Town of **Greybull Police Officer Application Form**



Full Name (Print):			
,	First	Middle	Last
Any Other Names Use	d (Past or Present):		
Mailing Address:			
Telephone Numbers:			Work
Email Address			
Are you a Certified Pea	ace Officer?		If yes, what state?
May we contact your c	urrent employer?		
Do you hold a valid dr	iver's license?	Issuing State	License class (A,B,C)
			If yes, please provide the
			nemberships, awards, etc. you feel may be important be hired for this position.

RELEASE AUTHORIZATION

Please read the following information carefully before signing.

I certify that all information provided in this application is true and complete. I understand misrepresentation or omission of facts called for during the application or selection process may disqualify me from further consideration and may be cause for dismissal.

I understand that the Town of Greybull may conduct a background investigation which may include information as to my character, reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of any consumer reporting agency which may be utilized in the background investigation so I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand that I may be required to successfully pass drug and alcohol screening examinations. I hereby consent to a pre- and/or post-employment drug and alcohol screens as a condition of employment, if required.

I have read, understand, and by my signature consent to these statements. I authorize investigation of all information contained in this application.

Applicant's	Signature
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Date

- APPLICATION IS NOT VALID WITHOUT APPLICANT'S ORIGINAL SIGNATURE
- SUBMIT THE COMPLETED PERSONAL HISTORY STATEMENT WITH THE APPLICATION
 - APPLICANTS MUST ATTACH THE FOLLOWING DOCUMENTATION:
 - * Copy of Birth Certificate
 - * Copy of Current Valid Driver's License and 10 year driving record
 - * Copy of Social Security Card
 - * Copies of High School and Other Diplomas
 - * Copy of Military Records
 - * One Page Synopsis Outlining Your Reasons for Wanting to Be a Greybull Police Officer

Submit to: Chief of Police P.O. Box 271 Greybull, WY 82426 Phone 307-765-2308

Fax 307-765-2384

PERSONAL HISTORY STATEMENT APPLICANT INSTRUCTIONS

The information you provide in this personal history statement will be used in the investigation into your background to assist in determining your suitability for the position of the Greybull Police Department. Please complete the questionnaire completely and accurately. Completion of this form is mandatory for all applicants. The form must be received by the application deadline.

All information contained in the personal history statement is subject to verification. Deliberate inaccuracies or incomplete statements may bar or remove you from employment consideration. All time periods in your background must be accounted for.

It is to your advantage that you respond openly and completely. Any negative factors in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence and its degree of relevance to the job. For example, being fired from a job or having an arrest record is not in and of itself grounds for disqualification. During the background investigation, the investigator will inquire into the facts surrounding such an occurrence. A complete evaluation will then be made of the relevance of these facts to the requirements of the job.

Deliberate omissions or deliberate misstatements and misrepresentations of required information are grounds for rejection. Failure to properly complete this document may also result in rejection of your application.

If a question does not apply to you, write n/a (not applicable) in the space provided for the answer. Do not leave any space blank. If you need more space to respond to a question, please use additional pages and identify the additional information by including the question.

All applicants are required to submit the following information with their application form and personal history statement:

- * Copy of Birth Certificate
- * Copy of Current Valid Driver's License and 10 year Driving Record
- * Copy of Social Security Card
- * Copies of High School and Other Diplomas
- * Copy of Military Records
- * One Page Synopsis Outlining Your Reasons For Wanting to be a Greybull Police Officer

Thank you for your interest in the Greybull Police Department. Submit all application information

to: Chief of Police Town of Greybull P.O. Box 271 24 South 5th Street Greybull, Wyoming 82426

* POLICE DEPARTMENT <u>PERSONAL</u> <u>HISTORY STATEMENT</u>

Please complete this form in ink, in your own handwriting.

