



Velda City Police Department
 2803 Maywood Ave.
 Saint Louis County, MO 63121
 314-382-7004



BACKGROUND INVESTIGATION QUESTIONNAIRE

www.veldacity.org

Application#

Please ensure all information is complete and accurate before submitting. Incomplete information or failure to follow instructions will delay the selection process and may eliminate you from consideration.

The Velda City Police Department is dedicated to upholding public trust. The Velda City Police Department seeks only individuals who possess the highest levels of personal integrity and work ethic.

This background investigative process is unlike any other application process. This process will delve into your personal history to discover information about your overall personal and employment related characteristics and your educational accomplishments.

Thorough, honest, accurate, and timely completion of this form will expedite the background investigation and hiring process. Intentional dishonesty, withholding of information, and attempts to mislead or minimize will result in your immediate removal from further employment consideration. If asked for dates, be SPECIFIC. Do not approximate or guess. Please read and understand the "MINIMUM REQUIREMENTS" & "ESSENTIAL FUNCTIONS" for the position applying for. The Velda City Police Department is a Drug Free Environment agency. Any violation of this requirement can lead to termination. The Velda City Police Department is an "AT WILL" employment agency.

APPLICANT DECLARATION AND UNDERSTANDING:

Under penalties of perjury, I hereby state and declare that all statements in this packet are true. I make this declaration fully aware that Velda City Police may verify the truth of these statements through a polygraph and/or conducting a thorough background investigation. Further, if it is proven now or later that I have made a false/misleading statement (s); I understand that this would be grounds for my disqualification as a candidate or termination of my employment. I understand that if hired, I am on probation for 1 year and may be dismissed for any reason within that 1 year. I must pass probation status as outlined in General Orders to remain employed.

By signing this document, I acknowledge that:

1. I will not be advised of the reason (s) for non-selection.
2. I will not receive a copy of the investigative report or its findings.
3. All information disclosed in this report is true and accurate.
4. Any documents provided will not be returned. Keep originals, unless otherwise requested.
5. I am able to perform the ESSENTIAL FUNCTIONS for the position I am applying for.
6. I have read, understand, waive any legal rights to the above and meet all the qualifications listed in this application.

PRINT CLEARLY IN BLACK INK.						
Name (Last, First, Middle, Jr. or Sr.)				Social Security Number		
Current Address (Number, Street,)				City,	State	Zip Code
I have lived at the above address From (DATE)				Date To: (place CURRENT if still at above address)		
Alias/AKA's If yes, also list the dates used				List ANY name used before, even if legally changed.		
Home Telephone		Message Telephone		Cell Phone #		Email Address
() -		() -		() -		
Sex:	Current Age	Height	Weight	Hair	Eyes	Date of Birth
<input type="checkbox"/> Male <input type="checkbox"/> Female						
Place of Birth: City		State	Country	Driver's License Number		
				State	Number	
Signature of Applicant					Date Signed	

ALL FIELDS MUST BE COMPLETED PRIOR TO SUBMITTING TO THE BACKGROUND INVESTIGATOR. ONLY ORIGINAL BACKGROUND QUESTIONNAIRES WILL BE ACCEPTED. COPIES OR FAXED COPIES OF BACKGROUND QUESTIONNAIRE WILL NOT BE ACCEPTED.

POSITION APPLIED FOR: <input type="checkbox"/> Police Officer <input type="checkbox"/> Volunteer <input type="checkbox"/> Reserve Officer <input type="checkbox"/> Intern <input type="checkbox"/> Court Bailiff
<input type="checkbox"/> Police Clerk <input type="checkbox"/> Cleaning Services <input type="checkbox"/> Corrections <input type="checkbox"/> Communications
INSTRUCTIONS

1. This document must be printed in black ink and must be legible. Typed is also acceptable, except signatures.
2. If you have any questions, please contact the Background Investigator at 314-382-7004.
3. All questions must be answered to include an explanation, if necessary. If a question does not apply, a "Does Not Apply" must be indicated. All addresses must be complete including zip codes.
4. Please attach copy of High School Diploma/transcripts, Driver's License, Military DD214 Member 4 page, Professional Certifications/certificates, and College Diplomas/transcripts, two recent facial photographs, copy of your social security card, copy of your birth certificate, as applicable. Such documents must be attached. If they are not, please explain in detail why said documents are not being furnished. Failure to provide the requested documents shall be grounds for non consideration.
5. When finished, please return to: Velda City Police Department, 2803 Maywood Ave., Saint Louis, MO 63121. Call 314-382-7004 if you have any questions. The original packet must be returned. Do not fax or email this application. Original signatures required by the applicant.

OUR MISSION

The mission of the Velda City Police Department is to work cooperatively with the public and within the framework of the constitution to enforce the laws, preserve the peace, reduce fear and provide a safe environment in our neighborhoods. The Velda City Police Department exists to serve the community by protecting life and property, by preventing crime, by enforcing laws, and by maintaining order for all people. Central to our mission are the values which guide our work and decisions. These help us to contribute to the high quality of life in Velda City and those we serve. The public trust and confidence given to those in the police service requires the adoption and compliance of the stated values which are the foundation upon which our policies, goals and operations are built. The recognition and statement of values by a police department is important. Values are the foundation of everything for which we stand and believe. The leadership of the Velda City Police Department has the expectation that members of the Department will adhere to the highest ethical standards either on or off duty.

