

Livingston Police Department
P.O. Box 430
Livingston, LA 70754

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. Please print or type. Failure to answer all the questions in this application and failure to attach all required documentation to this application may cause your application to be rejected.

Positions Applied For	Date of Application
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How did you learn about us?

- Advertisement
 Friend
 Inquiry
 Employment Agency
 Relative
 Other _____

Last Name	First Name	Middle Name
Address Number	Street	City
		State
		Zip Code
Social Security Number	Date of Birth	
Home Telephone Number (With area code)	Office Telephone Number (With area code)	
Cell Phone Number (With area code)	Email Address	
Are you a citizen of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>	Driver's License No: _____ Expiration Date: _____	

Best time to contact you at home is: _____:____ AM/PM

If you are under 21 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No
 If Yes, give date _____

Have you ever been employed with us before? Yes No
 If Yes, give date _____

Do any of your friends or relatives, other than spouse, work here? Yes No
If Yes, state name, relationship and location _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Date available for work ___/___/___ What is your desired salary range? _____

Are you applying for: Full Time
 Part Time

Are you currently on "lay-off" status and subject to recall? Yes No

Can you be called out if needed? Yes No

Do you have any physical conditions that would limit you from participating in any training? Yes No

RACE/SEX INFORMATION					
The Federal government requires that we request the following race and sex information for statistical reporting purposes. Completion of this service is voluntary, and your application will not be rejected if you choose not to provide this information.					
<input type="checkbox"/> Male	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Am. Indian	<input type="checkbox"/> Asian
<input type="checkbox"/> Female	<input type="checkbox"/> Other _____				

AUTHORITY FOR RELEASE OF INFORMATION	
I give consent for Livingston Police Department to check my driving record and conduct a background check.	
Date	Signature of Applicant

BACKGROUND INFORMATION

1. Within the past 5 years, have you been terminated, or resigned in lieu of termination, from any position for reasons other than a reduction in force?
 Yes No

2. Have you *ever* been convicted of a felony?
 Yes No

3. Have you *ever* been convicted of a misdemeanor during the last 3 years?
 Yes No

Note: If you answered "Yes" to either of the above questions, please provide an explanation block below. A conviction will not necessarily disqualify you from the job for which you are applying. A conviction will be judged on its own merits with respect to time, circumstances, and seriousness.

TRAINING/EDUCATION

<p>A. High School <input type="checkbox"/> Diploma or Equivalency Certificate Date Received: _____</p>	Name and address of High School issuing diploma or of state department or education issuing GED or equivalency certificate:				
<p>B. College</p>	Years Attended	Credit Hours Earned	Degree(s) Received	Date of Degree	Major
<p>C. Other Formal Training (Business, Trade, Military, POST, Etc., Classes or Seminars) Title of Instruction or Class (Attach additional pages if necessary)</p>	Location	Dates Attended	Did you graduate?	No. of hours per week	
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Ending Hourly Rate/Salary		
Starting/Present Job Title			
Supervisor			
Reason for Leaving		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Ending Hourly Rate/Salary		
Starting/Present Job Title			
Supervisor			
Reason for Leaving		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Ending Hourly Rate/Salary		
Starting/Present Job Title			
Supervisor			
Reason for Leaving		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Comments: Include explanation of any gaps in employment.

REFERENCES/PROFESSIONAL REFERENCES Do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Date	Signature of Applicant
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With your completed application, please include photocopies of your:

- Driver's License
- High School Diploma or equivalent
- Any and all certifications/certificates relevant to Law Enforcement

**Livingston Police Department
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AUTHORIZATION RELEASE OF INFORMATION

Last Name	First Name	Middle Name	Sex	Race	D.O.B
Place of Birth	City	Parish/County	State		

This release, when presented by a duly authorized representative of the Town of Livingston, constitutes my consent and authority to examine and obtain copies and abstracts of records and to receive statements and information regarding my background.

Specifically, I authorize the release of the following data or records to the Town of Livingston: Employment; Educational: Medical: Psychological; Selective Service; Police and Criminal; Motor Vehicle and Driving; Financial and Credit; Polygraph Examinations and any copy of the separation document and medical records of the National Personnel Records and Military Personnel Records Center.

This authorization is given in connection with a background investigation being conducted relative to my application for, or continued employment with, the Town of Albany. The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing an investigation, which may provide pertinent data for the Town of Livingston, to consider my suitability for employment.

I understand that any information obtained by a personal history background, investigation, which is developed directly or indirectly, in whole or in part upon this authorization, will be considered in determining my suitability for employment by the Town of Livingston. I understand that all materials pertaining to this background investigation become the property of the Town of Livingston, Office of Public Safety, and the Office of Employment Standards and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request and his/her 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. I further understand that in the event of my application is disapproved; the confidential information or source(s) of information will not be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

State of _____

County/City of _____

Subscribed and sworn before me this _____ day of _____ 20__

My commission expires _____ (Signature of Notary) _____

Signature _____
Street Address: _____
City, State, Zip: _____

"THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER"

Livingston Police Department
P.O. Box 430
Livingston, La 70754

Applicant's Name: _____
(Please Print)

APPLICANT INFORMATION RELEASE

I hereby authorize any person, past or present employer, educational institution, or company I have listed as a reference on my employment application to disclose in good faith any information Town of Albany, any present or former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to the employment process.

Date: _____

Signed: _____

"THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER"

OFFICE USE ONLY

Lieutenant Phone Interview

Date: _____

Time: _____

Notes:

Recommended for next phase of interview process? Yes No

Board Interview

Date: _____

Time: _____

Notes:

Recommended for next phase of interview process? Yes No

Final Interview

Date: _____

Time: _____

Notes:

Approved for hire: Reserve Full Time Yes No