



**EDUCATION HISTORY:**

Type:	Name:	Location:	Course/Subject:	Grad/Degree:
High School / Equivalent				
Tech/Trade School				
College				
Other Education / Training				
Other Education / Training				

**EMPLOYMENT HISTORY:**

List all full time, part time, temporary, and self employment. Begin with your current or most recent employer. If more space is needed, please attach a separate sheet of paper. If you attach a resume, please complete this section as well.

Current or Most Recent Employer	Supervisor	May we contact?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address		Phone #
Dates Employed (Month/Year)		Reason for Leaving
Job Title and Duties		

Name of Employer	Supervisor	
Street Address		Phone #
Dates Employed (Month/Year)		Reason for Leaving
Job Title and Duties		

<b>Name of Employer</b>		<b>Supervisor</b>	
<b>Street Address</b>		<b>Phone #</b>	
<b>Dates Employed (Month/Year)</b>		<b>Reason for Leaving</b>	
<b>Job Title and Duties</b>			

<b>Name of Employer</b>		<b>Supervisor</b>	
<b>Street Address</b>		<b>Phone #</b>	
<b>Dates Employed (Month/Year)</b>		<b>Reason for Leaving</b>	
<b>Job Title and Duties</b>			

Have you ever been involuntarily terminated or asked to resign from any job? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please explain.

Please explain any gaps in your employment history

Are you now or have you ever been a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by unconstitutional means?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you now or have you ever been affiliated or associated with any organization of the type described above, as an agent, official, or employee?

Yes \_\_\_\_\_ No \_\_\_\_\_

If YES, to any of the answers above, describe the circumstances:

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Have you ever been given a pre-employment polygraph examination?

Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, provide date of examination: \_\_\_\_\_ & Agency \_\_\_\_\_

Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to take or which might require further explanation?

Yes \_\_\_\_\_ No \_\_\_\_\_

If YES, give details:

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Have you ever applied for a position with any other governmental agency?

Yes \_\_\_\_\_ No \_\_\_\_\_

If YES, provide details below.

Date	Agency	Location

**MILITARY RECORD:**

<b>Service Record</b>	
Branch of Military Service	Duty Dates (To/From)
Type of Training	
Present Membership in National Guard or Reserves	Date obligation ends

**SKILLS:**

List any Special Skills, additional languages, or other qualifications you believe should be considered in evaluating your qualifications for employment:

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List any equipment, machines and/or computers you can operate: \_\_\_\_\_

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**PROFESSIONAL REFERENCES**

List three professional references. Professional references should not include relatives.

	NAME	PHONE	RELATIONSHIP
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

**TERMS OF EMPLOYMENT**

Are you presently bound by a non-competition or nondisclosure agreement or any other comparable agreement or understanding in favor of any prior employer? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is yes, please attach complete copy of such agreement.

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## **Include copies of the following documents with this Application:**

1. High School Diploma, G.E.D., or College Diploma (if applicable) and a certified copy of High School and College transcripts.
2. Driver's License.
3. Military Discharge Certificate. D Form 214 – Copy 4.
4. Military Judicial or Non-Judicial Actions.
5. Social Security Card.
6. Birth Certificate (only birth certificates issued by a governmental entity, state, district, city, or count will be acceptable. Birth certificates created by hospitals or other organizations will not be acceptable), or Passport.
7. Professional License/Certificate (if applicable).
8. Bring in any documentation which would assist you in explaining any past, unusual situations or problems. Examples given: credit repossessions, civil suits, criminal convictions, etc.
9. Divorce Decree and related Divorce documents (if applicable).
10. If you would like to provide any other documents which you feel would facilitate your processing, or which would assist us in our investigation, in determining your suitability for the position, please include those documents with your personal history statement. Some examples may include the following:
  - a) Civilian or military Performance Evaluations,
  - b) Awards or Decorations,
  - c) Any Civil Litigations,
  - d) Any Special Qualifications.



# Moxee Police Department

P.O. Box 249 • Moxee, WA 98936 • Phone 509/575-8850 • Fax /575-8852

Jeff Burkett, Chief of Police

## AUTHORIZATION OF RELEASE OF INFORMATION

NAME: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

MAIDEN/ALIAS: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

DATE OF BIRTH: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

I 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 Moxee Police Department, whether the said records are of public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions including status, records of commercial or retail credit agencies (including credit reports and/or ratings); employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, investigatory files, medical records, salary records; real and personal property tax statements and records, and other financial statements and records wherever filed; records of complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal, civil and/or traffic records; the results of any polygraph and psychological examinations and evaluations including test results, notes, and recommendations; Military service records, educational background and records, records of complaints of a civil nature made by or against me, wheresoever located, and to include the records and recollections of attorneys at law, or other counsel, whether representing me or another person in any case in which I presently have or have had an interest. I further specifically consent to the Washington Department of Revenue's release of (1) any tax returns, as defined by RCW, filed by, on behalf of, or with respect to me, and (2) any tax information, as defined by RCW, that pertains to me. I request your cooperation in supplying this information to the Moxee Police Department in response to a request from that Department.

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 life, for the specific purpose of pursuing a background investigation, which may provide pertinent data for the Moxee Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability or employment by the Moxee Police Department. I understand that all materials pertaining to this background investigation become the property of the Moxee Police Department and will not be returned to me.

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 reasonable attorney's fees, arising out of or by reason of complying with this request. I understand my rights under Title 5, US Code, Sec 552a, The Privacy Act of 1974, with regard to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the Moxee Police Department in conjunction with employment procedures. I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me and I will make no attempt to gain access to the information provided by you to the Moxee Police Department.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

### APPLICANT SIGNATURE:

\_\_\_\_\_

DATE: \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_. My Commission Expires on \_\_\_\_\_.

Notary Signature.

\_\_\_\_\_

**AUTHORIZE:**

All answers and statements are true and complete to the best of my knowledge. I understand that the City of Moxee may verify information, and that untruthful or misleading answers are cause for rejection of this application or dismissal if employed.

I authorize my previous employers to furnish the City of Moxee my records, reason for leaving, and all information they may have concerning me. I hereby release them and the City of Moxee from all liability for any damage whatsoever arising therefrom. I authorize the investigation of all statements in this application.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return this to the following address:**

**Moxee Police Department  
Post Office Box 249  
Moxee, WA 98936**

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**FOR OFFICE USE ONLY:**

POSITION \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

DATE EMPLOYED \_\_\_\_\_ EMPLOYEE STATUS \_\_\_\_\_

SALARY \_\_\_\_\_

RECOMMENDED BY: \_\_\_\_\_ DATE \_\_\_\_\_