

POLICE OFFICER APPLICATION

7. FAMILY: List in order given, showing relationship, parents, guardians, step-parents, foster parents, parents-in-law, brothers, sisters, step-brothers and step-sisters. Include any others with whom you have resided or with whom a close relationship existed or exists.

Relationship to You	Name	Address, if living
Father		
Mother		

8. VEHICLE OPERATOR'S LICENSE. Give the following information concerning any vehicle operator's license you have held or now hold:

Type Of License	Number	Issuing Authority	Expiration

Have you ever had a license suspended or revoked? Yes _____ No _____ If yes, why?

9. CONVICTION OF CRIME.

Have you ever been convicted of a misdemeanor, felony, or greater criminal violations? (Yes/No) If yes, state violation, court of jurisdiction, and date of conviction.

10. FINANCIAL STATUS.

Do you have any income from any source other than your principal occupation? (Yes/No)

How much? _____ How often? _____

The source(s) _____

Do you have or have you had any financial accounts (savings, checking, loans, stocks, bonds, etc.)? List all accounts during the past seven (7) years.

Name and Address of Financial Institution	Type of Account

POLICE OFFICER APPLICATION

11. PAST AND PRESENT MEMBERSHIP IN ORGANIZATIONS:

Name	Address	Type (Social, Fraternal, Professional, Etc.)	Office Held	Membership Dates	
				From	To

12. SUBVERSIVE ORGANIZATIONS:

(Answer Yes or No)

- Are you now, or have you ever been, a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the 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 in the United States by any unconstitutional means?

- Are you, or have you ever been, affiliated or associated with any organization of the type described above, as an agent, official, or employee?

- Are you now associating with, or have you associated with, any individuals; including relative, who you know or have reason to believe are or have been members of any of the organizations identified above?

- Have you ever been engaged in any of the following activities of any organization of the type described above, or made contribution(s) to, attended or participated in any organizational, social, or other activities of said organizations or of any projects sponsored by them; the sale, gift, or distribution of any written, printed, or other matter, prepared, reproduced, or published, by them or any of their agents or instrumentalities?

If yes to any of the answers above, describe below the circumstances. Attach additional sheets for a fully detailed statement. If associated with any of these organizations, specify the nature and extent of your association with each, including office or position held, including dates, places, and credentials now or formerly held. If associations have been with individuals who are members of these organizations, then list the individuals and the organization with which they were or are affiliated.

POLICE OFFICER APPLICATION

13. EDUCATION:

A. List all elementary, junior high, high schools attended. Attach transcript form the last high school attended.

Name	Address (City, State, Zip)	Dates Attended	Dates Completed	Graduated? Yes/No

B. Higher education: List all colleges or universities attended. Attach transcript form the last institution.

Name	Address (City, State, Zip)	Dates Attended From To	Credit Hours Semester/Quarter	Degree Received Yes/No

Major and Minor Courses: _____

C. Other schools or training (trade, vocational, military). Give for each the name and location of school, dates attended, subjects studied, certificate(s) earned, and any other pertinent data. Include complete mailing address for each.

14. SPECIAL QUALIFICATIONS AND SKILLS:

A. Indicate type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued, and date current license expires.

B. Special skills you possess and machines and equipment you can use. (For example, computer programmer, polygraph operator, vehicle inspection mechanic, scientific or professional devises.)

C. Approximate number of words per minute: Keyboard or typing _____ Shorthand _____

D. Special qualifications not covered in application: (For example, your most important publications patents, inventions, public speaking, membership in professional or scientific societies, honors and fellowships received, etc.)

15. FOREIGN LANGUAGE: Enter language and indicate fluency.

Language	Reading	Speaking	Understanding	Writing
_____	_____	_____	_____	_____

16. FOREIGN TRAVEL: Exclude trips of less than 30 days to Canada or Mexico and travel as a direct result of U.S. military duties.

Dates	Country	Purpose of Travel
_____	_____	_____

17. HOBBIES AND SPORTS:

Name	Length of Participation	Level of Proficiency
_____	_____	_____

POLICE OFFICER APPLICATION

18. EMPLOYMENT: Begin with your most recent job and list your work history for the past ten years, including part-time, temporary, or seasonal employment, and all periods of unemployment.

