



Fort Valley Police Department

Basic Application for Employment

APPLICANT INFORMATION			
Last Name	First	M.I.	Date of Birth
Street Address			Apt./ Unit #
City	State	Zip	
Phone	Email		
Date Available	Social Security Number	Desired Salary	
Position Applied For	<input type="checkbox"/> Police		
Are you a United States Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, are you authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you previously worked for the City of Fort Valley <input type="checkbox"/> Yes <input type="checkbox"/> No		If so, when?	
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain			

EDUCATION			
High School		Address	
From	To	Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree
College		Address	
From	To	Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree
Other		Address	
From	To	Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree

REFERENCES	
<i>Please list three professional references</i>	
Name	Relationship
Company	Phone
Address	
Name	Relationship
Company	Phone
Address	
Name	Relationship
Company	Phone
Address	

PREVIOUS EMPLOYMENT		
Company		Phone
Address		Supervisor
Job Title	Starting Salary	Ending Salary
From	To	Reason for Leaving
May we contact your previous employer <input type="checkbox"/> Yes <input type="checkbox"/> No		
Company		Phone
Address		Supervisor
Job Title	Starting Salary	Ending Salary
From	To	Reason for Leaving
May we contact your previous employer <input type="checkbox"/> Yes <input type="checkbox"/> No		
Company		Phone
Address		Supervisor
Job Title	Starting Salary	Ending Salary
From	To	Reason for Leaving
May we contact your previous employer <input type="checkbox"/> Yes <input type="checkbox"/> No		

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If Other the Honorable , explain	
A copy of your DD-214 is required if you are prior military service.	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge. I understand if I appear to meet the minimum qualifications for the position being applied for I will be sent an additional background investigation packet. If this application leads to employment, I understand that false or misleading information in my application or interview may result in release.	
Signature	Date

How did you hear about the position you're applying for? _____

*Please attach a copy of the following:

___ Social Security Card

___ Driver's License

Are you P.O.S.T. certified? Yes No

If yes, what state. _____

Post Certification #: _____