Position Applied	for:	Full Time _	Pai	rt Time	Date:	
Name					_	
	(last)	(First)		(Middle)		
Social Security #		Phone #	Home:	()		
			Other:	()	_	
Are you a U.S. Ci	tizen?	Expected salary: \$		Per		
Address:						ſ
	(Street)	(City)	(State)		How Long
Have you been en	nployed by the City of Sturg	eon previously?	f yes, ple	ease state dates:		
Have you served i	in the Military:	Are you 21 years of ag	e?			
Do you have a cri	minal history?	If yes, please explain:				
Has your drivers	license ever been: REVOKE	ED SUSPENDED				
If yes, please expl	ain:					
Have you ever be	en convicted of a Felony or M	Misdemeanor? If Yes, plea	se explai	n:		
Does vour conscie	ence prohibit the bearing of a	arms?				

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ormance?
Enforcement Training Academy

Do you have experience v	vith:				
Martial Arts:	Describe				
Sign Language:	Danamilaa				
Weapon Use:	Describe				
Other:	Describe				
Please list any additional	experience, skills or sp	ecialized train	ing that you ha	ve:	
Please answer the rema		our own hand	writing:		
Why do you feel that being	a police officer is importa	int work?			
How do you feel that you co	uld make a difference in	a person's life?			

Please list all previous residences:

(From/To)	(Street)	(City)	(State)	(How long)
(From/To)	(Street)	(City)	(State)	(How long)
(From/To)	(Street)	(City)	(State)	(How long)
(From/To)	(Street)	(City)	(State)	(How long)
(From/To)	(Street)	(City)	(State)	(How long)
(From/To)	(Street)	(City)	(State)	(How long)

Work History

List Previous employes for the last five years (beginning with the most recent or current)

	Name and Address Name of Supervisor	Date Hired/ Date left	Type of Work	Wages/ per hour	Reason for Leaving	May we contact?
(1)						
F						Y
F						- N
-						
(2)						•
-						Y
F						N
<u> </u>						
(3)						\mathbf{Y}
F						
						N
(A)						
(4)						Y
						N
-						

City of Sturgeon

Education

Please begin with high school & include any college, vocational or technical training:

Name and Address	Major Courses	Degree	Year Graduated

City of Sturgeon

References:

Please list the names and addresses of 3 (three) personal references, all of whom are not related or a former employer.

(1)				
	(Name)			length of time known
	Address	City	State	Phone
(2)				
	(Name)			length of time known
	Address	City	State	Phone
(3)				
	(Name)			length of time known
	Address	City	State	Phone
Applicar	nts Statement:			
	contained in this application for employment, I understand that	ein are true and complete to the best of my r employment as may be necessary in arriv false or misleading information given in n	ving at an employment application or inte	nt decision. In the event of erview(s) may result in discharge.
	I understand also that I am to a	bide by all rules and regulations set forth b	by the City of Sturge	on.
	(Signature)		\overline{C}	Date)

Authority for Release of Information and Waiver

I,do here records concerning myself to any duly authori whether the said records are of a public, priva such request could result, directly or indirectly part of which could be included in my personal	te or confidential nature. I understand that y, in the release of negative information, any
The intent of this authorization is to give my crecords of educational institutions; financial o loans; employment and re-employment record ratings, complaints or grievances filed by or as examinations and the records and recollection presently have, or have had an interest. I here confidentiality for any attorney with whom I have	r credit institutions, including records of ls, including background reports, efficiency gainst me; the results of any polygraph s of attorney at law, or civil, in which I by waive the attorney-client privilege of
I understand that any information obtained by which is developed directly or indirectly, in who considered in determining my suitability for Department. I understand that all materials property of the Sturgeon Police Dealso certify that any person(s) who may furnishe held legally accountable for giving this information any and all liability which such information. A photocopy of this release form will be valid as	nile or part, upon its release authorization will remployment by the Sturgeon Police pertaining to this background investigation epartment and will not be returned to me. It has such information concerning me shall not remation in anyway; and I do hereby release may be incurred as a result of furnishing as an original thereof, even through the said
photocopy does not contain and original writing	ng of my signature.
Full Name (Print, include maiden name)	Date of Birth
Address	Social Security Number
City/State/Zip Code	Phone (include area code)
Signature of Applicant	
Subscribed and sworn to before me this	day of