



Borough Of
Wesleyville



Wesleyville Borough Police Officer Application

This application will be evaluated by those persons responsible for hiring at the Wesleyville Police Department. It will be reviewed as part of an extensive background investigation into your personal and employment history. Any false, misleading, or incomplete information or failure to follow the instructions listed below will be grounds to disqualify you for employment with the Wesleyville Police Department.

Applications **MUST** include the following attachments:

- A copy of a birth certificate for proof of age must be attached.
- Applicant must provide a copy of a current valid driver's license.
- Must provide a copy of DD-214 if discharged from the military armed forces

Requirements

- Applicant must be a citizen of the United States and be physically fit to perform the duties of the position.
- Applicant must have completed ACT 120 certification
- Applicant must be certified by MPOETC
- Applicant must not have been dismissed from public service for delinquency or misconduct in office.
- Applicant must not be guilty of any crime involving moral turpitude or of infamous or notoriously disgraceful conduct.
- Applicant must not be affiliated with any groups whose politics or activists are subversive to the form of government set forth in the Constitution and laws of the United States and the Commonwealth of Pennsylvania.

DIRECTIONS

1. Use black or blue ink to complete this application. Print legibly, complete the form in your own writing or printing do not type.
2. Read each question carefully, answer each question completely and accurately. Do not leave boxes blank.
3. If a question does not apply to you, write N/A in the box.
4. For additional employment history and job details please include a resume when needed.
5. Before returning this application ensure you sign and fully understand page 4 and 5.
6. Application must be completed in its entirety prior to deadline, including any supporting information.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____ Apartment/Unit # _____
Street Address
City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary:\$ _____

Position Applied for: _____

Did you successfully complete Act 120? YES NO

Have you passed the MPOETC state certification exam? YES NO

If no, are you authorized to work in the U.S.? YES NO

Are you a citizen of the United States?

Have you ever worked for this Borough? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____

Address: _____
Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____
Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Authorization, Release to Obtain Information, Disclaimer and Signature

I, _____ authorize the Borough of Wesleyville to conduct a background investigation in connection with my application for employment.

I understand I will not receive, and am not entitled to, a copy of the report of the investigation or to know its contents. I further understand the contents of this report are privileged. I agree to give any further information which may be required in reference to my past record. I fully understand all information gained for such investigation is confidential and will be released only to authorized persons in the employment process.

The investigation may include information from education institutions, previous employers, military units and organizations, all U.S. government agencies to include the Office of Personal Management (OPM), Department of Motor Vehicle records in any state, any physician or medical records, insurance companies, police or court records, tax and property records, references, developed references, and any other appropriate sources. I authorize the release of any information the Borough of Wesleyville may request from the above sources. I also authorize my former or current employers to give any information regarding my employment; together with any information they may have regarding me, whether or not it is in their records.

I also understand if I am currently employed as a law enforcement or correctional officer, or by a law enforcement or criminal justice related agency of any type, the results of this background check investigation may be made available to my current employer, whether or not I am offered employment by the Borough of Wesleyville.

I hereby release the Borough of Wesleyville, Pennsylvania, or any of its agents or representatives, and any person or entity so furnishing such information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information for the investigation made by the Borough of Wesleyville.

Date: _____

Signature: _____

Please Read Before Signing

I certify I have given true, accurate and complete information on this form to the best of my knowledge. In the event confirmation is needed in connection with my work, I authorize educational institutions, previous employers, military units, associations, registration and licensing boards, and others to furnish the Borough of Wesleyville whatever detail is available concerning my qualifications. I authorize the Borough of Wesleyville to investigate all statements made in this application and understand false information or documentation, or failure to disclose relevant information may be grounds for rejection of my application or disciplinary action up to and including dismissal should I become an employee of the Borough of Wesleyville. I further understand I will not receive and am not entitled to a copy of any report of background investigation or to know its contents.

I also understand employment is conditional until results of health evaluations are known as related to essential job functions and until information given by me on my application has been verified. I certify and acknowledge I meet minimum age requirements of applicable laws by the Borough of Wesleyville policy. If required, I will complete a Surety Bond Application. I will accept travel assignments when job duties so require. I will work overtime and other than standard shift hours when job duties so require. As part of the Drug Free Workplace Act, I agree to submit to drug and alcohol screening tests when required upon a conditional offer of employment and during employment I will participate in the Direct Payroll Deposit program as a conditional of employment.

I further authorize the Borough of Wesleyville and its representatives to perform any criminal records checks which may be required as part of this application process. I understand and acknowledge that, unless otherwise defined by applicable law, my employment relationship with the Borough of Wesleyville is of an "at will" nature, which means the employee may resign at any time and the employer may discharge the employee at any time. It is further understood this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of the Borough of Wesleyville specifically acknowledges such change in writing. I hereby release the Borough of Wesleyville and its directors, elected officials, employees and assigns from any and all liability or damage which may result from furnishing the requested information.

The Borough of Wesleyville is an Equal Opportunity Employer. Federal law prohibits discrimination in employment practices because of race, color, religion, age, sex, or national origin.

Date: _____

Signature: _____

