

Waveland Police Department
628 Highway 90
Waveland, MS 39576
www.wavelandpolice.com

Application for Employment

James Varnell
Chief of Police

Mike Prendergast
Asst. Chief of Police



Application cover page,

The city of Waveland Police Department is an equal opportunity employer. There will be no discrimination against any applicant or employee because of race, creed, color religion, national origin, sex, age, veteran status or disability.

Note. The last page of this application contains the instructions and a check list of all information needed.

Waveland Police Department- 628 Hwy 90- Waveland MS 39576
Telephone (228)467-3669 Fax (228)467-3686
e-mail: jvarell@wavelandpolice.com

Place an "X" by the Position Applying For

_____ Full Time Patrolman _____ Part Time Patrolman
_____ Full Time Dispatcher _____ Part Time Dispatcher

Personal History Statement (Please Type or Print)

Applicant Identification - Information Provided in this Section is Used for Identification Purposes Only.

Name _____
Last First Middle

Address _____
Street Address or Post Office Box Number

_____ City State Zip

Phone Number _____
Home Cell Work

Birthday _____ Social Security Number _____
Month/Day/Year

Nickname(s), maiden name, or other names by which you have been known:

Place of Birth _____
City County State

Drivers License No.: _____ State _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

U.S. Citizen? Yes ___ No ___

List all states in which you have held a drivers license in.

Marital and Family History

Are you? Single ___ Married ___ Separated ___ Divorced ___ Widowed ___

If Married: Date of Marriage _____ City and State _____

Spouse's maiden name _____

Separated, or Divorced (circle one if applicable):

Date of Order or Decree _____ Court & State Where Issued: _____

Fathers Name: _____ Address: _____

Mothers Name: _____ Address: _____

Residences- List all addresses where you have lived during the past 10 years, beginning with your present address. List date by month and year. Attach extra page if necessary.

From	To	Address

Military Record

Have you served in the U.S. Armed Forces? Yes ___ No ___
(Including National Guard)

Date of Service: From _____ To _____ Military Service No. _____

Branch of Service _____ Unit Designation: _____

Highest Rank Held: _____ Type of Discharge: _____

Were you ever disciplined while in the military service (including court-martial's, captain's masts,

company punishment, etc.)? Yes ___ No ___

Charge	Agency	Date	Age at Time	Disposition

If you received a discharge other than honorable, give complete details.

Work History- Beginning with your present or most recent job, list all employment held for the past ten years, including part-time, temporary or seasonal employment. Include all periods of unemployment. Attach extra pages if necessary.

1. From _____ To _____ Employer _____

Address _____

Phone Number _____ Job Title _____

Duties _____

Supervisor _____ Reason for leaving _____

2. From _____ To _____ Employer _____

Address _____

Phone Number _____ Job Title _____

Duties _____

Supervisor _____ Reason for leaving _____

3. From _____ To _____ Employer _____

Address _____

Phone Number _____ Job Title _____

Duties _____

Supervisor _____ Reason for leaving _____

4. From _____ To _____ Employer _____

Address _____

Phone Number _____ Job Title _____

Duties _____

Supervisor _____ Reason for leaving _____

Have you ever been arrested and or convicted of a misdemeanor, or traffic offense?

_____ Yes _____ No

List to the best of your memory all driving citations, or arrest you have received as an adult, juvenile, excluding parking tickets.

Month & Year Charge City & State Disposition

Month & Year	Charge	City & State	Disposition

Have you ever been arrested and or convicted or a felony offense? _____ Yes _____ No

Month & Year Charge City & State Disposition

Month & Year	Charge	City & State	Disposition

Do you have any charges that have ever been non-adjudicated or expunged? Yes ___ No ___
If yes, on a separate sheet of 8 ½ X 11 paper explain and obtain original paperwork.

Have you ever been involved in a traffic accident? Yes ___ No ___ If yes, on a separate sheet of 8 ½ X11 paper give a brief narrative any traffic accidents in which you have been involved, give approximate dates and locations.

Have you ever been involved as a party in civil litigation?

Yes _____ No _____ If yes, give details.

Has your driver's license ever been suspended or revoked?

Yes _____ No _____ If yes, give date, location and reasons.

Do you object to being fingerprinted? _____ Yes _____ No

Do you object to being photographed? _____ Yes _____ No

Educational History

School or Collage Attended	City & State	Dates Attended		Graduated		Major
		From	To	Yes	No	

Law Enforcement Experience

Department _____ City/State _____

Status Full Time/ Part Time _____ Years _____

Department _____ City/State _____

Status Full Time/ Part Time _____ Years _____

Department _____ City/State _____

Status Full Time/ Part Time _____ Years _____

List any law enforcement training attended. Give name and dates of any schools or courses.

List other schools attended (trade, vocational, business, etc.) give name and addresses of school, dates attended, course of study, certificate, and any other pertinent information.

References or Acquaintances- list five people who know you well enough to provide current information about you. **Do not list relatives or former employees.**

Name: _____ Title: _____

Address: _____ City/State _____

Home Phone _____ Work Phone _____

Name: _____ Title: _____

Address: _____ City/State _____

Home Phone _____ Work Phone _____

Name: _____ Title: _____

Address: _____ City/State _____

Home Phone _____ Work Phone _____

Name: _____ Title: _____

Address: _____ City/State _____

Home Phone _____ Work Phone _____

Name: _____ Title: _____

Address: _____ City/State _____

Home Phone _____ Work Phone _____

If you are fluent in a foreign language, indicate in each area your degree or fluency (excellent, good, fair).

