

DICKSON POLICE DEPARTMENT



FULL NAME: _____

DATE: _____

DICKSON POLICE DEPARTMENT
35 EASTGATE LOOP
DICKSON, OK 73401
580-223-0544

Dear Applicant:

The Town of Dickson appreciates your interest in our Police Department. We are excited about receiving more information from you and would like for you to complete the attached employment application.

*Please follow all instructions in the application and make sure that the application is fully completed.
Please return completed application to court clerk.*

REQUIRED WITH YOUR APPLICATION

- Job history for the past five (5) employers. If your five listed employers do not cover a time period of **at least ten years**, please attach a supplemental employment page to record your remaining employment history. Use additional pages as necessary (the format must include all requested information).
- Proof of highest education (HS Diploma, GED, College Degree(s) and/or transcript(s)).
- A DD-214 Member 4 long form (if you have been military).
- NGB Form 22 (if you have been in the National Guard).
- Any certificates or license necessary to the position (CLEET).
- Driver's License

HIRING INFORMATION

Requirements for Police Officers:

1. Be a citizen of the United States;
2. Hold a High School diploma or GED;
3. Possess a valid driver's license;
4. Have not been convicted of or pled guilty to or entered a plea of nolo contendere to any felony charge or to any violation of any federal or state law or local ordinance relating to aggravated assault, theft, driving while intoxicated, controlled substances or other crime involving moral turpitude and have been released or discharged under dishonorable conditions from any of the Armed Services of the United States.
5. After examination by a certified psychologist or an MMPI done, found to be free of any emotional or mental condition which might adversely affect performance as a Police Officer

- or be prohibited from successfully completing prescribed basic law enforcement training.
6. Be of good moral character.
 7. Have met any other requirements for certification prescribed by the board pursuant to regulations adopted by the board; and
 8. After examination by a licensed physician, found to be free of any physical condition which might adversely affect performance as a Police Officer or be prohibited from successfully completing prescribed basic law enforcement training required.

In addition, the Town of Dickson Police Department sets the following for Police Officers

1. 21 years of age or older at the time of employment.
2. Require Honorable Discharge from any of the Armed Forces of the United States.

Drug Usage

The use of any of the following drugs within a five (5) year period prior to application will be cause for disqualification:

Cocaine
Heroin
Methamphetamine

Any prior/current use of LSD will be reason for disqualification. Any other drug usage will be reviewed on an individual basis to determine acceptability or disqualification depending upon the frequency and recency of usage. Information regarding during usage will be included in polygraph.

Physical Fitness Screening Standards

Applicants for position of Police Officers are required to meet fitness Screening Standards as required by the Town of Dickson Police Department.

Written Examination

Written exams will be given after the successful completion of the physical fitness testing. The exam is graded and pass/fail results will be given to the applicant.

Oral Review Board

Applicants are interviewed first by the Chief and then by the Town Board. Applicants who fail the oral review board may re-apply after twelve (12) months. Applicants may only appear before the oral board review twice.

Final Interviews

After successful completion with the Town Board of Trustees, the applicant will then interview with the Chief of Police.

Duration of Process

The length of the process is dependent upon multiple variables such as the applicant's responsiveness to requests for information, the extensiveness of the background investigation and pending results of the numerous exams and assessments listed above.

**TOWN OF DICKSON POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT
35 EASTGATE LOOP
DICKSON, OK. 73401
580-223-0544**

INSTRUCTIONS: Applicants must complete all the blanks accurately and completely.
PLEASE PRINT, NEATNESS AND LEGIBILITY ARE IMPORTANT.

POSITION DESIRED _____

APPLICANT INFORMATION

Last Name _____ First Name _____ M.I. _____ DOB _____
Street Address _____ Apt/Unit # _____
City _____ State _____ Zip _____
Phone _____ Alternate Phone _____
Social Security Number _____ E-Mail Address _____
Date Available _____

How did you learn about this opportunity? _____

Are you willing to relocate? YES NO

Are you a citizen of the United States YES NO

If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for the Town of Dickson? YES NO

If so, when? _____

Military Service? YES NO Honorable - YES NO Dishonorable - YES NO

Date Entered

Date Separated

Have you ever been convicted of a felony? YES NO

If yes,

explain _____

Have you ever been fired or asked to resign from a job? YES NO

If yes,

explain _____

Do you have any relatives, by blood or by marriage, working for or holding office for The Town of Dickson or Dickson Police Department? YES NO

If yes,

explain _____

Have you ever had your driver's license suspended or revoked? YES NO

If yes,

explain _____

Do you have a current driver's license? YES NO

If yes, show type, number, and state of issue below.