The Board of Alderman resolved that subject to all applicable State and Federal statutory or judicial exemptions, all qualified applicants for employment and/or advancement, whether commissioned or civilian, shall be given equal opportunity for consideration, selection, appointment and retention, regardless of race, color, religion, sex, national origin, age, disability or political affiliation.

THE CITY OF VELDA CITY IS AN EQUAL OPPORTUNITY EMPLOYER

I have read the above and will comply with the Mission of the Velda City Police Department to the best of my ability and will not bring discredit to myself or the City of Velda City. I have read and meet the minimum requirements (page 16) for the position I am applying for and agree to abide by its rules at all times.

Signature	Date

CURRENT AND PREVIOUS ADDRESSES

(List all previous addresses for the past 20 years, start with your CURRENT address and work backward in time.)

Street	City	County	State	Zip Code	Date From	Date To

ORGANIZATIONAL MEMBERSHIP

Are you now, or have you ever been a member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, fascist, communist, or subversive, or which has adopted or shows a policy of advocating or approving the commission of acts of force or violence to deny other person their rights under the Constitution of the United States or the State of Missouri by any other unlawful or unconstitutional means? Yes No If yes, explain:

CRIMINAL HISTORY

Excluding tickets for traffic and parking violations, have you ever been detained, arrested, cited, convicted, charged or placed in pre-trial diversion, or been a suspect for any offense or violation of any statute, ordinance, law or regulation by any agency, court, civil or military authority, in this country or any other country? (Include any arrests or convictions as a juvenile and any that were expunged, set aside, dismissed, referred to pre-trial diversion or pardoned.) YES NO

If YES, fill out below and provide full explanation using the continuation sheet.

Date	Original Charge	Misdemeanor or Felony	Disposition or Amended to:	Probation Yes or no	Law Enforcement Agency	City	County	State

Are you currently on Probation or Parole? YES NO If YES, where and for what? List parole/probation start date and end date.

ALL ARRESTS MUST BE FULLY EXPLAINED ON PAGE 14 (simply filling out the above is not sufficient).

CRIMINAL HISTORY

1.	Do you now, or have you ever had an Order of Protection/Harassment/Restraining Order/Injunction filed against you? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Provide dates and a full explanation using the continuation sheet.
2.	Have you ever had a warrant issued for your arrest for failure to pay a citation or appear in court? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation using the continuation sheet.
3.	Do you have any outstanding warrants for your arrest right now? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation using the continuation sheet.
4.	Have you ever lied under oath or on a sworn document? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide full explanation using the continuation sheet.
5.	Have you ever stolen or taken without permission any property from businesses (i.e., shoplift or change price tags) or other people? Yes <input type="checkbox"/> , estimated total value _____. No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
6.	Have you ever bought or sold anything that you knew was stolen? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation using the continuation sheet.
7.	Are you now in possession (i.e., on person, at residence, in car, etc.) of any stolen property? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
8.	Have you ever intentionally sought out and viewed child pornography, including via the Internet? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
9.	Have you ever been involved in computer hacking, computer fraud or unauthorized use of credit cards online? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
10.	Have you ever been the subject of an investigation by any law enforcement agency for any reason? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
11.	Have you ever committed any criminal violation that has gone undetected? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
12.	Have you ever provided alcohol to minors? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation using the continuation sheet.
13.	Have you ever used a fake, altered, or another person's ID? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
14.	Have you ever corresponded with an inmate other than a family member(s) during his/her incarceration? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide a full explanation, including the date of each incident, using the continuation sheet.
Domestic Violence (questions 15-19) is defined as criminal acts that are committed between persons who have been involved in a relationship who live (or lived) together in the same household or persons who have a child in common, or are expecting a child, regardless of whether or not they have resided in the same household, or persons related to one another as a spouse, child, former spouse, grandparent, parent, brother, sister, grandchild.	
15.	Have you ever committed an act of domestic violence according to the definition provided? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide full explanation, including the date of each incident, using the continuation sheet.
16.	Has any law enforcement agency ever responded to your residence, temporary or permanent, for any reason relating to domestic violence in which you are involved as a suspect? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, provide full explanation, including the date of each incident, using the continuation sheet.
17.	Have you ever attempted an act of physical self harm? Yes <input type="checkbox"/> No <input type="checkbox"/>
18.	Have you ever attempted suicide? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, include dates, and location(s)
19.	Are you under any type of medication or doctor's care for mental depression? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, include medicine type, dose, etc.
20.	Have the police ever been called or responded to your home/work (or anywhere you were at) or called because of you? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, include disposition, reason for police response on Page 14.
21.	Have you ever been detained/questioned by police for any reason? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, full disclosure on Page 14.