Language	Reading	Speaking	Understanding	Writing

Membership in Organizations (Past and/or Present)

Name of Organization	Type of Organization	Dates of Membership

List any special licensed you hold (such as pilot, radio operator, scuba, etc.), showing licensing authority, original date of issue and date of expiration.

Shirt size _____

Pants size _____

Jacket size _____

Personal Declarations

Describe in your own words the frequency and extent of your use intoxicating liquors.

Have you ever used marijuana or any other drug not prescribed by your physician?

Yes ___ No ___ If yes, what were the circumstances? _____

Have you ever sold or furnished drugs or narcotics to anyone?

Yes ___ No ___ If yes, explain in detail. _____

Are there any incidents in your life or details not mentioned herein which may influence this department's evaluation of your suitability for employment as a law enforcement officer?

Have you ever filed bankruptcy? Yes ___ No ___

Personal History Statement Agreement

I hereby certify that the answers and statements in the foregoing personal history statement are true and correct without consequential omission of any kind. I hereby agree that any falsification contained in this information shall be considered good and sufficient cause for rejection of this application and/ or discharge. I understand that a complete background investigation will be conducted as a condition of this employment. I authorize the aforementioned companies, persons and or public institutions to give any information concerning me or my employment whether or not it is on their records. I hereby release said companies or persons from all liability for any damages whatsoever from issuing this information.

As a part of this investigation process, I will submit the following documents:

-Proof of U.S. Citizenship, proof of age, verification of my identity, a copy of social security card, and a discharge certificate or separation papers. (For applicant who have served in the Armed Forces only)

- I will accept employment for a temporary period depending on my ability to satisfy the requirements of: this agency, the Law Enforcement Officers Training Program (45-6-1 to 45-6-17 of the Mississippi Code as amended), the Board on Law Enforcement Officers Standard and Training.

- I hereby authorize the employing agency to deduct from my wages due me at anytime, the values of monies or property advances to me or on my behalf for which I am accountable, such as, but not limited to, travel advances, agency credit card, and/or agency property damaged, lost or misappropriated by me.

- If employed on either a permanent or temporary basis, I agree to abide by all rules, policies, and regulations of the agency now in force or, that my be hereafter established.

- Applications for employment shall be considered active for a period of time not to exceed 30 days.

ONLY SIGNED APPLICATIONS ARE CONSIDERED VALID

Signature

Date

Authorization for release of information agreement

Read the following form carefully and enter your signature, current address, telephone number, date of birth, social security number and date in designated space. This form must be notified.

To whom it may concern,

I am an applicant for a position with the Waveland Police Department. The department needs to thoroughly investigate my employment background and personal history to evaluate my qualification to hold the position for which I applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the above department.

I hereby authorize any representative of the Waveland Police Department bearing the release to obtain any information in your files pertaining to my employment records and I hereby direct you to release such information upon request of the bearer. I do hereby authorize a review of and full disclosure of all records, or any part thereof concerning myself, by and to any duly authorized agent of the Waveland Police Department whether such records are public, private or confidential nature. The intent of this authorization is to provide full and free access to the background and history of my personal life. This authorization is for the specific purpose of pursuing a background investigation that may provide pertinent data for the Waveland Police Department to consider in determining my suitability for employment in that department. It is my specific intent to provide access to personnel information, however personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you have concerning me: work record background and reputation, military service records, educational records, financial status, criminal history record including any arrest records, and information contained in investigatory files, efficiency ratings, complaints or grievances, files against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had interest, attendance records, polygraph or CVSA examinations, and internal affairs investigations and discipline including any files which are deemed to be confidential and or sealed.

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damages pursuant to any state or federal laws. I hereby release you as the custodian of such records of the organization, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it, I direct you to release such information upon request of the duly accredited representative of the Waveland Police Department requesting the information pursuant to this release will discontinue processing my application of you to disclose the information requested.

For and in consideration of the Waveland Police Department acceptance and processing of my application for employment, I agree to hold the Waveland Police Department, its agents and employees harmless from any and all claims and liability associated with my application for employment or in anyway connected with the decision whether or not to employ me with the Waveland Police Department. I understand that should information of serious criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552A, The Privacy Act of 1974, with regard to access and disclosure of records, and I waive these right with the understanding that the information furnished will be used by the Waveland Police Department in conjunction with the employment procedures.

A photocopy or fax copy to release form will be valid as an original thereof, even though said photocopy or fax copy does contain an original writing of my signature. This will be valid for a period of two years from the date of my signature. I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees from and against all claims, damages, losses, and expenses including attorney's fees, arising out of or by reason of complying with this request.

Print Name

Signature

Current Address

Date of Birth: _____ SSN: _____

Telephone #: _____ Work # _____ Cell # _____

State of _____

County of _____

Personally came and appeared before me, the undersigned authority in an for said county and state, the within named _____ who acknowledged to me that he/she signed and delivered the above forefoing waiver on the date therein mentioned and for the purpose therein expressed.

Sworn to and subscribed before me this _____ day of _____, 20____

Notary Public

My commission expires

Application instructions, check list and additional items required.

Instructions:

Application needs to be printed or typed clearly.

If questions are not applicable to you, please place an "N/A" in that space.

All employers should be listed with all pertinent information filled out.

One page has a requirement of being notarized. If this page is not notarized, the application will not be considered.

Checklist

- _____ Application completely filled out
- _____ Last page notarized
- _____ Recent Photograph (Color)
- _____ Certified copy of birth certificate.
- _____ Copy of drivers license.
- _____ Copy of High School diploma.
- _____ Copy of GED if no High School diploma.
- _____ Copy of police officer certificate if applicable.
- _____ Copy of all schools attended in reference to the job applied for.

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