

EMPLOYMENT APPLICATION FOR POLICE OFFICER

City of Sultan
 319 Main Street #200 - P.O. Box 1199
 Sultan, WA 98294-1199
 (360) 793-2231
 Fax: (360) 793-3344

I.D. # _____
 (Office Use Only)

It is the policy of the City of Sultan to afford equal opportunity to all employees and applicants for employment regardless of race, religion, color, sex, sexual orientation, age and national origin as well as individuals with disabilities, special disabled veterans and Vietnam-era veterans. The City of Sultan also promotes a drug-free and smoke-free work environment.

You may attach to this application additional information, which you feel, will be helpful in evaluating your qualifications. This application (and accompanying resume and/or other accompanying documents, if any) will become part of your personnel file should you be employed. **Please complete the entire application even if you are providing a resume. An incomplete application may disqualify you. Please write answers in black ink.**

Position Applied For (if you are interested in Reserve Officer, please indicate that as well)	Entry Level <input type="checkbox"/>	Experienced Lateral <input type="checkbox"/>	Reserve <input type="checkbox"/>
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Personal Data

Name	Last			First			M.I.		
	Street			City			State		Zip
Address:									
Driver's License Number:				Date of Birth:					
Daytime Phone:				Other names you have been known by, if any:					
Evening Phone:									

Education History

	High School/G.E.D.	Undergraduate College/University	Graduate/Professional
School Name and Location			
# Years Completed			
Year Graduated	Do Not Fill Out This Box		
Diploma/Degree			
Course of Study			
Did you graduate from the Washington State Criminal Justice Academy? ___ Yes ___ No If yes, give date:			
Describe any specialized training, apprenticeship, skills, etc.:			
Describe any honors you received:			
Certifications received:			
Describe any unusual accomplishments, scholastic honors, honorary societies, patent/publications, professional registration certifications, professional societies, languages, and other pertinent experience or honors:			

Employment History

Are you currently employed? Yes No

Complete the following section in detail, most recent employer or current employer first (include military service, part-time, summer employment, self employment, volunteer, or temporary employment if applicable). You need not go back beyond 10 years. Please complete the following information, even if accompanied by a resume.

Most Recent Employer:	May We Contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	Telephone:	Supervisor's Name:
Street and/or Mailing Address:	City:	State/Zip:	Dates Employed: (month/yr) (month/yr) From: To:
Your Position:	Base Salary \$ Starting Ending <input type="text"/> <input type="text"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/>	Reason for Leaving (attach separate sheet if needed)	
Describe Major Work Duties (Attach separate sheet if needed):			
Previous Employer:	May We Contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	Telephone:	Supervisor's Name:
Street and/or Mailing Address:	City:	State/Zip:	Dates Employed: (month/yr) (month/yr) From: To:
Your Position:	Base Salary \$ Starting Ending <input type="text"/> <input type="text"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/>	Reason for Leaving (attach separate sheet if needed)	
Describe Major Work Duties (Attach separate sheet if needed):			
Previous Employer:	May We Contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	Telephone:	Supervisor's Name:
Street and/or Mailing Address:	City:	State/Zip:	Dates Employed: (month/yr) (month/yr) From: To:
Your Position:	Base Salary \$ Starting Ending <input type="text"/> <input type="text"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/>	Reason for Leaving (attach separate sheet if needed)	
Describe Major Work Duties (Attach separate sheet if needed):			

(Attach additional pages if needed)

