# **Police Officer Application**

#### BOROUGH OF FREEMANSBURG POLICE DEPARTMENT

### General Instructions

This application consists of several sections: a questionnaire; a Notification Procedure Release; a Verification; a General waiver; and a description of essential job functions. Every one of these sections must be completed in order for the Borough of Freemansburg to accept the Application as complete. Print (do not type) an answer to every question. If a particular question does not apply to you, so state with N/A. If space available is insufficient, use reverse side and precede with the number of the referenced block. Do not misstate or omit any material fact since the statements made herein are subject to verification to determine your qualifications for employment.

Questionnaire

Last Name	Middle Name	First Name		S	ocial Securi	ty Numbe
				За.		
Alias(es), Nick	name(s), Maiden Nar	ne, Other Nar	ne(s)	T	elephone Nu	umber
					5	
Present Resider	nce Address (Street	:/City/State/Z	ip)			
Present Resider	nce Address (Street	:/City/State/Z	ip)			
	nce Address (Street Native (Yes/No)	:/City/State/Z	ip)	Natura	alization No.	
		City/State/Z	ip)	Natura Court	ilization No.	
U.S. Citizen: N	Native (Yes/No)	:/City/State/Z	ip)		ilization No.	

Month & Yea From	To	Address		Vith Whom Did You Vhere Are They Now
		1 A		
		:		
		-		
		·		
Family				
		ers, our or ourseld alla	2.5p 0.00010.	Include any others wit
		rith whom a close relat	ionship exist	ed or exists.
whom you hav  Relationship				ed or exists.  ddress (if living)
whom you hav  Relationship  Father		rith whom a close relat		
whom you hav  Relationship		rith whom a close relat		
whom you hav  Relationship  Father		rith whom a close relat		
whom you hav  Relationship  Father		rith whom a close relat		
whom you hav  Relationship  Father		rith whom a close relat		
whom you hav  Relationship  Father		rith whom a close relat		
Relationship Father Mother	e resided or w	Name		
Whom you hav  Relationship Father  Mother  Vehicle Opera	tor's License	Name	A	
Whom you hav  Relationship  Father  Mother  Vehicle Opera  Give the follow	tor's License	Name  on concerning any veh	A	ddress (if living)
Whom you hav  Relationship Father  Mother  Vehicle Opera Give the follow now hold:	tor's License	Name  on concerning any veh	A	ddress (if living)
Whom you hav  Relationship Father  Mother  Vehicle Opera Give the follow now hold:	tor's License	Name  on concerning any veh	A	ddress (if living)
Whom you hav  Relationship  Father  Mother  Vehicle Opera  Give the follow now hold:  Type of License	tor's License ving informati	Name  on concerning any veh	nicle operator	ddress (if living)

Residences: List all for past ten years beginning with current.

7.

	Crime een convicted a m n? If yes, state vion.				d □Yes	s 🗆 No
Financial Status Do you have any occupation?	s income from any	source oth	er than you	ır principa		₃ □No
If yes, how much?		Ho ofte				
The source(s):						
-	ave you had any f t all accounts duri			_	king, loar	ns, stocks,
bonds, etc.)? Lis		ng the past	seven (7)	years.	king, loar	
bonds, etc.)? Lis	t all accounts duri	ng the past	seven (7)	years.		
bonds, etc.)? Lis  Name and Addr	t all accounts duri	ng the past	seven (7)	years.  Tyj  ocial,		

D. Sp im pro	Approximate number pecial qualification important publication rofessional or scient the scient that the scient	ns not covered in a ons, patents, invent ntific societies, hore	pplication: (Fions, public sphors and fellow	For example, yo peaking, memb wships received	our most ership in
D. Sp im pro	pecial qualification mportant publication rofessional or scient publication rofessional or scient publication rofessional or scient publication rofessional or scient rofessional or scient rofessional rofessiona	ns not covered in a ons, patents, invent ntific societies, hore	pplication: (Fions, public sphors and fellow	For example, yo peaking, memb wships received	our most ership in
im pro Foreign L Language	mportant publication rofessional or scient scient the scient scie	ons, patents, invent ntific societies, hor	ions, public sp nors and fellow	peaking, memb	ership in
Language			·		
Language			·		
Language			·		
Zorojan T				derstanding	Writing
_	Travel: Exclude to ult of U.S. militar	•	) days to Cana	da or Mexico a	and travel a
Dates		Country		Purpose of	Travel
Hobbies a	and Sports:				
Vame					
· carrie		Length of Par	ticipation	Level of Pro	oficiency

19. **Employment:** Begin with your most recent job and list your work history for the past ten years, including part-time, temporary or seasonal employment, and all periods of unemployment.

Date		Name & Address of Employer			
To	From				
Salary		Job Title			
Descriptio	n of Duties				
Why did y	ou leave?				
Name of S	upervisor:				
Name of C					
Date		Name & Address of Employer			
To	From	To			
Salary		Job Title			
·					
Description	n of Duties				
19					
Why did yo	ou leave?				
Name of Su					
Name of Co	o-Worker:				
Date		Name & Address of Employer			
From	To	From			
Salary		Job Title			
Description	of Duties				
Why did yo	ou leave?				
· ·					
Name of Su	pervisor:				