DRIVING HISTORY/LICENSES

In the past twenty years, have you ever received a ticket for any traffic or parking violations including citations that were dismissed/reduced? YES NO If YES, fill out below and provide full explanation using the continuation sheet.

Date	Violation	Disposition (Final Outcome)	Law Enforcement Agency	City	County	State

List all drivers and/or commercial drivers (chauffeurs) licenses you currently hold: (License number & State)

Have you ever had your license revoked or suspended? Yes NO If YES, fill out below and provide full explanation below.

Date suspended/revoked: _____ From what State: _____

Do you currently have a vehicle? Yes NO If YES, Make _____ Model _____ Year _____ VIN: _____

License Plate # _____

Insurance carrier: _____

Policy # _____ Agent: _____ Phone # _____

Has your vehicle insurance ever been cancelled? YES _____ NO _____ if yes, explain: _____

INCARCERATED FAMILY MEMBERS OR FRIENDS

Are you acquainted with or related to any person currently or formerly committed to the Missouri Department of Corrections or any other prison, jail, or detention, including persons on probation or parole?

YES NO If YES, complete the sections below

Name (Last, First, Middle)	Age	Relationship	Location/State where incarcerated

ILLEGAL USE OF DRUGS/CONTROLLED SUBSTANCES

NOTE: Experimentation or use of marijuana or other drugs or controlled substances may not necessarily disqualify an applicant. Failure to disclose usage may disqualify you from consideration.

Have you ever **used**, tried, experimented, or in **any way** ingested into your body:

	No	Yes	Date First Used	Date Last Used	Approx # of Times Used	Avg. Frequency of Use
1. Marijuana	<input type="checkbox"/>	<input type="checkbox"/>				
2. Hashish/hash oil	<input type="checkbox"/>	<input type="checkbox"/>				
3. Cocaine	<input type="checkbox"/>	<input type="checkbox"/>				
4. Barbiturates or other "downers" including Flunitrazepam also known as Rohypnol or "roofies"	<input type="checkbox"/>	<input type="checkbox"/>				
5. Amphetamines (cross tops, whites, bennies, uppers)	<input type="checkbox"/>	<input type="checkbox"/>				
6. Methamphetamine (speed/crank)	<input type="checkbox"/>	<input type="checkbox"/>				
7. Crack-Ice-Glass	<input type="checkbox"/>	<input type="checkbox"/>				
8. LSD or other hallucinogen (including mushrooms)	<input type="checkbox"/>	<input type="checkbox"/>				
9. Ecstasy	<input type="checkbox"/>	<input type="checkbox"/>				
10. PCP (angel dust/sherm)	<input type="checkbox"/>	<input type="checkbox"/>				
11. Heroin	<input type="checkbox"/>	<input type="checkbox"/>				
12. Steroids	<input type="checkbox"/>	<input type="checkbox"/>				
13. Used a pharmaceutical drug prescribed for another person	<input type="checkbox"/>	<input type="checkbox"/>				
14. Other illegal drug, narcotic, or controlled substance. Name:	<input type="checkbox"/>	<input type="checkbox"/>				
15. Have you or anyone else ever injected an illegal drug into your body: Yes <input type="checkbox"/> NO <input type="checkbox"/>						
16. Have you ever injected an illegal drug into anyone else's body, put a pill in someone's drink, administered injections, GHB, etc? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
17. Have you ever sold any illegal drug? Yes <input type="checkbox"/> NO <input type="checkbox"/> If so, what drug?						
18. Have you ever purchased any drug, narcotic, or controlled substance other than by a doctor's prescription? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
19. Have you ever participated in the unlawful manufacture, cultivation, or production of any drug, narcotic, or controlled substance? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
20. Have you ever acted as a middleman, go-between, or "done a favor for a friend" by becoming involved in an illegal drug transaction? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
21. Have you ever acted as a courier by transporting any drug, narcotic, or controlled substance for other than legitimate purposes? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
22. Have you ever told anyone else where to purchase drugs? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
23. Have you ever "held" or temporarily stored any drug, narcotic, or controlled substance for yourself or anyone else? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
24. Are any illegal drugs presently in your home, car, or on your person? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
25. Have you ever used any homemade drug or a combination of homemade drugs? Yes <input type="checkbox"/> NO <input type="checkbox"/>						
26. Do you drink alcoholic beverages? Yes <input type="checkbox"/> NO <input type="checkbox"/> How often (be specific)?						
If you have answered "YES" to any of the items numbered 1-26, write an explanation on the continuation page.						

MILITARY STATUS

Have you ever served in any Armed Forces; Army, Navy, Air Force, Marines, Coast Guard, National Guard, or any reserve unit? YES NO If YES, provide information below and include a copy of your DD214 member 4 page.

