Township of Lower Salford, Montgomery County 379 Main Street, Harleysville PA 19438 e-mail: police@lowersalfordtownship.org

Application for Employment as a Probationary Police Officer

<u>Instructions</u>: Before completing this form, carefully read all instructions. Any application that is received in an incomplete or incorrect condition may be eliminated from consideration. A new application is required for each hiring cycle.

The deadline for application submission is 4:00 pm on Thursday, September 28, 2023.

A select number of applicants will be invited to our interview process.

- 1. Do not leave blank spaces. If a particular question cannot be answered, or has no application, enter N/A in the space provided.
- 2. The accuracy and legibility of the information provided, and the overall appearance of your application will all be considered in determining your qualifications for employment with our police department.
- 3. If you require additional space to answer any of the questions, use a separate $8 \frac{1}{2} \times 11$ sheet of paper and clearly indicate which question you are answering.
- 4. Attach photocopies of the following documents at the end of this application:
 - Military discharge certificate (DD-214), if applicable
 - Police academy diploma and final grade report, if applicable
 - MPOETC certification card, if applicable
 - High School diploma, or GED certificate, and corresponding transcripts
 - College diploma and transcripts, if applicable.

How did you hear about this position (be specific)?

| Section 1 – Personal Information | | | |
|----------------------------------|-------------------------------|--------------|--|
| Name: Last | First | Middle | |
| Street address: | | | |
| City/State/Zip | | | |
| Phone: (home) | (cell) | (work) | |
| Email: | | | |
| Will you be at least 21 years | of age by September 28, 2023? | []Yes []No | |
| | | | |

| Section 2 – Employment History List, in chronological order, each and every place of employment, including part-time employment, starting with your current or most recent employment. List periods of unemployment between jobs in the proper sequence. Use additional pages if necessary. | | | |
|---|-------------------|--|--|
| (1) Current or most recent employer: | | | |
| Address: | | | |
| Phone: | Type of business: | | |
| Position: | Start date: | | |
| Name of supervisor: | Salary: | | |
| | | | |
| (2) Previous employer: | | | |
| Address: | | | |
| Phone: | Type of business: | | |
| Position: | Start date: | | |
| Name of supervisor: | End date: | | |
| Reason for leaving: | Salary: | | |
| | | | |
| (3) Previous employer: | | | |
| Address: | | | |
| Phone: | Type of business: | | |
| Position: | Start date: | | |
| Name of supervisor: End date: | | | |
| Reason for leaving: Salary: | | | |
| | | | |
| (4) Previous employer: | | | |
| Address: | | | |
| Phone: | Type of business: | | |
| Position: | Start date: | | |
| Name of supervisor: End date: | | | |
| Reason for leaving: Salary: | | | |
| | | | |
| (5) Previous employer: | | | |
| Address: | | | |
| Phone: | Type of business: | | |
| Position: | Start date: | | |
| Name of supervisor: | End date: | | |
| Reason for leaving: Salary: | | | |

| Have you ever been discharged or asked to resign from employment? |
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| No [] Yes – explain: |
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| Vere you ever subject to any disciplinary action during any employment? |
|] No [] Yes – explain: |
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| | al Background (Attach Transcripts) Middle/Junior and High Schools attended. | |
|------------------------|--|--|
| School Name | · · · · · · · · · · · · · · · · · · · | |
| Address | | |
| Years Completed: | Phone # | |
| School Name | | |
| Address | | |
| Years Completed: | Phone # | |
| School Name | | |
| Address | | |
| Years Completed: | Phone # | |
| School Name | | |
| Address | | |
| Years Completed: | Phone # | |
| List all Colleges, Uni | versities and Trade Schools attended. (Attach Transcripts) | |
| Institution Name | | |
| Address | | |
| Years Completed: | Phone # | |
| Degree Received | Number of credits: | |
| Institution Name | | |
| Address | | |
| Years Completed: | Phone # | |
| Degree Received | Number of credits: | |
| Institution Name | | |
| Address | | |
| Years Completed: | Phone # | |
| Degree Received | Number of credits: | |

