

Kingman, KS 67068 620-532-3111

Police Officer Employment Application

Contact Information

Full Name:

Email:

Mailing Address:

Telephone:

Other names you have used:

Background Information

Date of Birth:		Birthplace:			
Height:	Weight:	Hair Color:		Eye Color:	
Gender:		Social Security Number	r:		
Driver's License	Number:	Sta	ate:		Expiration:

Prior Residences in the last 15 years (if you need additional space use a s	separate piece of
paper)	

Dates:

Address:

Dates: Address:

Dates: Address:

Eligibility

Can you legally work in the United States; and, if hired, show proof of eligibility? Yes No

Are you 21 years of age or older? Yes No

Military Service

Have you ever been or are you currently a member of the United States Armed Forces? Yes			
Branch of Service:	Unit:		
Entry Date:	Separation Date:		
Highest Rank Attained:	Type of Discharge:		
Duties:			
Specialized Training:			
Commanding Officer:			
Mailing Address:			

Education (if you need additional space use a separate piece of paper)

School Name:			
School Address:	School Type:		
Dates:	Graduated: Yes N	0	
Degree Emphasis:	Hours Completed:		
School Name:	School Type:		
School Address:			
Dates:	Graduated: Yes	No	
Degree Emphasis:	Hours Completed:		
School Name:	School Type:		
School Address:			
Dates:	Graduated: Yes	No	
Degree Emphasis:	Hours Completed:		

Employment

Employer:		Phone:		
Employer Address:				
Position Title:		Supervisor Name:		
Start Date:	End Date:	Last Salary (Hourly Wage):		
Duties:				
Did you supervise other empl	Number of Employees:			
Reason for Leaving:	Reason for Leaving:			
May we contact your employ	er?			
Employer:		Phone:		
Employer Address:				
Position Title:		Supervisor Name:		
Start Date:	End Date:	Last Salary (Hourly Wage):		
Duties:				
Did you supervise other empl	oyees?	Number of Employees:		
Reason for Leaving:				
May we contact your employer?				
Employer:		Phone:		
Employer Address:				
Position Title:		Supervisor Name:		
Start Date:	End Date:	Last Salary (Hourly Wage):		
Duties:				
Did you supervise other employees?		Number of Employees:		
Reason for Leaving:				
May we contact your employer?				

Other Training/Certifications/Skills

List any language you speak other than English (including ASL):

List any medical training:

List any specialized law enforcement training:

Other specialized training not previously listed:

Licenses, certifications, and registrations not previously listed:

Other skills, abilities, or qualifications relevant to this job, including equipment or software you can operate:

Additional Background Information:

Why are you interested in a career in public safety?

If local media conducted a "background" check in order to discredit your candidacy for this position, what would they find? Please explain any potentially negative things in your background:

Arrests and Convictions

Have you ever been arrested? Yes No

Have you ever been convicted, placed on diversion, or have any expunged convictions for any crime? If yes, provide the date, location, and disposition. A conviction will not automatically bar you from employment. Yes No

Have you ever been convicted of or placed on diversion for any crime of domestic violence? If yes, provide the date, location, and disposition. A conviction will not automatically bar you from employment. Yes No

Have you ever been involved in a civil litigation? If yes, provide the date, location, and disposition. A conviction will not automatically bar you from employment. Yes No

Traffic Citations (if you need additional space use a separate piece of paper	Traffic Citations (if	you need additional space use a	a separate piece of paper
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Date: City/State/Agency:

Violation:

Disposition:

Date: City/State/Agency:

Violation:

Disposition:

Date: City/State/Agency:

Violation:

Disposition:

References (if you need additional s	pace use a separate piece of paper)	
Name:	Phone:	
Address:		
Occupation:		
Years Known:		
Name:	Phone:	
Address:		
Occupation:		
Years Known:		
Name:	Phone:	
Address:		
Occupation:		
Years Known:		