Date From	Date To	Military Branch	Rank	Discharge Type

Are you registered with the Selective Service? YES NO If NO, explain

Where (City & State) Date Registered

If you have been discharged from any Military Service with less than an Honorable Discharge, explain below. (for example – general discharge under honorable conditions):

EDUCATION AND TRAINING

List high schools, colleges, universities, and graduate schools you have attended including GED if applicable including diploma received and college credits (Attach official school transcripts-sealed)

Date From	Date To	School Name	Address(including city, state, and zip)	Diploma (type) /Credits Received

List any special skills or abilities possessed (including foreign languages).

APPLICANTS REQUIRING PROFESSIONAL LICENSING (Police (POST), Psychologists, Counselors, Nurses, etc.)			
Do you now hold a license from any government /private agency?			Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, State issued		City	
License Number		License type	
Do you hold a license in another state?			Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, State issued		City	
License Number		License type	
Have you ever been investigated for a violation of your professional license?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you pending disciplinary action for a violation of your professional license?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been disciplined by a state regulatory agency for a violation of the rules governing your professional license?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Has your license expired, been revoked, refused, suspended, or denied in this state or any other state?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you BEHIND on your PROJECT 48 POST Education credits/hours (MISSOURI POLICE)?			Yes <input type="checkbox"/> No <input type="checkbox"/>
If YES: How many hours are you behind? _____ (attach all POST certificates)			
Have you ever been investigated by Child Protective Services or Family Services for allegations of abuse, neglect, or sexual abuse pertaining to your professional licensure?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been investigated for a civil rights violation under U.S.C. 1983?			Yes <input type="checkbox"/> No <input type="checkbox"/>
A YES ANSWER TO ANY QUESTION ON THIS QUESTIONNAIRE WILL NOT IN AND OF ITSELF PRECLUDE EMPLOYMENT; EACH CIRCUMSTANCE WILL BE HANDLED ON A CASE BY CASE BASIS.			
If you answered yes to any of the above questions, please explain below. If more space is needed, use the continuation sheet attached to the background questionnaire. All yes answers require a full detailed explanation of the circumstances involved with the issue.			
Please provide and attach a copy of all professional licensing you hold along with any reports, and report numbers associated with each issue disclosed above.			
Explanation:			

If you are applying for a police officer's position, you MUST have a valid Class A license issued by the Missouri Department of Public Safety. Said license must be in good standing and must not have had any adverse actions against said license within the last 10 years of issuance. Discloser of any action against your license is mandatory and must be explained on this application. Failure to disclose or providing false information and later discovered, shall be grounds for dismissal if hired.

EMPLOYMENT HISTORY

List places of employment and periods of unemployment beginning with the present or most recent employer and going backwards for the past 20 years. Include paid or verifiable non-paid experience including military service. If you have had more than one position with the same employer, please list everything separately. List everything in proper sequence. **OMIT NONE!** All time must be accounted for by providing an explanation e.g. unemployed, volunteer work, attended school, or worked part time. **All terminations, resigning for personal reasons and layoffs must be explained in full. All fields must be completed.** If you have received disciplinary action from an employer, you must disclose the reason for the action and the outcome. **Failure to disclose past disciplinary action may result in non-selection or termination if later discovered regardless of seriousness.** Make copies of page 10 if more space is needed.

1) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			
2) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			
3) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			
4) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			

5) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			
6) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			
7) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			
8) Name of Employer	Position Title	Work Telephone	
		() -	
Supervisor's Name	From	To	
Employer's Address	City	State	Zip
Reason for leaving			

Comments: (Use continuation sheet if necessary)

LAW ENFORCEMENT/JUVENILE JUSTICE/CORRECTIONAL EMPLOYMENT HISTORY

Have you ever applied for any position with another law enforcement/correctional agency within the last 10 years? YES NO . If YES, explain below:

Date	Agency Name	City	State	Status of Application

Have you ever had any involvement or association with another law enforcement agency or correctional facility either as a volunteer or paid employee? YES NO If YES, when and where.

Explanation(s):

Have you ever received any law enforcement, corrections, or detention officer training? Yes No
If yes, when, where, and type of training?

Number of years' experience as a sworn law enforcement and/or correctional officer?

Have you ever filed a lawsuit against your employer for any reason? Yes No If yes, fully explain on Page 14

Have you ever been the subject of a civil or criminal prosecution (including lawsuits) because of your actions as a law enforcement and/or correctional officer? Yes No If Yes, provide a full explanation using the continuation sheet.

GENERAL EMPLOYMENT HISTORY

1. Have you ever been rejected as a job applicant for any of the following?
 - a. Issues raised by a background investigation? Yes No Unknown If Yes, provide a full explanation using the continuation sheet.
 - b. Issues raised by a polygraph? Yes No Unknown If Yes, provide a full explanation using the continuation sheet.
2. Have you ever been accused of any serious employment violation, i.e., theft, harassment, misconduct? Yes No If Yes, provide a full explanation using the continuation sheet.
3. Have you ever been fired or terminated from any employment? Yes No If Yes, provide a full explanation using the continuation sheet.
4. Have you ever resigned from a job to avoid being fired or terminated? Yes No If Yes, provide a full explanation using the continuation sheet.
5. Have you ever been "written up" or disciplined by any of your employers for failure to comply with required rules or regulations? Yes No If Yes, provide a full explanation using the continuation sheet.
6. Why are you leaving your present job or changing career fields at this time? If you mention "Better opportunities" or "advancement", please explain why leaving would do that...
7. Have you lied or deliberately left off any information during this application process? Yes No If Yes, provide full explanation using the continuation sheet.
8. Have you ever been committed to a mental institution for any reason? Yes No
If Yes, provide full explanation using the continuation sheet.
9. Have you ever been questioned or under investigation for misconduct/violation of any law by any employer? Yes No
If Yes, provide full explanation using the continuation sheet.

