FREEPORT POLICE DEPARTMENT 16 Main Street Freeport, Maine 04032



POLICE OFFICER
EMPLOYMENT APPLICATION

FREEPORT POLICE DEPARTMENT 16 Main Street Freeport, Maine 04032

Tel. (207) 865-4800 Fax. (207) 865-2901

Susan B. Nourse Chief of Police

EMPLOYMENT APPLICATION FORM

General Information and Instructions

The information you provide in this personal history statement will be used in the investigation to assist in determining your suitability for the position of Police Officer. Please fill out the application completely and accurately. Keep in mind that:

1. Maine State law requires:

Prior to appointing any law enforcement official, the municipal officials shall conduct an investigation into the qualifications and background of any person being considered for appointment. This shall include investigation of the applicant's abilities, reputation for truthfulness, and respect for the law.

- 2. All statements are subject to verification.
- 3. All items on the applications must either be filled out or marked "N/A" meaning they do not apply. Deliberate inaccuracies or incomplete statements may result in automatic disqualification.
- 4. You should account for all time periods in your background.

It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence, and its degree of relevance to the job of Police Officer. For example, being fired from a job is not in itself grounds for disqualification. During the investigation, the investigator will inquire into the facts surrounding such an occurrence. An evaluation will then be made of the relevance of these facts to the requirements of the job.

Please print in ink or type your responses on this application. If you need more space to respond to a question, use the reverse side of the page and identify the question to which the additional information applies.

Your ALERT score must be submitted with this application.

You may submit a resume to supplement the information requested on this application.

Please return the signed application with any supplemental material in person or by mail to the listed address

The Town of Freeport is an Equal Opportunity Employer

FREEPORT

FREEPORT POLICE DEPARTMENT 16 Main Street Freeport, Maine 04032

Tel. (207) 865-4800 Fax. (207) 865-2901
Susan B. Nourse
Chief of Police

	Last	First			Middle	
Address:	No.	Street	Apt.	City	State	Zip
Telephor	ne: ()				_
E-mail a	ddress:					
		21 years of permitted or			in the United States?	Y N
If yes, gi Have yo	ve the o	department a	and dates: y any other Poli	n of Freeport?	From:	То:
-			•	tact your presen	nt employer? Y \[\] N act:	1
If hired,	on wha	t date would	you be availat	ole to start work	ing?	
Maine D	river's r states	License (Cla where you l	$ass) A \square B [$ nave been licen	C License sed to operate a	Branch of service: Number: motor vehicle: lation, date, and locati	on (city).
List all ti	accider	its where yo	u were involve	d as a driver. In	nclude date and location	n.
List all to	any con	riminal conv	rictions for any	violation of the	e law? Y N N	

FREEPORT

FREEPORT POLICE DEPARTMENT 16 Main Street Freeport, Maine 04032

Tel. (207) 865-4800

Fax. (207) 865-2901 Susan B. Nourse Chief of Police

EMPLOYMENT HISTORY

Starting with present or most recent, list your previous employers. Include self-employment, summer, and part-time jobs.

1.		
Employer	Address	Telephone
Job Title	Description of Duties	
Dates Employed	Supervisor	Reason for leaving
2. Employer		
Employer	Address	Telephone
Job Title	Description of Duties	
Dates Employed	Supervisor	Reason for leaving
3.		
3. Employer	Address	Telephone
Job Title	Description of Duties	
Dates Employed	Supervisor	Reason for leaving
4. Employer		
Employer	Address	Telephone
Job Title	Description of Duties	
Dates Employed	Supervisor	Reason for leaving

FREEPORT POLICE DEPARTMENT 16 Main Street

Freeport, Maine 04032

Tel. (207) 865-4800

Fax. (207) 865-2901 Susan B. Nourse Chief of Police

EDUCATION AND TRAINING

	re a college degree? Y \(\sum \) N \(\sum \) If yes, In the classes/credits earned towards a degr	
turiori.	List schools attended starting	
School	Location	Degree or credits earned
	ditional skills, certifications, or licenses this position.	
	-	
	DETERMINE	70
Give the naryear.	mes of three persons not related to you,	
Name	Address	Telephone
Name	Address	Telephone
Name	Address	Telephone
	CERTIFICATION AND	AGREEMENT
the informa understand dismissal. I	rtify that the information set forth in the tion on my resume is true and complete that if employed, omissions or failed sta I authorize investigation of all statement at as may be necessary in arriving at an o	to the best of my knowledge. I attements shall be sufficient cause for its contained in this application for
Date:	Signature of Applic	ant:

The Town of Freeport is an Equal Opportunity Employer