injury/Non-injury	Investigating Police Agency

Has your Driver's License ever been suspended or revoked: YES NO

Is there anything you wish to discuss about your driving record:

Please list any additional information that you think may be relevant to you obtaining employment with this agency:

I hereby certify that all statements made in this personal history statement and application are true and complete, and I understand that any misstatements of material facts will be subject me to being disqualified from employment at this agency or will be used in termination proceedings if I am hired.

Signature

Date

Please provide copies of all certificates, awards, and accommodations with this application. Along with any resume you may wish to submit.

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