

THUNDERBOLT POLICE DEPARTMENT



POLICE OFFICER APPLICATION

EQUAL OPPORTUNITY EMPLOYER

The Thunderbolt Police Department is an equal opportunity employer and does not discriminate in recruiting, hiring, training, promoting, or other employment practices for reason of age, race, color, religion, sex, natural origin or marital status. We do not discriminate against veterans or the handicapped. The age discrimination in Employment Act of 1967 as amended prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

Prepared 10/2007

APPLICATION FOR EMPLOYMENT

Read ALL information carefully and fill out all forms COMPLETELY.

This application for employment will be considered active for a period of time not to exceed 120 days. Any applicant who desires to be considered for employment beyond this time should resubmit another application.

It is your responsibility to provide complete and accurate information and copies of all documents requested. Inaccurate and incomplete information will affect your opportunity for employment with the Town of Thunderbolt.

CONSEQUENCES OF FALSIFICATION

ANY willful misrepresentation or falsification given on ANY FORM herein is just cause for rejecting your application. It will disqualify you from making application in the future for positions with the Town of Thunderbolt, or your employment with the Town may be terminated.

All applications must be notarized before they will be accepted. Review the application to insure that you have completed all sections and provided all information requested.

If applicable, copies of the following documents must be turned in for your application to be processed:

1. Driver's License
2. Birth Certificate
3. Social Security Card
4. High School Diploma / GED (Certified Copies of School Transcripts)
5. Military DD 214 member 1 copy and member 4 copy
6. Military Discharge
7. College Diploma (Certified Copies of School Transcripts)
8. Professional Certificates
9. Certified Copies of Court Abstracts & Police Reports
10. A current photograph

Incomplete and illegible applications will not be processed.

ALL APPLICATIONS MUST BE HANDWRITTEN BY THE APPLICANT!

I. Are you related by blood or marriage to anyone employed by the Town of Thunderbolt?
Yes () No () If yes, provide name of relative, relationship and the department where
they are employed: _____

J. Have you ever been known by any other name? Yes () No ()
If yes, provide names: _____

2. EMPLOYMENT HISTORY

Complete employment history including school, full-time jobs, part-time jobs and any periods of unemployment. List all jobs since high school. Please list chronologically beginning with the most recent. List all area codes and zip codes - make certain that all addresses and phone numbers are complete and accurate.

Present Employer or School Attending:

Name: _____

Address: _____

Position: _____ Salary: _____

Full-time () Part-time () May we contact them: Yes () No ()

Name of immediate supervisor/instructor: _____

Telephone number: (____) _____

Description of Duties, Responsibilities, Courses and Accomplishments:

Reason for Leaving: _____

Have you ever been disciplined: Yes () No ()

If yes, explain: _____

Previous Employer(s):

1. Name: _____

Address: _____

Position: _____ Salary: _____

Dates Worked: From _____ to _____

Full-time () Part-time () May we contact them: Yes () No ()

Name of immediate supervisor/instructor: _____

Telephone number: (____)_____

Description of Duties, Responsibilities and Accomplishments:

Reason for Leaving: _____

Have you ever been disciplined: Yes () No ()

If yes, explain: _____

2. Name: _____

Address: _____

Position: _____ Salary: _____

Dates Worked: From _____ to _____

Full-time () Part-time () May we contact them: Yes () No ()

Name of immediate supervisor/instructor: _____

Telephone number: (____)_____

Description of Duties, Responsibilities and Accomplishments:

Reason for Leaving: _____

Have you ever been disciplined: Yes () No ()

If yes, explain: _____

3 Name: _____

Address: _____

Position: _____ Salary: _____

Dates Worked: From _____ to _____

Full-time () Part-time () May we contact them: Yes () No ()

Name of immediate supervisor/instructor: _____

Telephone number: (____)_____

Description of Duties, Responsibilities and Accomplishments:

Reason for Leaving: _____

Have you ever been disciplined: Yes () No ()

If yes, explain: _____

4. Name: _____

Address: _____

Position: _____ Salary: _____

Dates Worked: From _____ to _____

Full-time () Part-time () May we contact them: Yes () No ()

Name of immediate supervisor/instructor: _____

Telephone number: (____) _____

Description of Duties, Responsibilities and Accomplishments:

Reason for Leaving: _____

Have you ever been disciplined: Yes () No ()

If yes, explain: _____

5. Name: _____

Address: _____

Position: _____ Salary: _____

Dates Worked: From _____ to _____

Full-time () Part-time () May we contact them: Yes () No ()