| Section 4. Munic | ipal Police Training | (Attach Transcripts) | | |
|-------------------|----------------------|--|----------------------|--------------------------------------|
| Institution Name | | | | |
| Address | | | | - |
| Dates Attended: | From | To Ph | one # | _ |
| Certification Num | ber Received (attach | copy) | | |
| Liet EVERY law | enforcement agency | that you have applied to for | employment (attach a | a list if necessary): |
| | ement Agency | Date(s) of Application(s) | | f Application |
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| If you answered y | | other law enforcement agencion, provide details on which | | Yes [] No [] ency disqualified you |

| Section 5. Police re | lated skills and/or traini | ng | |
|-----------------------|---|-----------------------------|------------------------|
| Fire and/or Medical | | 0 | |
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| Computer capabilities | es: | | |
| | | | |
| Foreign languages: | | | |
| 1 oreign languages. | | | |
| Firearms: | | | |
| rifearilis. | | | |
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| Other: | | | |
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| | | | |
| | Operator Information mber: | | Expiration Date: |
| Bilvers Electise ival | | State of Issuance | Expiration Bate. |
| Automobile Insuran | ce Company: | Policy Numb | oer: |
| Company Address: | | | |
| | | | |
| Insurance Agent's N | lame: | Phone Num | ber: |
| Agent's Address: | | | |
| Hove you aver had s | liganca in another state of | r aquatav 9 Vaq [] Na [| 1 |
| - | | r country? Yes [] No [| J |
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| Have you ever had a | a license suspended or revo | oked? Yes [] No [] | |
| If yes, explain: | | | |
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| | ions (excluding parking ti Violation | ckets) or check block: NONE | |
| Date of Violation | violation | Disposition | Police Agency Involved |
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| ate of Accident | Location | Police A | gency Involved |
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| ection 7. Criminal His | tory Information | | |
| ave you ever been char | ged with a Summary, Mis | sdemeanor, Felony, or Greater | Criminal Violation? |
| es [] No [] | | | |
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| | | | |
| Yes, List Date and Typ | be of Violation, Court of . | Jurisdiction, and Date of Convi | ction, if applicable. |
| OTE: A conviction wil | l not automatically disqua | alify you from employment. | |
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| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| Date of Violation | Violation | Court of Jurisdiction | Date of Conviction |
| | | Court of Jurisdiction Yes [] No [] | Date of Conviction |
| Iave you ever had a reco | | Yes [] No [] | Date of Conviction |
| Date of Violation Have you ever had a reco | ord expunged? | Yes [] No [] | Date of Conviction |
| Have you ever had a reco | ord expunged? | Yes [] No [] | Date of Conviction |
| Have you ever had a reco | ord expunged? | Yes [] No [] | Date of Conviction |
| Have you ever had a reco | ord expunged? | Yes [] No [] | |
| Iave you ever had a reco | ord expunged? | Yes [] No [] by obtaining, creating, or making | g use of any identification |
| Iave you ever had a reco | ord expunged? | Yes [] No [] | g use of any identification |
| Have you ever had a reco | ord expunged? | Yes [] No [] by obtaining, creating, or making | g use of any identification |
| Iave you ever had a reco | ord expunged? | Yes [] No [] by obtaining, creating, or making | g use of any identification |
| Iave you ever had a reco | ord expunged? | Yes [] No [] by obtaining, creating, or making | g use of any identification |
| Iave you ever had a reco | ord expunged? | Yes [] No [] by obtaining, creating, or making | g use of any identification |
| Have you ever had a reco | ord expunged? | Yes [] No [] by obtaining, creating, or making | g use of any identification |