FAMILY REFERENCES

List spouse, children, and all immediate family members including mother, father, sister, and brother. If current whereabouts are unknown, please indicate in the address box "Unknown" and provide the last date you had contact with that family member

An address and a phone number (work or home), if known, is required for each person listed

Name (Last, First, Middle)	Address (Street, City & State)	Zip Code	Telephone Number	Relationship	Age
			() -		
			() -		
			() -		
			() -		
			() -		
			() -		
			() -		

PERSONAL REFERENCES

List three references (not relatives or former employers) who are responsible adults, and who have known you well during the past five years. An address and a phone number (work or home) are required for each person listed.

COMPLETE ALL SPACES.

Name (Last, First, Middle)	Address (Street, City, State, Zip)	Home Telephone
		() -
Work Telephone	How Long Known	Occupation
() -		

Name (Last, First, Middle)	Address (Street, City, State, Zip)	Home Telephone
		() -
Work Telephone	How Long Known	Occupation
() -		

Name (Last, First, Middle)	Address (Street, City, State, Zip)	Home Telephone
		() -
Work Telephone	How Long Known	Occupation
() -		



VELDA CITY POLICE DEPARTMENT
AUTHORIZATION TO RELEASE INFORMATION AND WAIVER OF LIABILITY

I, _____ (Print full name), hereby certify that all statements made on or in connection with this application are true and complete to the best of my knowledge. I understand and agree that any misstatements or omissions of material facts will cause forfeiture on my part of all rights to initial employment or continued employment by the Velda City Police Department.

The intent of this authorization is to make available a full and complete disclosure of any and all information pertaining to my person, therefore, I do hereby authorize all present or past employers, all law enforcement agencies, all military agencies, the Veterans Administration, any and all military branches, all Federal, State or local government agencies, State and Federal tax bureaus, hospitals, private company, corporations, agencies, firms, credit bureaus, medical records, current/past employers of any nature, schools and universities to furnish any and all available information regarding my past or present performance, conduct, and/or behavior, medical, education, and/or licenses. I further authorize the release of any punitive or disciplinary action, or memorandum, to the person requesting it in order that the information is evaluated to assist in the determination of my suitability for police work.

I reiterate and emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal and business life for the specific purpose of conducting a pre-employment background investigation.

I authorize the Velda City Police Department to make any inquiry and gather any documents of my present and past employers and/or any organization that has any information regarding my character, integrity, reputation, education, license, and performance. I authorize the release of any and all of the aforementioned information regarding my person, employment, credit or any other aspect, whether personal or otherwise, that may or may not be in their written records.

I understand that all materials pertaining to this background investigation become the property of the Velda City Police Department and will not be made available or returned to me. I agree to indemnify and hold harmless the person, to whom this request is presented, along with the company or organization therein from any and all claims, damages, losses and expenses, including reasonable attorney fees arising out of complying with this request. I waive any and all rights and agree that any information obtained may never be released to me for any reason.

I understand that the sources of information and any information obtained are confidential and cannot be revealed to me. I hereby now and forever release and hold harmless anyone, including the City of Velda City and the Velda City Police Department; in possession of this waiver from damages of any kind and waive any all rights relative thereto.

A photo static or Xerox copy of this authorization will be considered as effective and valid as the original, even though the copy does not contain an original writing of my signature.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Subscribed and sworn before me this ____ day of _____, 20____.

My commission expires: _____, 20____.

Notary & Seal: _____

Signature of Applicant/Date of Birth

Address, City/State/Zip

MINIMUM REQUIREMENTS FOR POLICE OFFICER

Age Requirement: Must be at least 21 years of age, or applicant must reach their 21st birthday by the time of completion of the police academy training course.

Residency: Must live within 30 miles of Velda City and must be a citizen of the United States.

Education/Work Experience: You must have either:

1. An associate's degree or 64 semester credit hours from an accredited university or college. Both require a cumulative average letter grade of C or a cumulative GPA of 2.0 on a 4.0 scale or equivalent, **OR**
2. A high school diploma or GED with two years full-time prior police experience or two years of military service (with honorable discharge), **AND**
3. Must have a current and valid class "A" peace officers certification from the Missouri Department of Public Safety POST program with no serious actions taken against said license within the last 24 months **AND** current Project 48 hours continuing education hours.

