

APPLICATION FOR EMPLOYMENT

Rolla Police Department

1007 N. Elm St., Rolla, MO 65401

573-308-1213 Fax: 364-6346

(Pre-Employment Questionnaire) EOE/ADA

PLEASE PRINT

Date: _____

PERSONAL

Last Name: _____ First: _____ Middle: _____ Preferred: _____

Mailing Address: _____
Street/P.O. Box City State Zip

Physical Address: _____
(If Different) Street City State Zip

Phone #: _____ Home Alternate E-Mail: _____ Optional SSN: _____

Position Applied For: Police Officer Telecommunicator Records Clerk Animal Control Officer
(Check only one) Custodian Crossing Guard Reserve Officer _____

GENERAL

Have you ever filed an application with the City of Rolla before? Yes No
If yes, what department? _____ When? _____

Have you ever been employed with the City of Rolla before? Yes No
If yes, what department? _____ When? _____

Do any of your relatives, other than spouse, work for the City? Yes No
If yes, what department? _____ Name: _____

Are you currently employed? Yes No May we call you at work? Yes No

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

Do you have prior military experience? Yes No If yes, state branch and rank: _____

Are you presently a member of the National Guard or Reserves? Yes No

Are you 18 years or older (21 for Police Officer Applicants Only)? Yes No

Are you P.O.S.T. certified (Police Officer Applicants Only)? Yes No

How many words per minute
can you type? _____
Test your speed here.
<http://www.careerstep.com/free-typing-test>

If not, are you enrolled in a police academy OR eligible for licensing as defined in Chapter 590 of RSMo? Yes No

REFERENCES

Give the names of three persons whom you have known at least one year. Do not include family members.

Name	Address and Phone Number	Occupation	Years Acquainted

EDUCATION	Name and Location of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/ Professional				
Vocational Training/ Other (Specify)				

Please list any special training or skills you have acquired that would be of benefit in the job for which you are applying:

WORK EXPERIENCE

Start with your present job and continue with most recent first. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Address		
Phone Number	Job Title	Hourly Rate/Salary	Dates Employed	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer		Address		
Phone Number	Job Title	Hourly Rate/Salary	Dates Employed	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer		Address		
Phone Number	Job Title	Hourly Rate/Salary	Dates Employed	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Explain any gaps in employment:

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In consideration of my employment, I agree to conform to the City's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the City. I understand that no City representative, other than the City Administrator or Chief of Police, and then only when in writing and signed by the City Administrator, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

Signature of Applicant: _____