From Date	Name & Address of Employer	Job Title	Reason for Leaving

To Date	_____	Description of Duties	

Starting Salary	Name of Supervisor		
Ending Salary	Name of Co-Worker		

From Date	Name & Address of Employer	Job Title	Reason for Leaving

To Date	_____	Description of Duties	

Starting Salary	Name of Supervisor		
Ending Salary	Name of Co-Worker		

From Date	Name & Address of Employer	Job Title	Reason for Leaving

To Date	_____	Description of Duties	

Starting Salary	Name of Supervisor		
Ending Salary	Name of Co-Worker		

***If additional employer blocks are needed, please attach the requested information on a separate sheet of paper.**

Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)? If yes, state the reason:

POLICE OFFICER APPLICATION

Have you ever resigned after being informed that your employer intended to discharge you for any reason? If yes, explain, giving the name and address of the employer, the approximate date, and the reasons in each case.

19. MILITARY STATUS:

	Yes	No
Have you served in the U.S. Armed Forces? If yes, attach photostatic copy of discharge or separation papers.	_____	_____

Do you claim veterans' preference?	_____	_____
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A. While in the military service, were you ever convicted for any crime graded as a misdemeanor, felony or greater offense? If yes, give date, place, law enforcing authority or type of court or court martial, charge and action taken for each incident, using a separate sheet of paper to record this information.	_____	_____
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B. Are you presently a member of a U.S. Reserve or State Guard organization? If yes, complete the following:	_____	_____
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Grade and Service No.: _____

Service and Component: _____

Organization and Station or Unit and address: _____

_____ Status: _____

Indicate reserve obligation, if any: _____

SELECTIVE SERVICE:

Last Classification: _____

Selective Service No.: _____ Last Classification: _____

Date: _____ Local Board: _____

Address: _____

POLICE OFFICER APPLICATION

21. CHARACTER REFERENCES: List only character references with definite knowledge of your qualifications for the position of application. List 5 character references. (Do not list relatives, former employers, or persons living outside the United States.)

Name	Address (City, State, Zip)	Home Phone	Work Phone	Years Known

22. Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to take or which might require further explanation? If yes, give details.

23. Have you ever applied for a position with any other governmental agencies? If yes, give details.

24. REMARKS:

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me above are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

Date

Signature

POLICE OFFICER APPLICATION

NOTIFICATION PROCEDURE RELEASE

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event that they are being given further consideration for the position of police officer with the Township.

If conventional methods fail in attempting to contact the applicant, a certified-registered letter will be sent to the applicant's address listed on the application. Should the registered letter be returned, indicating that it was unclaimed or undeliverable, the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the Township Police, in writing, of the address change. By affixing your signature to this form, the applicant acknowledges that you have read and understood the contents of this procedure.

Date

Signature

POLICE OFFICER APPLICATION

WAIVER AND RELEASE FOR BACKGROUND INVESTIGATION

I, _____ (Name of Applicant), hereby give Hopewell Township the right to make a thorough investigation into my background, previous employment, education, and references in order to ascertain my suitability for service as a police officer. I release from all liability and claims any and all persons, companies and corporations (public and private) supplying any information whatsoever to representatives of Hopewell Township. This includes, and is not limited to, parties with whom I have entered into a written or oral agreement which contains a confidentiality clause. I release, indemnify, and hold harmless Hopewell Township, its officials, officers, and employees from and against any and all liability which might result from conducting such an investigation.

Date

Signature

Notary Public

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC.

POLICE OFFICER APPLICATION

ESSENTIAL DUTIES OF A POLICE OFFICER

1. Running for several hundred yards;
2. Climbing over obstacles;
3. Crawling;
4. Pushing motor vehicles;
5. Pulling or carrying accident, fire, or crime victims;
6. Using physical force to apprehend and subdue arrestees;
7. Withstanding prolonged exposure, as long as eight hours, to extreme weather conditions;
8. Withstanding prolonged periods of standing or sitting;
9. Withstanding frequent exposure to stress-producing situations, such as encountering persons injured or killed by accidents, crimes or suicide;
10. Dealing with domestic disputes;
11. Dealing with verbal and physical abuse of the officer, including taunts, insults, and threats to the officer, family members or fellow police officers;
12. Communicating effectively with individuals suffering from trauma;
13. Operating a motor vehicle for long periods of time;
14. Using a firearm and Taser effectively; and
15. Filling out written reports in a clear and concise manner.

I have reviewed the above list of essential job functions for a Hopewell Township police officer and believe that:

_____ I can fully perform all duties without reasonable accommodations.

_____ I can fully perform all duties, but only with the following accommodations for the duties specified: (Specify) _____

_____ I cannot fully perform all duties, even with accommodations.

Name

Signature

Date

POLICE OFFICER APPLICATION

VERIFICATION

I understand that this application has been completed subject to the penalties of 18 Pa. C.S. 54904 relating to unsworn falsification to authorities.

Date

Signature