Out-of-state police officers/military peace officers who possess or obtain State of Missouri POST class "A" certification will be evaluated in conjunction with their education/work experience. Visit the POST website at www.dps.mo.gov/POST/MAIN/POSTForms.htm for additional information.

VISION: Minimum department standard is 20/200 in each eye, uncorrected; correctable to 20/20 in each eye.

ARREST RECORD: Must be free from conviction of a Felony or a Class "A" Misdemeanor. Must not have been convicted of any Class "B" Misdemeanors within the last 10 years or any Class "C" Misdemeanor within the last 3 years (traffic offenses excluded, but at least 1 year from any convictions) **AND** no more than 3 "arrests" for any violations within the last 5 years. A FELONY or Class "A" Misdemeanors arrest must be at least 15 years old.

DRIVER'S LICENSE: Must possess a valid Missouri Driver's license by date of employment and have five (5) or less points charged against such driving record at time of application. Vehicle Registration must be valid in the state of residency and must have valid vehicle insurance (attach proof).

MILITARY: Must have an HONORABLE discharge, or discharge UNDER HONORABLE CONDITIONS if having served in the military (submit proper proof with application).

COMPETITIVE SELECTION PROCESS

Under the regulations of the police department, all appointments to the Velda City Police Department are made on the basis of a continuous open, competitive hiring process conducted under the supervision of the Chief of Police. Applications are welcomed and accepted at any time. Each applicant must successfully complete each stage of the selection process before becoming eligible to proceed to the next step. The selection steps, in their order, may take up to six months to complete:

1. **PRELIMINARY BACKGROUND REVIEW:** A review and detailed evaluation of the Background Investigation Questionnaire and supporting documents to determine if applicant meets the minimum requirements for the position.
2. **WRITTEN TEST:** Applicant must take and pass a basic reading and comprehension test.
3. **BACKGROUND INVESTIGATION:** A thorough background investigation will be conducted on all police applicants in the areas of past employment record and reputation, personal references, neighborhood reputation, police record check, credit history and military record (when applicable). The background investigation may be concluded with a polygraph examination in an attempt to verify information received from and about the applicant.
4. **STAFF INTERVIEW:** A further evaluation to determine the applicants overall fitness for the position, including appearance, self-expression, mental alertness and suitability for police duties. Applicants to be further considered shall be sent to the final review board.
5. **FINAL REVIEW BOARD:** This is the final determination toward an offer of conditional appointment. The applicant will meet with the Board of Alderman for final consideration. If appointment is offered, applicant must undergo a drug test at our expense for final determination. If an applicant is denied appointment for any reason, applicant must wait at least 6 months to reapply.

6. **PROBATIONARY PERIOD:** Any new appointee will be placed on a 12-month probationary period and may be released from employment for any reason within such period.
7. **HEIGHT & WEIGHT:** Weight must be in proportion to height according to Department standards.

SALARY

Salary is based on current city budget and officers experience. Full time officers receive paid health, dental, and life insurance. Spouse and family plans are available at the employee's expense. Said salary and benefits may change at any time upon approval by the Board of Alderman and signed by the Mayor.

ESSENTIAL FUNCTIONS FOR COMMISSIONED POLICE OFFICERS

In accordance with the Americans with Disabilities Act (ADA), the following list of essential functions is established as criteria for qualification to receive confirmed offers of employment as a commissioned police officer with the Velda City Police Department.

GENERAL SUMMARY: The work of the commissioned police officer involves responsibility for the protection of life and property, prevention of crime, apprehension of criminals and the general enforcement of laws and ordinances. Duties normally consist of routine patrol, preliminary investigation and traffic regulation. Police officers also may be assigned duties as detectives, court security, crime prevention officers, training officers, evidence technicians, field training officer, and others as assigned. Work involves an element of personal danger. The employee must be able to exercise sound independent judgment under stress. Assignments may include work in special tasks, which call upon specialized abilities and knowledge possessed by the officer. Work assignments can be general or specific and instructions are received from a supervisor who reviews work methods and results through reports, personal inspection and discussion.

I. DUTIES AND RESPONSIBILITIES

A. Crime Prevention and Investigation:

- Performs preventive patrol in assigned beat
- Continually observes for criminal activity, safety hazards, traffic violations, persons needing assistance, etc.;
- Becomes and remains familiar with patrol beats, geographic locations, known offenders, neighborhood routines, and potential problem areas;
- Conducts security inspections and surveys of buildings and businesses and makes recommendations regarding security, etc.;
- Makes presentations to groups and individuals on subjects related to the job's tasks and functions;
- Handles complaints made by the public;
- Observes for, detects and investigates violations of laws and ordinances and documents those actions for future use;
- Conducts interviews and interrogations of victims, witnesses, suspects, and offenders;
- Conducts searches of persons, vehicles, places, and things;
- Identifies and arrests offenders, including subduing resistive arrestees;

- Seeks and serves warrants, search warrants and other court documents;
- Assists prosecutors in the preparation of cases for trial;
- Appears and testifies in court, juvenile hearings, at deposition sessions and similar proceedings;
- Enforces traffic and parking laws, including driving under the influence detection and apprehension;
- Controls, regulate and direct vehicular and pedestrian traffic;
- Investigates traffic accidents, including protecting the scene, aiding the injured, controlling traffic, clearing the scene, determining the cause, preparing reports and diagrams;
- Assists disabled motorists;
- Deal with children of all ages in a variety of situations, such as delinquents, minors requiring authoritative intervention, neglected, abused, runaways, lost, found, victims of crimes, public relations and instructional functions and informants.

