Reeves Police Department

APPLICATION FOR EMPLOYMENT

APPLICANT INFORMATION Name (Last) (First) (Middle) Date Address City State ZIP Code Telephone Alternate Telephone Best Contact Time E-Mail Address Social Security Number Driver's License No./Issuing State Date of Birth Type of Work Desired Position Apply For **Desired Salary** Full-Time Part-Time Will You Work Overtime? When Are You Available to Begin Work? ☐ Yes ☐ No If hired, can you provide evidence that you are authorized and of legal age to work in the United States? Yes No

EDUCATION

TYPE	SCHOOL NAME/LOCATION	COURSE OF STUDY	NO. YEARS ATTENDED	DEGREE/DIPLOMA
HIGH SCHOOL				
BUSINESS/TECHNICAL				
COLLEGE				
GRADUATE				
OTHER				

EMPLOYERS

(List all jobs and contracts held by you during the past five continuous years)

í		г	т	D	D	17	N	Т	' I	71	М	п	7	n	٦	v	4.	D	١
۹	_	L	л,	г	ı	T.		·	_	-1	v.			u		Ε.		г	ı,

Company Name		Telephone	:	
Address	City	S	tate	ZIP Code
Position Held	From	То	Startin	g/Ending Salary
Reason for Leaving		S	upervisor	

PREVIOUS EMPLOYER

Company Name	Telephone					
Address	City	State	ZIP Code			
Position Held	From	То	Starting/Ending Salary			
Reason for Leaving		Super	rvisor			

PREVIOUS EMPLOYER

Company Name		Telephon	ie	
Address	City	:	State	ZIP Code
Position Held	From	То	Startin	g/Ending Salary
Reason for Leaving		:	Supervisor	

PREVIOUS EMPLOYER

Company Name	Telephone					
Address	City	State	ZIP Code			
Position Held	From	То	Starting/Ending Salary			
Reason for Leaving		Super	visor			

MILITARY STATUS Have You Served in the U.S. Armed Services? Start Date End Date Branch ☐ Yes ☐ No Rank/Rate at Discharge Type of Service Type of Discharge Special Training/Experience Received in the U.S. Armed Services Draft Status Reserve Status CRIMINAL HISTORY Have you ever been convicted of a criminal offense? Check One: ☐ Yes ☐ No Do you currently have any criminal actions pending in which you are the Defendant? (Not Applicable to California Applicants) Check One: Yes No Are you currently on probation or parole? Check One: Yes No If you answered "Yes" to any of the above questions, please explain the nature of the offense and provide the date of the offense and the county and state in which it occurred. PERSONAL REFERENCES: Name Address Phone Occupation Relationship Address Name Phone Occupation Relationship Name Address Phone Occupation Relationship APPLICANT STATEMENT (Read and Sign Below) I certify that this employment application was completed by me and that all of the information on this application is true and correct to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts called for herein will result in my disqualification from further consideration or dismissal from employment if I am hired. I have reviewed the Authorization for Criminal Records Verification and Fingerprint Information and acknowledge that I understand the terms set forth therein. I understand that this employment application is not valid without my signature. Print Name Signature Date