Nan	ne of Co	o-Worker:				
	If add sheet.		r blocks are needed, ple	ase attach requested info	rmation on	separate
		or subject to di	_	gn, furloughed, or put on in any position (except n		
	any re		_	your employer intended address of employer, app	_	
20.	Have If yes, Do yo	attach photosta u claim veterans While in the m convicted for a	uilitary service were you any crime graded as a m	separation papers.  ever  isdemeanor,	□ Yes □ Yes □ Yes	□ No □ No □ No
	В.	law enforcing martial, charge using separate Are you preser State Guard or	e the following:	rt or court ach incident, ormation.	□ Yes	□ No
		Service and Component:				
		Organization a or Unit and ad				
		Status				

	nareate reserve	obligation	i, ii any.		
Selectivo	e Service:		8		
Last Clas	ssification:				
Selective	e Service No:				
Date:			Local Board		
Address:					
Charact	er References				
position (	of application.	List 5 char		wledge of your qu (Do not list relatives.)	
Name	Addre	SS	Home Phone	Work Phone	Years Known
suitability		duties wh	ich you may be ca	rein which may re	
suitability	to perform the	duties wh	ich you may be ca		
suitability require fu	to perform the	duties whon? If yes	iich you may be ca , give details.		or which might

25.	Remarks:
	I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me above are true, complete, and correct to the best of my knowledge and belief and are made in good faith.
	Signature of Applicant
	Date
	VERIFICATION
therei	The information I have provided in the foregoing Application is true and correct to the of my knowledge belief and understanding. I understand that any false statement contained in is subject to the penalties prescribed by 18 Pa C.S.A. § 4904, relating to unworn ication to authorities.
Date:	Signature
	OT ATTACH ANY OTHER DOCUMENTS WITH THIS APPLICATION, SUCH AS TERS OF RECOMMENDATION OR TRAINING CERTIFICATES.

# Waiver and Release for Background Investigation

By this release, I hereby authorize any representative of all of my former employers, which have been fully disclosed and identified in my employment application, to divulge any information in its files pertaining to my employment records and history, and I further authorize the release of such information upon request to any representative of the Borough of Freemansburg. I also authorize all former employers identified in my employment application to permit a review and full disclosure of all records, or any part thereof, concerning myself and my employment with those former employers, by and to any duly authorized agent of The Borough of Freemansburg, whether said records are of public, private, or confidential nature.

The intent of this authorization is to permit all former employers identified in my employment application to provide, and for the Borough of Freemansburg to obtain, full and free access to the background and history of my personal life and my employment history and performance, for the specific purpose of permitting the Borough of Freemansburg to conduct a thorough background investigation regarding me that will provide pertinent data for consideration by the Borough of Freemansburg in determining my suitability for employment as a police officer. It is my specific intent to provide the Borough of Freemansburg with access to personnel information, however personal or confidential it may appear to be.

I authorize all former employers, which have been fully disclosed and identified in my employment application, to release any and all public and private information that it may have concerning me, my work record, my background and reputation, my military service records, educational records, my criminal history record, including my arrest record(s) and records compiled during or as the result of a criminal investigation(s) of me, efficiency ratings, complaints or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had, an interest, attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed.

I hereby release all former employers identified in my employment application, and, if applicable, their elected and appointed officials, employees and agents and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release all former employers identified in my employment application, and, if applicable, its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance

with this authorization and request to release information, or any attempt to comply with it. I direct all former employers identified in my employment application to release such information upon request of the duly accredited representative of the Borough of Freemansburg, regardless of any agreement, written or oral, I may have made with the former employer to the contrary.

In addition, I also give the Borough of Freemansburg the right to thoroughly investigate my background, previous employment, education and references in order to ascertain my suitability for service as a Borough of Freemansburg employee. I release and hold harmless the Borough of Freemansburg, its elected and appointed officials, agents and employees from and against any and all liability which might result from conducting such an investigation, including any damages of whatever kind which may at any time result to me, my heirs, family or associates because of such investigation.

I recognize and understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and disclosure of records, and I waive those rights with the understanding that information furnished by any former employer will be used by the Borough of Freemansburg in conjunction with employment procedures.

I understand that if a former employer refused to cooperate with this investigation by failing to provide full disclosure of any and all relevant information about me, then the Borough of Freemansburg may disqualify me from further consideration for employment as a police officer.

A photocopy or facsimile of this release form will be valid as an original thereof, even though the said photocopy or facsimile does not contain an original writing of my signature. This waiver is valid for a period of one year from the date of my signature. Should there be any questions as to the validity of this release, you may contact me at the address listed on my employment application.

I agree to indemnify and hold harmless the person to whom this request is presented, as well as his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

Date:		
	Signature	

# Essential Duties of a Police Officer

25.1.1	Running for several hundre	ed yards;	
25.1.2	Climbing over obstacles;		
25.1.3	Crawling;		
25.1.4	Pushing motor vehicles;		
25.1.5	Pulling or carrying accident	t, fire or crime victims;	
25.1.6	Using physical force to app	rehend and subdue arrestees	;
25.1.7	Withstanding prolonged ex weather conditions;	posure, as long as twelve (12	e) hours, to extreme
25.1.8	Withstanding prolonged per	riods of standing and sitting	
25.1.9		osure to stress-producing situed or killed by accidents, crin	
25.1.10	Dealing with domestic disp	utes;	
25.1.11		ysical abuse of the officer, in mily members, or fellow pol	0
25.1.12	Communicate effectively w	ith individuals suffering from	n trauma;
25.1.13	Operate a motor vehicle for	long periods of time;	
25.1.14	Use a firearm effectively; as	nd	
25.1.15	Fill out written reports in a	clear and concise manner.	
	reviewed the above list of es and believe that:	sential job functions for a Bo	orough of Freemansburg
	ully perform all duties with o ot fully perform all duties eve		modations
N	lame	Signature	Date