B. Miscellaneous Order Maintenance:

- Deals with domestic disputes and other interpersonal and business contacts;
- Recognizes and corrects or reports public hazards and inconveniences, as gas leaks, traffic signals out of service, traffic obstructions and other safety hazards;
- Responds to specific requests for ambulance/fire service and assists as needed;
- Administers first aid, including CPR, to sick and injured persons;
- Investigates incidents involving dead persons resulting from criminal, accidental, suicidal and natural cases, including determination of the circumstances and handling/removal of the body and dealing with the family, relatives, friends, witnesses, etc.;
- Investigates reports of lost, stolen, and found property;
- Investigates reports of missing and found persons;
- Investigates animal complaints, including the humane disposition of severely injured animals;
- Directs and/or supervises civilian employees and the public at the scenes of crimes, accidents, disasters, assemblies, etc;
- Generally assists persons in distress.

C. Organization Support

- May perform desk duties, including telecommunications (telephone, computer terminal, radio), assisting persons at the front counters anywhere assigned, including processing reports;
- Conducts background investigations for prospective police applicants;

- Attends training as assigned;
- Develops and maintains required skills and licenses/permits/certifications associated with area of special instruction, expertise, etc. (firearms qualification, evidence technician, Tazer);
- Trains new officers, reserve officers and other officers in areas of special skills or expertise;
- Prepares clear, accurate and complete reports on any and all activities engaged in.

II. Work Characteristics/Conditions

A. Scheduling

Police Officer positions involve regular and irregular shift work and shift rotations necessary to provide police services 24 hours a day, 7 days a week, 52 weeks a year (weekends and holidays included). Work shifts are normally eight (8), 10 (10), and/or twelve (12) hours in duration but may be extended in the event of emergency, disaster, manpower shortage, workload, work-in-progress, or as ordered by a supervisor. High percentage of attendance, on-time arrival to work and ability to work overtime when necessary are required. Being late at 3 times in your calendar year (1st day of hire) shall be grounds for termination. Late is defined as arriving 5 minutes past your scheduled shift.

B. Environmental Factors

Police Officer positions involve exposure to and require the officer to function in the presence of the following (not limited to either):

- Inclement weather, to include extreme heat/cold, rain, snow, wind, ice, etc.;
- Light conditions associated with day and night;
- Fire, smoke, chemical leaks/spills – as close proximity as necessary to provide emergency services;
- Personal danger, including but not limited to:
 - o Armed and/or dangerous persons/animals;
 - o Persons and/or articles with contagious/communicable diseases;
 - o Hazards associated with emergency driving, traffic control and working in and around traffic;
 - o Hazards associated with natural and man-made disasters.

C. Infectious Diseases

Because police officers may be called upon in adverse conditions to come into physical contact with others, the City will not knowingly expose citizens or other employees to an employee infected with a contagious disease that poses a direct threat to others.

Decisions regarding infectious diseases will be based on reasonable medical judgments given the state of medical knowledge about: a) the nature of the risk (how the disease is transmitted), b) the duration of the risk (how long is the carrier infectious), c) the severity of the risk (what is the potential harm to third parties, and d) the probability that the disease would be transmitted and will cause varying degrees of harm (School Board of Nassau County v. Arline, 480 U.S. 273, 107 S. Ct. 1123, 1987).

III. Physical Abilities

The Velda City Police Department has a strong interest in promoting confidence with the general public by having our employees maintain a uniform, professional appearance and image. Uniforms, equipment items and personal appearances are regulated by the Department's General Order, Uniforms and Appearance. All commissioned police officers must be able to wear and effectively utilize all Department issued items of uniforms and equipment as specified in the general order, regardless of assignment. This includes, but is not limited to: the field uniform (gun belt and included equipment, soft body armor; and specialized equipment such as riot helmet, riot baton and ballistic shield).

