

## The Village of Pecatonica Police Department Application for Employment

**INSTRUCTIONS:** Please complete this application completely and accurately. All statements are subject to verification. If you need more space to complete an answer, please use the "Continuation" section at the end of this application. Use the term "DNA" (Does Not Apply) if the question does not apply to you.

Full Name:	Social Security #:
Street Address:	
City/State/Zip:	
Phone # Email Address:	
Position Applied for:	Are you over the age of 21? $\bigcirc$ Yes $\bigcirc$ No
Have you ever been employed by the Village of Pecatonica?	🔿 Yes 🔿 No
Are you legally eligible for employment in the United States?	🔿 Yes 🔿 No
Have you ever applied for a position with this department?	🔿 Yes 🔿 No
If YES, when?	
EDUCATION: Name and location of school	
High School:	City/State
Did you graduate? 🔿 Yes 🔿 No	
Business/Trade:	City/State
Did you graduate? 🔿 Yes 🔿 No 🛛 If YES, Deg	ree:
College/University:	City/State
Did you graduate? 🔿 Yes 🔿 No 🛛 If YES, Degr	ee:
	_ City/State
Did you graduate? 🔿 Yes 🔿 No 🛛 If YES, Degr	

**<u>CONTINUING EDUATION and/or SPECIAL TRAINING or SKILLS:</u>** List additional information that would be of benefit in the job for which you are applying; i.e., computer experience.

## MILITARY SERVICE:

Have you ever served in a branch of the United States military?	🔿 Yes	🔿 No	
If YES, what branch?			
Did you receive a dishonorable discharge?		🔿 No	

## **PREVIOUS EMPLOYMENT**: Begin with your most recent position.

Employer:				
Address:		Phone #:		
Dates Employed: from	to	May we contact? O Yes O No		
Job Title:		Supervisor:		
Job Duties:				
Reason for Leaving:				
Employer:				
Address:		Phone #:		
Dates Employed: from	to	May we contact? 🔿 Yes 🔿 No		
Job Title:		Supervisor:		
Job Duties:				
Reason for Leaving:				
Employer:				
Address:		Phone #:		
Dates Employed: from	to	May we contact? 🔿 Yes 🔿 No		
Job Title:		Supervisor:		
Job Duties:				
Reason for Leaving:				
Employer:				
Address:		Phone #:		
Dates Employed: from	to	May we contact? $\bigcirc$ Yes $\bigcirc$ No		
Job Title:		Supervisor:		
Job Duties:				
Reason for Leaving:				

## **<u>CRIMINAL HISTORY:</u>** (as an adult, minor, or juvenile)

**A convictio	n record will not necessarily bar you from	n employment with this agency.**	
Have you ever been	o convicted of a criminal offense?	🔿 Yes 🔿 No	
lf YES, expla	ain:		
Date:	By Whom (Police Agency)	:	
<u>REFERENCES:</u> (Do	not include family members)		
Name:		Relationship:	
Address:		Phone #:	
Name:		Relationship:	
Address:			
Name:		Relationship:	
Address:		Phone #:	
REASON FOR APP	PLYING:		

**<u>ADDITIONAL INFORMATION</u>**: Please include any other information you think would be helpful when considering your application for employment.

**CONTINUATION:** Please indicate which question you are answering and then complete in space provided.

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

Applicant's Signature:	Date:		
How did you hear about our Department? (Select all that apply)	○ <sup>TV</sup> ○ Advertising	Digital Billboard	Online Advertising

Completed applications can be emailed to <u>msummers@villageofpecatonica.com</u>

The Village of Pecatonica is an equal opportunity employer and does not discriminate in employment based on race, religion, sex, age, national origin, color, ancestry, marital status, or mental or physical handicaps.

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