PERSONAL: The following information is requested of you for verification and contact purposes. Please print or type. If additional space is needed, please attach a separate page, indicating the section being addressed. Full Name____ Last First Middle Address ____ Number Street Citv State Zip Code Telephone Number(s) Hours to contact you____ Birth date _____ Place of birth: City ____ County ___ State_ Driver's License Number Issuing State_____ Expiration Date____ Height _____ Weight ____ Hair Color ____ Eye Color ____ Gender ____ Scars, tattoos or other identifying marks__ You must be a citizen of the United States or a permanent resident alien who is eligible for and has applied for citizenship. Can you provide such documentation? Yes _____ No ____ In accordance with the Federal Privacy Act of 1974, disclosure is Social Security Number voluntary. The SSN will be used for identification purposes to ensure that proper records are obtained. Current hobbies and activities: **RELATIVES, REFERENCES, ACQUAINTANCES:** During the course of the background investigation, persons who know you will be asked to comment upon your suitability for the position of Peace Officer. Inquiries will be confined to job-related matters. Please provide the following information. If a category is not applicable, please write N/A. If Living, Name of Your: Current Address Telephone Number Father: Mother: Father-in-Law: Mother-in-Law:

Spouse:				
Former Spouse:				
Former Spouse:				
Brother/Sister:				
Step-Mother:				
Step-Father:				
Step-Siblings:				
Please list other relatives with	whom you have a cl	ose personal relationship	o (including children)	
Name	Relationship	Current Address		Telephone Number
Please list all individuals with	whom you have resi	ded during the last ten y	ears (do not include inform	ation prior to your 15th
birthday). Exclude family me Name	Current A	ddress		Telephone Number

Name	Current Address			Telephone Number
DI 1: (2: 1: 1 1		1 1	C	
	who are social acquaintances (i. ifications. Exclude relatives and			ne past year) and wno na
Name	Current Address	remer empreyees.		Telephone Number
				1
EDUCATION:				
The Peace Officers Star	ndards and Training Commission	requires a Peace Office	er to nossess a high school	dinloma or its equivalent
The Teace Officers Star	idards and Training Commission	requires a reace office	a to possess a mgn school	aipioma or its equivalent
I possess a high	h school diploma.			
I pagged the C	E.D. (General Education Develo	nmont) tost		
I passed tile G.	E.D. (General Education Develo	pment) test.		
I possess other	equivalent. Explain			
I do not ouman	the base a bish sabaal dinlama a		l	£.11
	tly have a high school diploma o How?			
<u> </u>				
	ols you have attended, beginning genvironment may be contacted a			ation, persons who have
School Name	Location (City, State)	Dates Attended	School Reference	Degree/Diploma
Selloof (value	Ecountry (City, State)	Butes Attended	School Reference	Degree, Dipionia
Were you ever expelled	from any school? Yes	No		

Have you ever been placed o	on academic probation? Yes_	No	-			
f yes, please explain (school, dates and circumstances).						
Please list clubs, sports, lead	ership positions, community ac	tivities, awards, comr	mendations or items of special recognition.			
background investigation. Please list all of your residen current residence first.	nces during the last 10 years, no	t including informatio	e often helpful in providing useful information for the on prior to your 15th birthday. Begin with the most			
Address of Residence	City, State, Zip Code	Dates Resided	If rental, name/address of rent collector			
	irrent employment, please list a		s-time, temporary and voluntary), you have held since oluntary). If you have had intervening periods of			

military service or unemployment, please list those periods in sequence. Attach additional paper if necessary.