| While vacationing, working or living outside of the United States, have you ever been detained, questioned, fined, charged or convicted by any foreign law enforcement agency? Yes [] No [] If yes, explain: |
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| Have you ever been a subject of a Protection from Abuse Order? Yes [] No [] If yes, explain: |
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| Have you ever been a subject of a Child Protective Services Investigation? Yes [] No [] If yes, explain: |
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| Section 8. Drug Use |
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| Have you tried, used, or experimented with any Illegal or Controlled Drugs? Yes [] No [] If yes, provide details, to include frequency of use: |
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| Have you ever sold or delivered any Illegal or Controlled Drugs? Yes [] No [] If yes, provide details, to include frequency: |
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| Section 9. Military Experience |
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| Have you ever served in an active Military Organization of the United States or any Foreign Government? Yes [] No [] |
| If Yes, complete the following: |
| Branch of service |
| Date Entered Date Separated |
| Selective Service # Highest Rank Attained |
| Type of Discharge (attach copy of DD-214 papers): |
| Remaining Obligation, if any |
| Are you now or were you ever a member of a Military Reserve or Guard organization of the United States or any Foreign Government? Yes [] No [] |
| If Yes, complete the following: |
| Branch of service |
| Complete Unit Address |
| Unit telephone # |
| Supervising Officer's Name |
| Dates of Obligation: From To |
| Were you ever the subject of an investigation that may or may not have resulted in nonjudicial punishment? Yes [] No [] |
| If Yes, explain: |
| |
| Were you ever court-martialed? Yes [] No [] If Yes, explain: |
| Have you ever had a federal/military security clearance suspended, denied or revoked? Yes [] No [] If yes, explain: |

| Se | ction 10. Subversive Activity |
|----|--|
| 1. | Are you now, or have you ever been, a member of, associated with, or affiliated with any subversive organization, association, movement, or group, or have you associated with any individuals, including relatives, whom you have reason to believe are or have been members of any such organization or group which advocates the overthrow of our constitutional form of government, or which seeks to alter the form of the state or federal government by unconstitutional or unlawful means? |
| | Yes [] No [] |
| 2. | Are you now, or have you ever been, a member of, associated with, or affiliated with any organized crime group or family, or have you associated with any individuals, including relatives, whom you have reason to believe are or have been members of any such organization or group? Yes [] No [] |
| If | Yes to any of above, explain: |
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| Se | ction 11. Optional Comments or Information |
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| Section 12. Handwritten Responses |
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| The following questions must be answered in your own handwriting; DO NOT TYPE! |
| 1. Why do you want to be a police officer? |
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| 2. Why do you want to work for Lower Salford Township? |
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| 3. Describe any training, experience, or personal abilities that you possess that you believe will make you the best candidate for this position. Include any positions that you held that required the exercise of authority. |
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VERIFICATION OF ACCURACY OF INFORMATION

| Ι, _ | , verify the following: |
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| | (print name of applicant) |
| 1. | That all of the foregoing information is true and correct to the best of my knowledge, and that there are no willful misrepresentations in, or falsifications of, any statements and/or answers herein; |
| 2. | That I am aware that, should subsequent investigation disclose any such misrepresentation and/or falsification, this application will be rejected and I will forfeit my opportunity for employment with the Township of Lower Salford now and at any future time; |
| 3. | That I am aware that under the Pennsylvania Crimes Code, Sections 4903 and 4904, dealing with False Swearing and Unsworn Falsification, it is a criminal offense to provide false information and I am aware that I may be charged with such violations of law if investigation discloses any such misrepresentation or falsification; |
| 4. | That, if I should be hired by Lower Salford Township, and subsequent investigation should disclose any such misrepresentation or falsification, that I may be subject to immediate termination of employment; |
| 5. | And that I am responsible for notifying Lower Salford Township of any change of address or other pertinent information contained within this application for employment. |
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| Signature of applicant Date | |
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NOTICE

Lower Salford Township considers applicants for all positions without regard for race, color, religion, gender, creed, national origin, age, marital status, sexual orientation, ancestry, handicap, disability, or any other legally protected status.