

DAMARISCOTTA POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

POSITIO	N APPLIED FOR: _		DATE:
How did y	ou learn about us?	Advertisement Friend _ Employment Agency Rel	
	<u>PE</u>	RSONAL HISTORY STATEM	<u>MENT</u>
<u>APPLIC</u>	ANT IDENTIFICA	ΓΙΟΝ	
Name:			
	Last	First	Middle
Address:	Number	Street	
	City	State	Zip Code
Telephone		de pager and/or cell phone if app	
Best time	to be reached:		
		ation with us before?:k in the U.S.?:	

Date available	to work:	_//	What is your desired salary range?:
Are you availab	ole to work:	Full Time Part Time Temporary	
		•	u have lived during the past ten years, beginning d year. (Attach extra page if necessary).
<u>From</u>	<u>To</u>		Address
for the past ten periods of unen that your presen	years, includ nployment. (nt job would	ing part-time, te Attach extra pag be in jeopardy if	resent or most recent job, list all employment held imporary or seasonal employment. Include all ges, if necessary). Please indicate if you are fearful rinquiries are made.
			yci
			b Title
Duties:			
Supervisor			
Reason for leav	ring		
From	То	Employ	yer

Address			
Phone Number		Job Title	
Duties:			
Reason for leavin	.g		
From	_ To	Employer	
Address			
		Job Title	
Duties:			
Reason for leavin	<u>g</u>		
From	To	Employer	
Address			
Phone Number			
Duties:			
Reason for leavin	g		

MILITARY RECORD

Have you served in the U.	S. Armed Forces?	Yes 1	No		
Date of Service: From		Branch of Se	rvice		
Were you ever disciplined Company Punishment, Ar				Captain'	s Masts,
Charge	Agency	<u>Date</u>	Dispo	<u>osition</u>	
If you received a discharg paper.	e other than honorabl	le, give complete det	ails on a sepa	rate shee	et of
EDUCATION HISTOR	<u>Y</u>				
High School Attended	City & State	Dates Attended	<u>l</u>	Gradua	ated_
		Fromt	o	Yes	_No
College or University atte	nded				
City & State		Dates attended _			
Semesters completed		Major/Minor			
Degree received and date					
List other schools attended dates attended, course of s		ousiness, etc.) Give n	ame and addı	ress of so	chool,

SPECIAL QUALIFICATIONS & SKILLS

authority, original date of issu	e and date of expiration.
List any specialized equipmen	at or machinery that you can operate
List any special skills or quali	fications you may possess
	S, DETENTION AND LITIGATION
-	in court or are currently under indictment of investigation of a
felony? Yes No_	
DEFEDENCES OF A COLL	A INVERANCES
REFERENCES OR ACQUA	
	ou well enough to provide current information about you. Do not
list relatives or former emplo	oyers.
Name:	Address:
Home Phone:	Business Phone:
	
Years Known:	
Nama	Address:
	Business Phone:
	Dusiness I none.
Years Known:	
Name:	Address:
Home Phone:	Business Phone:
Business Address:	
Years Known:	

PERSONAL DECLARATIONS

Do you have any other beliefs or prejuduties of a Law Enforcement Officer?		ould prevent you from fully performing the No:
If YES, explain:		
	_	ESTION UNLESS YOU HAVE BEEN F THE JOB FOR WHICH YOU ARE
Are you capable of performing in a real accommodation, the activities involved review of the activities involved in such Yes: No:	d in the job or occu	occupation for which you have applied? A
omissions to the best of my knowledge this application could be grounds for d written false statement, with the intent	e, and understar lismissal. I also t to deceive a pu	application is true and complete with no nd that, if employed, falsified statements on a understand that a person who makes a ablic official in the performance of his ication, 17-A MRSA Section 453, a Class
Signature		Date

AUTHORIZATION TO RELEASE INFORMATION

TO: WHOM IT MAY CONCERN:

I hereby request and authorize you to furnish the Damariscotta Hiring Authority with any and all information they may request concerning my work record, educational history, military record, financial status, criminal record, general reputation, and past or present medical condition. This authorization is specifically intended to include any and all information of a confidential or privileged nature, as well as photocopies of such documents, if requested. The information will be used for the purpose of determining my eligibility for employment as a Law Enforcement Officer.

I hereby release you and your organization from any liability, which may or could result from furnishing the information requested above or from any subsequent use of such information in determining my qualifications to serve as a Law Enforcement Officer. This release will expire 60 days after date signed.

Signature	Date	