Employment Dates	Employer's Name, Address & Telephone Number	Position Held/ Supervisor's Name/Title	Rate of Pay	Reason for Leaving

Employment Dates	Employer's Name, Address & Telephone Number	Position Held/ Supervisor's Name/Title	Rate of Pay	Reason for Leaving
If yes, please ex Please include a	uit a job rather than get fired? Yes_plain in detail the circumstances surroundir llegations made against you, dates, names, have been fired or requested to leave on mry):	ng your termination/request to lea address and phone number of yo	ur employer, su	pervisor's name and all of
May we contact If <u>no</u> , when show	your present employer during the course of ld such contact be made?	f a background investigation? Y	es	No
If you have had	no prior employment, please explain.			
MILITARY SE	CRVICE:			
Have you ever se	erved in the armed forces, National Guard of	or military reserves? Yes	No	
Branch of Service	ovide the following information: tee Service # ge	Service Da	itesto _	
	Schools/Training (type and date)			
	nt and past draft classifications in chronolog		ost current class	sification.
Are you currently	y a member of a U.S. Reserve or National	or State Guard Organization? Y	es	No

Branch of Service Grade & Service #	Active Organization		Standbyocation	
	ct of any judicial or non-judicial disc No	riplinary action v	while in the military, Na	ational Guard or military
If yes, please give details, inc	luding branch of service, date, location	on and circumsta	nces.	
Past commanding officers or	military acquaintances are potential s	sources of releva	ent information pertaini	ng to your background.
	who know you well enough to provide			
Name	Address		Telephone Number	Years Acquainted
accurate.	valuate the behavior exhibited by you out your charge accounts, contracts o		-	Please be complete and
Name of Firm	Address		elephone Number	Account Number
	clared bankruptcy? Yesluding date, location and circumstance			
	urned over to a collection agency? luding date, firms involved and circu	Yes	No	
Have you ever had items you If yes, please give details, inc	purchased repossessed? Yes luding date, firms involved and circu	s Numstances	lo	
Have your wages ever been g If yes, please give details, inc	arnished? luding date, location and circumstand	Yes	No	

	delinquent on income or other tax payme tails, including date, type of taxes and ci			
Has credit ever been If yes, please give de	denied to you or canceled on you? tails.	Yes No		
LEGAL:	. 1	1.11. (67. 14.41) 1	4 6 11 .	
Approximate Date	Law Enforcement Agency	Circumstances	ve the following	g information.
List all crimes (detec	ted and undetected) that you have been i	nvolved in:		
Have you ever taken	any property/money from an employer o	or place of business?	Yes	No
Have you ever been o	convicted of a crime other than misdeme	anor traffic violations?	Yes	No
Have you ever been p	placed on court probation as an adult?		Yes	No
Have you ever been r	reported to a law enforcement agency as	a missing person or a runaway?	Yes	No
Are you now, or have	e you ever been, involved as a plaintiff o	r defendant in any civil court action	n? Yes	No
	to any of the above five questions, please rrences. If more room is needed please a		luding the fina	al outcome (list juvenile
	E OPERATION: vehicle is an integral part of the position eck. To expedite this procedure, please s		on of your driv	ing history will be made
Driver's License Nun	nber	State	_ Expiration	Date
Do you have a valid	river's license was granteddriver's license in more than one state? es	Yes No		
	s where you have been licensed to opera	te a motor vehicle and the name un		
State		Name		

			se by any state? tate and circumstar	Yes No			
Wyoming law rec	quires operate	ors and owne		e without having the property to be covered by automorele(s)			es No Therefore, please list
Company	ty insurance	Address	ii your motor veme	<i>(3)</i> .	Pol	icy Numbe	er
Please provide the	e name, addr	ess and telepl	hone number of yo	ur local insuring agent			
List all subisles a							
List all vehicles o	Make	and your sp	Model	License Plate #	State of I	ssue	Month/Year
							1
List all traffic cita Nature of Violat		Issuing		nce you began driving. Approximate Date		Disposit	ion (Fined, Not Guilty,
						Guilty)	
Harra rear arran ha	d 1:		anahatian fan maasis		of two ffice and also	otiona? V	as No
have you ever na	d your neens	e placed on p	orobation for receiv	ving an excessive number of	of traffic viola	itions? Y	esNo
Have you ever be	en involved i	in an acciden	t and then left the s	scene without identifying y	ourself?	Ye	sNo
Have you ever be	en involved i	in an acciden	t that you were req	uired by law to report and	didn't?	Ye	sNo
IC 1 1	:1 : 1 :		-4		1241		
If you have been	invoived in a	in accident th	at you were requir	ed by law to report and die	an t, piease p	rovide the	circumstances.
D:1 1 1:1				V N.			
Did you submit it How many motor			ou been involved in	Yes No n as a driver?			
J		,					
Have you ever be ingested any cont			t when you were d	riving after you had been o	0 ,	type of alco	oholic beverage or
Have you ever op	erated a mot	or vehicle wh	nile under the influ	ence of an intoxicating be Yes No	-	trolled sub	ostance?
Have you aver he	d a hearing f	or probation	suspension?	Yes No			

