

Employment Desired
Full-time _____ Part-time_

APPLICATION FOR EMPLOYMENT UDALL POLICE DEPARTMENT 110 S. MAIN, UDALL, KS. 67146 (620)782-3322 Fax (620)782-3320

Reserve_

Ever applied here before			How did	d you learn a	about the	opening			
General Information									
Name (Last, First, Middle Initial)				Home Phone)		Cell Ph	none	
Address	City			State	Zip		County	,	
DL#	DL State	Socia	Security	No.	Email				
Previous Address	City			State		Zip		From	
						Т	ō		
Previous Address	City			State	Zip	F	rom		
						Т	ō		
Previous Address	City			State	Zip	F	rom		
					1.2	Т	0		
Special Questions									
Have you been convicted of a felony or a misc	demeanor	within	the pas	t 5 years? `	Yes	No	_ If so	please describe:	
		-					_		
Are you 21 years or older? Date	of birth	/	1	Place of	birth				
Are you prevented from lawfully becoming em	ployed in	the U.	S.A.? Ye	esNo_					
This information is required for a bona fide occupational quage discrimination in employment act of 1967 prohibits disage. you will not be denied employment solely because of	crimination o	n the ba	sis of age	with respect to i	ndividuals wl	ho are at le	ast 40 bu	it less than 70 years of	
Education									
Did you graduate from high school or receive	a GED?	Yes	No_						
School Name Grammer, High School, College Address			Phone	No. of (Sem.	Maj	or	Did you graduate	
		-							
					1			[B] (#1)	

Date you can start

Salary Desired

Employment History Employer Phone# Supervisor Type of Business Address Your Job Title Dates Employed (indicate months & years) Average Hours Worked Per From: To: Week Duties: Monthly Salary Reason for Leaving Employer Phone# Supervisor Type of Business Address Your Job Title Dates Employed (indicate months & years) Average Hours Worked Per To: Week Duties: Monthly Salary Reason for Leaving Employer Phone# Supervisor Type of Business Address Your Job Title Dates Employed (indicate months & years) Average Hours Worked Per From: To: Week Duties: Monthly Salary Reason for Leaving Employer Address Phone# From: To: Supervisor Employer Address Phone# From: To: Supervisor Employer Address Phone# From: To: Supervisor Employer Address Phone# From: To: Supervisor

0.00

	2. What do you believe the role of a Police Officer involves?	4
Į		
ì	B. As a Police Officer, what stressful situations do you think you may have to encounter? How do you think you may deal with these?	
1		
1		
,	4. What do you consider some of the current policing issues affecting the City Of Udall might be?	
-		
- 1		

x 18 3 8 x

What are some of the things you would do to				5

bbies & Interests Please describ	be your interests, activities & hobbies.			
			39	
ferences give the names of thr	EEE PERSONS NOT RELATED TO YOU	J, WHOM YOU HAVE KNOWN	I AT LEAST ONE YEA	
ferences give the names of the Name	EEE PERSONS NOT RELATED TO YOU Address	J, WHOM YOU HAVE KNOWN Business	I AT LEAST ONE YEA Phone	R. Years Acquainte
		I V		Years
		I V		Years
		I V		Years
Name		I V		Years
Name ysical Record you have any physical limitations	Address that preclude you from perform	Business ing any work for which yo	Phone Du are being consi	Years Acquaint
Name ysical Record you have any physical limitations	Address that preclude you from perform	Business ing any work for which yo	Phone Du are being consi	Years Acquaint
Name ysical Record you have any physical limitations	Address that preclude you from perform	Business ing any work for which yo	Phone Du are being consi	Years Acquaint
ysical Record you have any physical limitations s no if yes, what can be	Address that preclude you from perform	Business ing any work for which yo	Phone Du are being consi	Years Acquaint
ysical Record you have any physical limitations if yes, what can be	Address that preclude you from perform perform to accommodate your life to accommodate your lif	Business ing any work for which yo	Phone ou are being consider:	Years Acquaint

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND

RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.