License Type CDL Class A__ Class B__ Class C__ Operators: Class D__

License Number and State of Issue _____

LICENSES, CERTIFICATIONS, AND SKILLS

Please list any job related licenses, certifications and/or skills:

| Type | Number | Expiration Date |
|------|--------|-----------------|
| Type | Number | Expiration Date |
| Type | Number | Expiration Date |

Job Related

Skills: _____

Machines and/or Equipment you can operate skillfully: _____

Foreign

Languages: _____

EDUCATION

CIRCLE YOUR HIGHEST EDUCATION LEVEL: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Do you have a High School Diploma or a GED? YES NO

High School _____ Address _____

College _____ Address _____

Hours Completed _____ Did you graduate? YES NO Degree _____

Other _____ Address _____

Did you graduate? YES NO Degree _____

PREVIOUS EMPLOYMENT

Start with your present or most recent job. Include military service. List last five jobs or ten years or work experience. Explain any gaps in employment history. A resume does not substitute for this portion of the application.

Company:

Phone:

Address:

Supervisor:

Job Title:

Starting Wage:

Ending Wage:

Responsibilities:

From:

To:

Reason for leaving:

May we contact your previous supervisor? YES NO

Company:

Phone:

Address:

Supervisor:

Job Title:

Starting Wage:

Ending Wage:

Responsibilities:

From:

To:

Reason for leaving:

May we contact your previous supervisor? YES NO

Company:
Phone:
Address:
Supervisor:
Job Title:
Starting Wage:
Ending Wage:
Responsibilities:
From:
To:
Reason for leaving:
May we contact your previous supervisor? YES NO

Company:
Phone:
Address:
Supervisor:
Job Title:
Starting Wage:
Ending Wage:
Responsibilities:
From:
To:
Reason for leaving:
May we contact your previous supervisor? YES NO

REFERENCES

| | |
|-----------|---------------|
| Full Name | Relationship: |
| Company | Phone: |
| Address | |

| | |
|-----------|---------------|
| Full Name | Relationship: |
| Company | Phone: |
| Address | |

| | |
|-----------|---------------|
| Full Name | Relationship: |
| Company | Phone: |
| Address | |

DISCLAIMER AND SIGNATURE

PLEASE READ CAREFULLY BEFORE SIGNING:

I understand that by filling out the Town of Dickson Police Department Application I authorize the Town of Dickson Police Department to thoroughly investigate all statements contained in my application and resume, and I hereby state the information given by me is true and complete to the best of my knowledge. I understand that any false statement or misrepresentation on this application is sufficient cause for refusal to hire or dismissal if I have been employed.

I understand that the Town of Dickson Police Department conducts employment physical examinations and drug testing and all job offers are contingent upon the results of such tests.

And further, I expressly request former employers and any persons who may have pertinent information concerning me to furnish such information to the Town of Dickson Police Department officials. I agree to hold such persons harmless, and I do hereby release them from any and all liability for damage or any nature whatsoever for furnishing such information.

Signature

Date

QUESTIONNAIRE

List any other name (s) you have used (maiden, nicknames, married, etc.)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

ADDRESS HISTORY

In the spaces below, list all address where you have lived during the past (10) years, including military addresses, if applicable. Begin with your present address.

FROM-----TO---STREET ADDRESS-----CITY-----COUNTY-----STATE-----

CRIMINAL HISTORY

Have you ever been convicted by any court, board or special judicial authority for any violation of Federal, State, County or Municipal law, including events while you were a juvenile and/or events while you were in the military that resulted in loss of pay or privileges, detention, and/or reduction in grade (this does not include traffic offenses unless you were placed in custody)?

YES NO

Have you ever been convicted of or pled guilty to or entered a plea of nolo contendere to any felony charge or, to any violation of any Federal, State law, or local ordinance relating to aggravated assault, theft, driving while intoxicated, controlled substances or other crime involving moral turpitude?

YES NO

Have you ever been arrested or discharged under dishonorable conditions from any of the Armed Forces of the United States?

YES NO

If you circled "YES" to any of these, in the space below list the required information for each event. (Use a separate sheet of paper if necessary).

DATE

CHARGE

LOCATION (City/State)

CURRENT STATUS

DATE

CHARGE

LOCATION (City/State)

CURRENT STATUS

DRIVING HISTORY

Do you currently have a valid driver's license? YES NO

If YES, in the space below list all states where you have been licensed and/or all names you have licensed under.

NAME _____

STATES _____

Have you ever had a driver's license revoked or suspended by the licensing authority (state or court)?

