

GREENSBORO POLICE DEPARTMENT

120 E. North Street, PO Box 119, Greensboro, Indiana 47344

Chief Chris Pickens



Date of application: / /

POLICE OFFICER EMPLOYMENT APPLICATION

(PLEASE PRINT OR TYPE)

PERSONAL HISTORY

a. Name in full (last, first, middle)

b. Date of Birth

c. Social Security Number

d. List all other names you have used (include nicknames, maiden name, etc.)

e. Address, City, State, Zip Code

f. Home Telephone Number

g. Alternate Telephone Number

h. Driver's License Number, Driver's License State

j. List all other states in which you have had a driver's license issued to you

EDUCATION RECORD

HIGH SCHOOL

Dates Attended _____

Name _____

Address _____

Date Graduated _____

COLLEGE/UNIVERSITY

Dates Attended _____

Name _____

Address _____

Date Graduated _____

MISCELLANEOUS EDUCATION INFORMATION

List any awards, honors, citations, athletic endeavors, and/or any other special recognition you received during **y**our academic career:

List any special abilities (computer skills, etc), special interests or hobbies that you have: _____

ORGANIZATIONS

Are you now, or have you ever been, a member of any club, society, or organization?

Yes No.

If Yes, list below.

VOLUNTEER EMPLOYMENT

List below all volunteer activities you are, or have been involved with, to include civic activities, volunteer fire fighting, police or sheriff reserves, etc.

Organization _____

City and State _____

Dates _____

Position(s) Held _____

Organization _____

City and State _____

Dates _____

Position(s) Held _____

SELECTIVE SERVICE / MILITARY RECORD

Have you ever (check all that apply):

Registered with the Selective Service? Yes No Not Applicable

Applied for a position with any branch of the Armed Forces of the United States?
 Yes No

Been rejected by any branch of the Armed Forces? Yes No
If yes, state reason(s): _____

Served on active duty in any branch of the Armed Forces? Yes No

Dates of Active Duty (mo/day/yr) _____

Branch of Service _____

Highest Rank Attained _____

MOS/Job Title _____

Type of Discharge _____

List any awards, commendations, medals received as a result of military service:

Was any type of disciplinary action taken against you in the service?
 Yes No

If Yes, type and nature of action: _____

EMPLOYMENT EXPERIENCE

List your work experience, starting with the most recent, include summer and part-time employment. If unemployed for a period of time, indicate such, setting forth the dates of unemployment.

Account for all time.

Name of Employer _____

Dates of Employment _____

Address _____

Position and kind of work _____

Name of Supervisor _____

Telephone Number _____

Name of Employer _____

Dates of Employment _____

Address _____

Position and kind of work _____

Name of Supervisor _____

Telephone Number _____

IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE ON A SEPARATE SHEET OF PAPER

ADDITIONAL QUALIFICATIONS

Summarize any special job related skills and qualifications acquired from employment or other experience.

REFERENCES

List three references, not related to you.
Include complete name, occupation, and years acquainted.

ADDITIONAL INFORMATION

State below any additional information you feel may be helpful to us in considering your application.

GREENSBORO POLICE DEPARTMENT

APPLICANTS STATEMENT

I certify that the answers contained within this application for employment are true and complete to the best of my knowledge. By signing below I hereby authorize investigation of all statements contained within this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that any false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant _____

Email application to: recruit@townofgreensboro.in.gov

FOR PERSONNEL DEPARTMENT USE ONLY

Date application received: __/__/__

Is the position applied for open? Yes NO

Schedule:

Physical Fitness Test _____

Written Test _____

Oral Interview _____

Psychological Test _____

Physical Examination _____