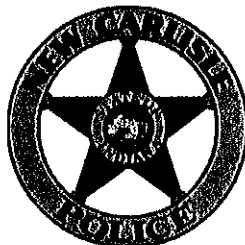


Employment Application

New Carlisle Police Department

This is an application to be included in the New Carlisle Police Department's hiring process



Please print or type and fill out completely: DATE: _____

NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____

DOB: _____ SOC. SEC. #: _____

DRIVER'S LICENSE #: _____ STATE: _____

TELEPHONE: _____
HOME CELLULAR

EMAIL: _____

BASIC ELIGIBILITY REQUIREMENTS

1. Must be a United States Citizen
2. Must be at least 21 years of age
3. Eye requirement: Correctable to 20/50
4. Must possess a valid driver's license
5. Must be willing, if appointed, to reside within St. Joseph County or LaPorte County.
6. Must possess a high school diploma or GED
7. Must be physically fit to meet academy physical standards.

INSTRUCTIONS

*No exceptions will be made for anyone not meeting all requirements.

*The application must be filled out by the applicant.

*Answer all questions. If the question does not apply, state "none" or "does not apply."

BACKGROUND INFORMATION

Please provide previous addresses for the past ten years. (If you need additional room, please include on a separate sheet of paper)

PREVIOUS ADDRESS: _____

PREVIOUS ADDRESS: _____

PREVIOUS ADDRESS: _____

ARE YOU OVER THE AGE OF 21? _____

ARE YOU A U.S. CITIZEN? _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR DOMESTIC VIOLENCE? _____

If yes, please explain:

HAVE YOU EVER BEEN FIRED OR FORCED TO RESIGN FROM EMPLOYMENT? _____

If yes, please explain:

HAVE YOU EVER USED OR BEEN IDENTIFIED BY A DIFFERENT NAME? _____

If yes, please explain:

If more room is needed, please provide on a separate sheet.

MARITAL STATUS AND DEPENDENTS

SINGLE [] MARRIED [] SEPARATED [] DIVORCED []

SPOUSE'S NAME: _____

CHILDREN'S NAMES: _____

EMERGENCY CONTACT

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____

PHONE: _____ CELL: _____

EDUCATION AND MILITARY EXPERIENCE

SCHOOL	NAME/CITY	DEGREE/LICENSE/MAJOR
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HIGH SCHOOL		
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TECHNICAL SCHOOL OR OTHER TRAINING

COLLEGE

OTHER

VETERAN OF U.S. MILITARY SERVICE? _____

BRANCH? _____

TYPE OF DISCHARGE? _____

FINAL RANK? _____

WORK HISTORY – Please Provide Last 10 Years – Use Separate Sheet if Needed (List present or last job first)

COMPANY: _____ JOB TITLE: _____

ADDRESS: _____

PHONE: _____

DATES: FROM: _____ TO: _____

SUPERVISOR: _____ PAY: _____

JOB DUTIES:

REASON FOR LEAVING:

WORK HISTORY CONTINUED

COMPANY: _____ JOB TITLE: _____

ADDRESS: _____

PHONE: _____

DATES: FROM: _____ TO: _____

SUPERVISOR: _____ PAY: _____

JOB DUTIES:

REASON FOR LEAVING:

WORK HISTORY CONTINUED

COMPANY: _____ JOB TITLE: _____

ADDRESS: _____

PHONE: _____

DATES: FROM: _____ TO: _____

SUPERVISOR: _____ PAY: _____

JOB DUTIES:

REASON FOR LEAVING:

WORK HISTORY CONTINUED

COMPANY: _____ JOB TITLE: _____

ADDRESS: _____

PHONE: _____

DATES: FROM: _____ TO: _____

SUPERVISOR: _____ PAY: _____

JOB DUTIES:

REASON FOR LEAVING:

PERSONAL REFERENCES (Excluding family members or work supervisors)

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

ADDITIONAL INFORMATION

HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED? _____

If Yes, please explain on separate sheet of paper.

PLEASE LIST ANY CURRENT ILEA CERTIFICATION OR PROFESSIONAL LICENSE WHICH MAY BE RELEVANT FOR THE POSITION YOU ARE APPLYING:

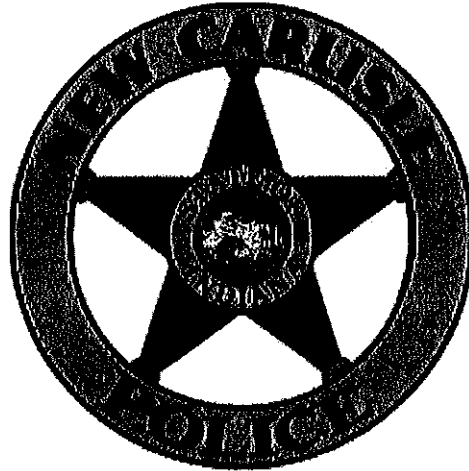
PLEASE ATTACH A PHOTO COPY OF YOUR CURRENT DRIVER'S LICENSE

PLEASE ATTACH COPY OF ACADEMY CERTIFICATION OR ANY OTHER CERTIFICATE OF TRAINING YOU MAY HAVE

PLEASE DO NOT CALL THE NEW CARLISLE POLICE DEPARTMENT TO INQUIRE ABOUT THE STATUS OF YOUR APPLICATION. YOU WILL BE NOTIFIED FOR THE NEXT PHASE OF THE PROCESS.

MAKE SURE THAT ALL FIELDS OF THE APPLICATION HAVE BEEN COMPLETED. ANY INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED FOR THE HIRING PROCESS.

THIS APPLICATION MUST BE COMPLETED AND RETURNED TO THE NEW CARLISLE POLICE DEPARTMENT OR CLERK'S OFFICE TO BE CONSIDERED FOR THE HIRING PROCESS.



I certify that all of the statements made in this application form are true, complete, and correct to the best of my knowledge. I understand that false or misleading statements may be sufficient grounds for not being hired, or upon discovery once hired, grounds for discharge. I authorize the New Carlisle Police Department to contact previous employers, references, schools, and others deemed necessary in order to obtain information and to verify information contained in this application. I release the New Carlisle Police Department from any liability for information released.

PLEASE SIGN

DATE

The New Carlisle Police Department is an equal opportunity employer and does not discriminate on the basis of race, creed, color, sex, religion, national origin, marital status or veteran's status.