General Information

• Have you ever been employed with the City of Sultan? If yes, when:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• When would you be available to begin work, if offered a position at the City?		
• How long have you been a resident of Washington State?	Years:	
• Are you physically able to perform the duties of Police Officer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Have you served in any of the U.S. armed forces?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Has Veteran's preference been used previously?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Do you claim Veteran's preference now? (A copy of your DD214 must be returned with your application).	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• If preference points are being claimed, please indicate appropriate percentage (see acknowledgement located on separate attachment.)	Veterans	%
• Active Sultan Police Department Reserve Officers entitled to preference points in the amount of 1% per year served, to a maximum of 5%. If you are claiming preference points as a Sultan Police Department Reserve Officer, please indicate the appropriate percentage.	Reserves	%
• Are you currently on "lay-off" status with another employer and subject to recall?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Are you a citizen of the United States?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• If employment is offered, can you submit a birth certificate, social security card, and certificate of U.S. citizenship or verification of your legal right to work in the U.S.?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• If employment is offered, can you produce personal identification such as a U.S. passport, a driver's license or photographic identification card issued by the state?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Have you ever been fired from a job or asked to resign? If so, please describe circumstances:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Have you ever been arrested or convicted of any offense against the laws of any city, state, or nation? If yes, explain nature of offense and date(s):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
• Are you under 18?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please list residences you have occupied in the last five years:

Year	Residence Address	City, State, Zip

To what other Washington State law enforcement agencies have you applied and what is the status of your application?

Other Law Enforcement Agency:	Status

Professional References

Please provide the names and business telephone numbers of people who are familiar with your work experience and technical competence in the field for which you are applying, preferably professional/technical associates and/or past supervisors with whom you have worked and give us permission to contact. (Please do not list personal references).

Name:	Title:	Business Telephone:	Business/Professional Relationship
Name:	Title:	Business Telephone:	Business/Professional Relationship
Name:	Title:	Business Telephone:	Business/Professional Relationship

Please read the following carefully before signing this application:

The facts set forth above are true and complete. I authorize the City of Sultan to obtain information about me from previous employers, including relevant facts and opinions about my work and work habits, and I release from liability or responsibility all persons or corporations requesting or supplying such information (___ initial here).

I expressly authorize any educational institutions that I have attended to provide transcripts and degree status (___ initial here).

I understand that any falsified information or significant omission on this application may disqualify me from further consideration for employment, and that if employed, false statements or incorrect information on this application shall be considered justification for dismissal if discovered at a later date (___ initial here).

If employed by the City of Sultan I agree to adhere to city policies and procedures, although I understand that my agreement to do so does not create a contract of employment between myself and the City of Sultan (___ initial here).

I further understand if business needs require, as a condition of continued employment, the City of Sultan may change work assignments, schedules, and/or locations (___ initial here).

I also understand if I am offered employment by the City of Sultan it is contingent on my ability to furnish proof of my identity and U.S. citizenship, or my legal authorization to work in the U.S., as required by federal law. Failure to do so and/or lack of proper documentation (within 3 days of my receipt of an offer of employment) will result in termination per the Immigration Reform and Control Act of 1986 (___ initial here).

Signature: _____ Date: _____

City of Sultan
Affirmative Action/Equal Opportunity

It is the policy of the City of Sultan to provide equal opportunity in all terms, conditions, and privileges of employment for all qualified applicants and employees without regard to race, color, national origin, sex, age, marital status, veteran status, sexual orientation or the presence of any sensory, mental or physical disability. To help us comply with government recordkeeping, reporting, and other legal requirements, please complete the affirmative action data below. Providing this information is voluntary and will be kept in a confidential file separate from the application form.

I self identify with the following group:

Please mark one of the following categories (defined by governmental terms):

- BLACK** All persons having origins in any of the Black racial groups of Africa.

- HISPANIC** All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture, regardless of race.

- ASIAN** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.

- NATIVE AMERICAN** All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation of community recognition. ***Meets Bureau of Indian Affairs definition standards.***

- WHITE** (or not covered above).

Gender:

MALE

FEMALE

Age:

OVER 40

UNDER 40

I qualify under the Affirmative Action Program as:

- A Special Disabled Veteran** (receives 30% disability)

- A Vietnam Era Veteran** (military service between August 5, 1964 and May 7, 1975)

I was in the military from _____ to _____

I understand that this information will be kept confidential, except as required, in conjunction with the federal regulations (WAC 162-12-160 (2)) and will not become a part of my personnel file.

Name: _____

Signature: _____ Date: _____