Have you ever had your driver's license so If yes, complete the table below.	uspended? Yes	No	_	
Date of Suspension	Type of Suspension		Date Reinstated	
Have you ever been placed as an assigned	risk for vehicle insurance	e?	Yes	No
Have you ever had your insurance revoked	d due to the number of tra	affic citations you rece	ived? Yes	No
Have you ever knowingly driven a motor	vehicle after your driver's	s license was suspende	d or revoked?	Yes No
Has your license ever been suspended, rev	oked, or placed on neglig	ent operator's probation	on? Yes	No
If you have been involved as a driver in a	motor vehicle accident w	ithin the last 7 years, p	rovide the following	ing information.
	Police Agency	Was a Police Investi Conducted?		Was it an Injury or Non-Injury Accident?
If there is anything you would like to ment	tion about your driving re	cord, please use this sp	pace	
CENEDAL INFORMATION.				
GENERAL INFORMATION:				
Have you ever made an application for en Yes No	nployment with this or any	y other law enforcement	nt or law enforcem	nent related agency?
Name of Agency	Date of Application	Status of Applic	ation: Pending, Ro	ejected, Not Pursued, Etc.
Have you ever been de-certified as a Peac	e Officer or Detention Of	ficer: Yes	No_	
If yes, please explain		100		_

	Law Enforcement Agency	Г	urpose			
	DEGL AD ATLANCE					
	<u>DECLARATIONS</u> ers all description terms used to	describe	the ingestion of	any of the listed typ	pes into a person's system	. Example:
xperimental,	tried, etc. Have you illegally so	old, furni	shed, given awa	y, bought, possessed	d, injected or used the foll	owing:
Drug		Yes	No	Activity*	Approx. Last Date	Form Used
Marijuana						
Hashish						
"Speed"						
Cocaine						
LSD						
STP						
PCP						
Peyote						
Mushrooms						
Quaaludes						
Tranquilizer						
Barbiturates						
Heroin						
Crank						
Any Designe	er Drug					
Please indic	eate in this column whether you	sold, furr	nished, bought, j	possessed, and/or us	ed the substance indicated	d
Vithin the las	st three years, have you inhaled	(naint. gl	ue. etc.)?	Yes	No Date	
	r involvement, including the sub-					
	:111	Vas	No	If ha	a flans?	
Then was the	e last time?	1 68	1NO	11 yes, no	ow otten?	

How have you prepared yourself to be an employee of the Town of Greybu	111?
Why is becoming an employee with the Greybull Police Department impor	tant to you?
If it should become necessary in the performance of your duties, could you someone else? Yes No	use deadly force in defense of your life or the life of
Please explain your position, regardless of your positive or negative answer	·
Are there any incidents or circumstances in your life not included herein w which you may be called upon to perform? Yes No If yes, please explain.	hich may reflect upon your suitability to perform the duties
*****************	********
I hereby certify that all statements made in this Personal History Statement misstatements of material facts will subject me to disqualification or dismissional discussion.	1 ,
Applicant's Signature in Full	Date

You must attach a one-page synopsis outlining my reasons for wanting to be a Greybull Police Officer as well as all other required documents and attachments.