If "YES" in the space below list the required information.

FROM

TO

STATE

REASON

FROM

TO

STATE

REASON

FROM

TO

STATE

REASON

Have you ever been sentenced to driver improvement school? YES NO

If "YES", in the space below list the required information.

FROM

TO

STATE

REASON

List all driving citations/summons you have received as an adult or juvenile, beginning with the most recent:

| MONTH/YEAR | CHARGE | CITY/STATE | DISPOSITION |
|------------|--------|------------|-------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

NARCOTICS HISTORY

Please answer the following questions YES or NO regarding the illegal use of drugs. List your explanation on the lines provided if you answered YES to that question.

| DRUG | YES | NO | NUMBER OF TIMES USED | LAST TIME USED |
|------|-----|----|----------------------|----------------|
|------|-----|----|----------------------|----------------|

Marijuana
Hashish/Hash Oil
THC (powder or tabs)
LSD
Peyote
Mescaline
PCP
Cocaine
Tranquilizers
Opium
Heroin
Codeine
Methadone
Designer Drug (i.e. ecstasy)
Other (i. e. steroids

Have you ever engaged in illegal use of drugs, including the consumption of a prescription drug not prescribed to you?

YES NO

Have you ever illegally obtained any prescription drugs or controlled substances?

YES NO

Have you ever illegally sold, furnished or supplied any narcotics of drugs to anyone?

YES NO

EMPLOYMENT/TRAINING

Have you ever applied for a position with any law enforcement or public safety agency?

YES NO CLEET # _____ (if applicable)

| DATE | DEPARTMENT | CITY/STATE | STATUS |
|------|------------|------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

If not hired, indicate what reason(s) you were given except items covered by the American with Disabilities Act (ADA).

Have you ever received any law enforcement training? YES NO

If YES, explain in space below.

What is the extent of your exposure to law enforcement activities?

MISCELLANEOUS

Have you ever been released or terminated from a job because of you failure to meet job requirements, other than reasons of disability?

YES NO

Have you ever been discharged, asked to resign or given the opportunity to resign in lieu of discharge?

YES NO

YES NO

YES NO

YES NO

YES NO

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for handwriting practice. There are no margins, text, or other markings on the paper.

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR
UNDERSTANDING AND ACCEPTANCE BY SIGNING THE SPACE PROVIDED.**

I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information shall be grounds for refusal to hire or, if hired, separated. I understand that failure to complete the application may be sufficient cause for rejection of this application or separation after employment. I also understand that if I am employed by the Town, I must comply with its policies, procedures and directives as a condition of employment. I further understand that no employee or representative of the Town of Dickson, other than the Board of Trustees, has the authority to enter into any agreement for employment for any specified period of time.

Applicant's Signature

Date

REFERENCES

PLEASE LIST FIVE (5) PROFESSIONAL REFERENCES (not relatives and friends,)

FULL NAME
RELATIONSHIP
COMPANY
PHONE
ADDRESS

FULL NAME
RELATIONSHIP
COMPANY
PHONE
ADDRESS

FULL NAME
RELATIONSHIP
COMPANY
PHONE
ADDRESS

FULL NAME
RELATIONSHIP
COMPANY
PHONE
ADDRESS

FULL NAME
RELATIONSHIP
COMPANY
PHONE
ADDRESS

RELEASE AND WAIVER

I _____, having made an application for the position of Police Officer for the Town Of Dickson hereby expressly admit and state as follows.

1. I have been fully advised of the essential job functions of a police officer for the Town of Dickson; and
2. I affirmatively state I can perform the essential job functions set forth in the job description With or without accommodation; and
3. I understand that an overall degree of physical ability and fitness is required to be a Police Officer; and
4. I have been advised of the nature of the exercises, I knowingly and voluntarily state I can safely perform the exercises, and agree to participate in the physical ability evaluation set forth here; and
5. I _____, do hereby, and in consideration of the Town of Dickson having permitted me to participate in such exercises for the purpose of evaluating my ability to perform the job functions of a police officer, waive and release the Dickson Police Department of the Town of Dickson, and any and all agents, servants, and/or employees thereof from any and all claims whatsoever which may be sustained as a result of participating in such exercises. I make this release for myself, my heirs, executors, and administrators and do hereby release the Town of Dickson, and all its employees or agents from any and liability for damages incurring as result of these tests.

Applicant, write in your own words, " I certify that I have read the foregoing Waiver and Release and understand its provisions."

Date

Signature of Applicant

Notary Signature

Subscribed and sworn to before me this _____ day of _____, _____

My Commission Expires: _____ Commission # _____