Name of immediate supervisor/instructor: _____

Telephone number: (____) _____

Description of Duties, Responsibilities and Accomplishments:

Reason for Leaving: _____

Have you ever been disciplined: Yes () No ()

If yes, explain: _____

3. EDUCATIONAL HISTORY

School Name & Location	Major Course or Subject	Dates Attended		Graduated		Degree
		From	To	Yes	No	
High School						
College (List all attended)						
Technical School						
Other						

4. OUTSIDE ACTIVITIES (Exclude those indicating race, color, religion, sex, national origin, age or handicap.)

Professional memberships, certificates, or licenses held: _____

Past and present civic or cultural activities – include offices held. _____

Principal Hobbies: _____

5. SPECIAL SKILLS

List all special skills you possess related to the job you are applying for: _____

6. MILITARY RECORD

Have you ever served or trained in the United States Forces? Yes ____ No ____

Branch of Service _____ From _____ to _____

Present military affiliation: None () Reserve [active] () Reserve [inactive] ()

Kinds of training and duty while in service: _____

Type of Discharge: Honorable ____ Dishonorable ____

Have you ever been a defendant in a court martial or received any other disciplinary action?

Yes ____ No ____ If yes, explain in detail.

Have you ever held a military security clearance?

Yes ___ No ___ If yes, level of clearance. _____

Have you ever been denied or had a security clearance revoked?

Yes ___ No ___ If yes, explain in detail.

7. DRIVER'S LICENSE

Present Driver's License

Do you hold a current valid driver's license? Yes ___ No ___ Type _____

Issuing State _____ Number _____

List any other driver's licenses which you have possessed in the past.

State _____ Number _____

State _____ Number _____

Have you ever had a driver's license and/or commercial license or certificate, privilege revoked or suspended, including out of state license, by the issuing authority? Yes ___ No ___

If yes, explain in detail: _____

List all traffic summons/citations/tickets received in the past five years, including those from other states. Do not list parking tickets.

Date	Location	Violation	Penalty/Disposition

List all automobile accidents in which you have been involved in. (Whether at fault or not)

Date	Location	Type of Injury	Whose Fault:

8. PERSONAL CHARACTER BACKGROUND

A. Has any legal judgment, i.e. divorce, child support, alimony, ever been issued against you? Yes ___ No ___ If yes, explain in detail.

B. Have you ever declared bankruptcy? Yes ___ No ___ If yes, explain in detail.

C. Have you ever been refused a surety bond (i.e. contractor, security guard or business) or refused for employment that required bonding? Yes ___ No ___ If yes, explain in detail.

D. Have you ever been arrested, incarcerated, indicted, issued a Notice to Appear, or otherwise charged with a crime, felony or misdemeanor? Yes ___ No ___ If yes, explain in detail.

E. Have you ever been arrested, incarcerated, issued a Notice to Appear, or otherwise charged with a crime, pled nolo contendere or pled guilty to any criminal violation, regardless if the record was sealed or expunged?

Yes ___ No ___ If yes, explain in detail. _____

F. Have you ever committed a crime whether detected or not? Yes ___ No ___ If yes, explain in detail. _____

G. Have you ever been involuntarily terminated (fired) from employment or asked (allowed) to resign? Yes ___ No ___ If yes, explain in detail. _____

H. Have you EVER possessed, sold, used, or tried drugs, including but not limited to, speed, marijuana, cocaine, heroin, LSD, steroids, etc.?

Yes ___ No ___ If yes, explain in detail.

Drug Used	When and Where	Total Times Used

I. How many times, in the last year, have you been intoxicated to the point you felt you should not drive a motor vehicle? _____ Explain _____

J. How many times, in the last year, have you missed work/school due to intoxication? _____ Explain _____

K. How many drinks of alcohol do you consume in a week? _____

L. Do you have tattoos? No ___ Yes___ If so, where? _____

M. Are you currently married? Yes ___ No ___ If so, list spouse's name along with names of children currently living with you.

Wife: _____ Child: _____

Child: _____ Child: _____

Child: _____ Child: _____

9. TRAINING, AWARDS AND SPECIAL SKILLS

Please list all additional training schools, seminars, awards, special skills, certifications, etc., that you would like to be considered.

Type	Issuing Authority	Date

10. PREVIOUS LAW ENFORCEMENT APPLICATIONS

Have you ever applied for employment with the Town of Thunderbolt Police Department?

Yes ___ No ___ If yes, when? _____

Have you ever applied for employment with another law enforcement agency?

Yes ___ No ___ If yes, list agency, date applied, and status of your application.

