



Somerset Borough Police Department Application for Employment

For Department Use

Date Received:

Date Expires:

To the Applicant: We appreciate your interest in our agency and assure you that we are sincerely interested in your qualifications. A clear understanding of your background, educational and work history is essential in reviewing your application for employment. Please complete this application completely and use the **Comments** section to continue or expound on any of your responses. **Please complete this application by hand and in ink.**

Your Authorization: Somerset Borough is hereby authorized to make investigation of my personal history and educational background. This inquiry includes information as to my character, general reputation and personal characteristics. I understand that misrepresentations or omission of facts called for in the application, or an application that is not legible will be automatic grounds for rejection of the application. I understand that if employment with the Borough of Somerset results from this application, false statements contained herein shall be considered sufficient grounds for immediate dismissal.

Signature of Applicant

Date

Last Name		First	MI	Suffix	Social Security #	
Present Address			City		State	Zip
Telephone		Telephone		Email		
Are you a citizen of the USA? <input type="checkbox"/> Yes <input type="checkbox"/> No; Give date if naturalized:						
Have you ever been the subject of a law enforcement investigation? <input type="checkbox"/> No <input type="checkbox"/> Yes; if yes, explain the circumstances						
Have you or are you now attending a MPOETC Certified Academy? <input type="checkbox"/> No <input type="checkbox"/> Yes; if yes, respond to the items below:						
Academy attended:				Graduation Date:		
Have you taken and passed the MPOETC Certification Examination? <input type="checkbox"/> No <input type="checkbox"/> Yes						
Do you currently possess MPOETC Certification? <input type="checkbox"/> No <input type="checkbox"/> Yes						
MPOETC Certification Number:						
Do you possess a valid driver's license? <input type="checkbox"/> No <input type="checkbox"/> Yes; if yes, list the:						
State:			Number:			
List any traffic violations or accidents you have had in the past five (5) years:						

Please indicate your interest in:

Full-time employment Part-time employment Both Sworn officer Civilian employee

Education

<i>Institution</i>	<i>Course of Study</i>	<i>Dates Attended</i>	<i>Did you graduate</i>	<i>Degree</i>

Military Service

<i>Branch</i>	<i>Type of Discharge</i>	<i>Dates of Service</i>	<i>Date of Discharge</i>	<i>Specialty</i>

References: Please provide three reliable persons other than relatives or past or present employers or supervisors or members of the Somerset Borough Police Department who know you well enough to provide information about you.

<i>Name</i>	<i>Telephone</i>	<i>Email</i>	<i>Relationship to you</i>	<i>Job title/position</i>

What prompts you to make application to this department?

Have you ever been fired? No Yes; if yes, please explain the circumstances.

Employment History: List your employment history, beginning with the most recent

<i>Employer</i>	<i>Address</i>	<i>Dates Employed</i>	<i>Position/ Reason for Leaving</i>

<i>Contact Person</i>	<i>Address</i>	<i>Phone(s)</i>	<i>May we contact them?</i>

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Comments: Use this section to continue or expound upon any of your responses.

Upon Completion of this application, please return it by US Mail to:

**Somerset Borough Police
ATTN: Police Application
340 W. Union St.
Somerset, PA 15501**