A. Motor Skills/Flexibility

The Police Officer position requires the employee to have and maintain the physical and mental ability needed to:

- React and move rapidly from a sedentary to active condition in response to environmental situations or events;
- Assume a variety of bodily position and postures necessary to employ available "cover and concealment" during a deadly force encounter;
- Respond to a physical attack and possess the ability to escape the attacker and/or summon aid;
- Operate a motor vehicle in a safe and prudent manner (possess a Missouri driver's license with less than five chargeable points);
- Operate and qualify with the Department firearms, utilizing both hands, as well as each hand individually;
- Operate all equipment necessary for performing routine daily assignments, apprehending and processing criminals and conducting both criminal and traffic-related investigations;
- Operate/utilize all Department vehicle mounted equipment whether in a mobile or stationary mode;
- Administer first aid, to include Cardio Pulmonary Resuscitation (CPR);
- Perform required duties for extended periods of time while exposed to adverse conditions, to include time worked in excess of the normal daily duty shift and rotating shift work;
- Apprehend suspects to the extent of engaging in foot pursuits while summoning assistance and/or engaging in the necessary use of force;
- Discern colors as they are applied in traffic safety situations (electric signals, signing, hazardous materials placards, vehicle and clothing descriptions, etc.);
- Adequately judge distances and estimate speed;
- See, read and recognize obstacles in a variety of normal and/or emergency environments. Have vision that is correctable to "Department vision" standards;
- Determine or estimate the point of origin of noise;

- Recognize/relate sound to situations based on frequencies or voice inflection within the normal range of human hearing;
- Employ the normal senses of touch and smell.

B. Communicative Skills

The police officer position further requires the employee to have and maintain the physical and mental condition needed to:

- Speak, read and write the English language in a clear, understandable fashion;
- Reasonably identify and display basic non-verbal communications (body language);
- Effectively relate to or communicate with a variety of personality types during interpersonal contacts.

C. Judgment/Decision Making Ability

The Police officer position requires the employee have the ability to:

- Comprehend and implement verbal and written instructions;
- Apply reasoning skills when confronted with circumstances requiring discretionary decisions;
- Establish priorities and construct subsequent plans when investigating incidents or events;
- Formulate and carry out an appropriate course of action for a given situation for which no specific rule or procedure has been established;
- Apply theory based instruction or training to actual incidents/situations;
- Handle situations firmly, courteously, tactfully and impartially;
- Retain and retrieve information furnished in the form of bulletins, verbal reports, training keys, etc.;
- Be capable of receiving and giving instructions.

D. Emotional Psychological Stability

The police officer position requires the employee to have the emotional and psychological stability required to:

- Cope with and perform day-to-day duties under the principles of discipline;
- Maintain self-control when receiving constructive criticism and/or being ridiculed;
- Continue performing all required tasks at a professional level when faced with unpleasant circumstances;
- Perform police duties without dependence on alcohol/narcotics;

- Deal effectively with the morbid, the macabre, the repugnant, the abnormal, the morose, the psychotic, the neurotic and the otherwise unpleasant or unusual facets of results of human behavior.

VELDA CITY POLICE DEPARTMENT Personal Appearance Guidelines

The Velda City Police Department has a strong interest in promoting confidence with the general public by having our employees maintain a uniform, professional appearance and image. Applicants should review the following guidelines to assist in deciding whether to complete and submit an application for employment.

A. All commissioned employees will maintain their hair in a neat, clean and well-groomed condition.

1. The hair can be dyed, but must appear of natural color.
2. No beards, goatees or similar growths are permitted.

B. Female commissioned and civilian employees may wear one earring in each ear, according to specifications. Males are not authorized to wear earrings. All other visible body piercings/studs are prohibited (e.g. tongue, lip, eyebrow, nose, chin).

C. Civilian employees, other than security, are also encouraged to maintain high personal grooming and hygiene standards. Civilian employees are reminded of the importance of a well-groomed business appearance in maintaining a favorable image of the Department. The hair can be dyed, but must appear natural in color. Any facial hair will be kept in a neatly trimmed condition.

D. Exposed permanent body markings (e.g. tattoos, body art, etc.) must not be deemed offensive to the general public.

1. Department employees shall not display tattoos that are visible on the face, neck, head, or hands. Visible tattoos on other areas of the body may be displayed with Department approval.

2. The Department reserves the right to require any tattoo to be covered/removed. If a Department employee is asked to cover an existing tattoo, the employee has the option to remove the tattoo at their own expense; or keep them covered through the use of Departmentally approved clothing (to include the required wearing of a long-sleeve uniform shirt); or the utilization of a single colored skin toned patch for those areas that cannot be covered by clothing.

I have read this entire background application questionnaire. I understand it, have asked for clarification, and agree that I meet the requirements for the position I am applying for. I also read and agree that I can perform the essential functions of the position I am applying for with little or no supervision. I understand and agree that any violation of General Orders, Orders given to me by any supervisor/Chief of Police, and/or not being able to perform the essential functions outlined in this application shall be grounds for termination. I understand that the City of Velda City is an "AT-WILL" employer. I also understand and have been advised that my continued employment is also strictly contingent on current budgetary needs and/or active police service contract (s) in place; meaning that should any police service contract be terminated for any reason; I understand that I may be terminated or laid off due to such contract termination. I also understand and agree that if hired, I will be placed on "probation" for at least 1 year so that the department may evaluate my performance. During this time frame, I may be terminated for any reason or no reason. I understand that I am not off probation until I have been given written notice of such even after 1 year. THIS IS NOT AN EMPLOYEE/EMPLOYER CONTRACT.

Signature	Date

APPLICANT SIGNATURE

Signature	Date

WITNESS SIGNATURE