Date Applied	Agency	Address	Position	Status

11. PROFESSIONAL REFERENCES

Name	Address	Telephone	Occupation	Relationship

12. Please list 3 neighbors that are familiar with you. If you do not know your neighbors, please list their addresses so a neighborhood check can be completed.

Name	Address	Telephone

13. MEDICAL / PHARMACOLOGICAL

Are you currently taking any over the counter medication not prescribed by a doctor?

_____ Yes _____ No

Are you currently taking any prescription medications prescribed by a doctor?

_____ Yes _____ No

Have you ever filed any workman's compensation claims? _____ Yes _____ No

Do you have any medical or mental disabilities that would hinder your ability to perform the job?

_____ Yes _____ No

14. REMARKS

Write anything you want the Chief of Police to know. For example, you may wish to write about your career plans and objectives or why you want to become a police officer. **USE YOUR OWN HANDWRITING** and write at least one or two paragraphs.

EACH STATEMENT MUST BE READ AND INITIALED:

_____ If you accept a position as a Police Officer with the Town of Thunderbolt, you are expected to complete a minimum of one year's service (probationary period). If you elect to leave the Town's employment prior to this one year commitment, you will be required to reimburse the Town of Thunderbolt for all costs associated with your employment such as background investigation, medical exams, drugs tests, uniforms and equipment, training, and any other reasonable costs associated in hiring.

_____ In accordance with OCGA 35-8-22 Reimbursement of training expenses by subsequent employer, if the State of Georgia or any county or municipality thereof employs a peace officer and said peace officer is hired by another agency within 15 months after completing mandated or formalized training requirements, then the total expense of training, including salary paid during training, shall be reimbursed by the hiring agency to the State of Georgia or any county or municipality thereof which initially paid for such training. If said officer is hired by another agency during a period of 15 to 24 months after mandated or formalized training requirements are completed, then one-half of the total expense of training, including salary paid during training, shall be reimbursed by the hiring agency to the State of Georgia or any county or municipality thereof which initially paid for such training. The Council set standards for reimbursement by hiring agencies based upon actual expenses incurred in mandated or formalized training by individual departments.

Applicant's Signature

Date

CERTIFICATION:

I hereby certify that all the information I have provided in this employment application is true and correct to the best of my knowledge and belief.

I understand that false or fraudulent information, or any intentional omission or misrepresentation, is cause for immediate disqualification as a candidate for employment, or termination at any time should I have already been appointed, and is also criminally punishable pursuant to federal and state laws.

Applicant's Signature

Date

Sworn and subscribed in my presence this _____ day of _____, 20____. My commission expires on _____, 20____.

Notary Public Signature & Seal

Authority For Release of Information (Background Investigation Waiver)

To: *Concerned Person or Authorized Representative of Any Organization, Institution or Repository of Records*

APPLICANT'S NAME: _____
DATE OF BIRTH: _____
SOCIAL SECURITY NO.: _____

EMPLOYING AGENCY REQUESTING BACKGROUND INFORMATION:

**THUNDERBOLT POLICE DEPARTMENT
2821 RIVER DRIVE
THUNDERBOLT, GA 31404**

I hereby authorize any employee or authorized representative bearing this release, or copy thereof, to obtain any information in your files pertaining to my employment records including, but not limited to, achievement, attendance, personal history, disciplinary records, medical records, credit records, and criminal history records. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the requesting agency. Consent is granted for the agency to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities.

I hereby release you, as the custodian of such records, and employer, educational institution, physician, hospital or other repository of medical records, credit bureau or consumer reporting agency, including its officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. A photocopy of this form will be as effective as the original.

I hereby authorize the National Records Center, St. Louis, Missouri, or other custodian of my military record to release information or photocopies from my military personnel and related medical records, including a photocopy of my DD 214, Report of Separation, to:

Applicant's Signature	Date

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

Sworn and subscribed in my presence this _____ day of _____, 20____. My commission expires on _____, 20____.

Notary Public Signature & Seal

CRIMINAL / DRIVER HISTORY CONSENT FORM

I hereby authorize any agent of the Thunderbolt Police Department to receive any criminal and/or driver history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

(Please print)

First Name: _____

Middle Name (NO initials): _____

Last Name: _____

Maiden Name: _____

Address: _____

City: _____

State & Zip Code: _____

Race: _____ Sex: _____ DOB: _____

Social Security Number: _____

Operator License Number: _____
(Driver's license number)

Signature of Employee: _____

Date: _____

Signature of Terminal Operator: _____

Date of Inquiry: _____