



201 East Washington Street, Alexandria, IN 46001 / Business: (765) 724-3222 Fax: (765)724-5003

Position for which you	are applying :	FULL P	PART A	S IEEDED	Date:
APPLICANTS INFORMATION					
Last Name	First	Middle		Date Of Birth	:
Maiden/Alias Names :				SSN :	
Full Address :				3314 .	
		PHONE :			
EMAIL:	ALTER	NATE PHONE :			
CHRRENT					
CURRENT	EMPLOYMENT ST	AIUS			
Present Position:				Salary :	
Employer's Name :			Emplo	yer's Phone:	
Full Address :				May we contac	ct : YES NO
Job Description :					
Employment Dates :	From: To:				
Reason for Leaving :					
EMPLOYM	1ENT HISTORY				
	our time applying for a position with the City on listed on a resume you include with this a				
mormati	Please list chronologically the last 6 years o				
Present Position:				Salary :	
Employer's Name :			Emplo	yer's Phone:	
Full Address :				May we contac	ct : YES NO
Job Description :					
Employment Dates :	From: To:				
Reason for Leaving :					
3					

EMPLOYN	MENT HISTORY - CONTINUED			
Present Position:		Salary :		
Employer's Name :	Employe	er's Phone :		
Full Address :	n	May we contact:	: YES	NO
Job Description :				
Employment Dates :	From: To:			
Reason for Leaving:	:			
Present Position :		Calami		
	Facility	Salary :		
Employer's Name :		er's Phone:		
Full Address :	N. C.	May we contact :	YES	NO
Job Description :				
Employment Dates :	From: To:			
Reason for Leaving:	:			
EDUCATI	ION			
School :		Course of Study	' :	
Address :		Course of Study	, .	
School:		Course of Study	•	
Address :				
		Course of Study	· :	
School:				
Address:				
LAW ENF	FORCEMENT EXPERIENCE			
YES NO	Have you ever been employed as a sworn or merit police officer by a law enforcement agency? FULL RESERVE / TIME VOLUNTEER			
YES NO	Did you complete a state certified law enforcement academy?			
If yes,		ı :		
	Date law enforcement training was completed :			

AW ENFORCEMENT EXPERIENCE - CONTINUED YES NO Did you receive a certification upon completion of training? If yes, Numbers of basic training weeks: Total training hours: Date law enforcement training was completed: List Full Time or Reserve Reason for leaving **Agency Dates** and highest rank held From To YES NO Are you eligible for re-employment? If no, explain fully on a separate sheet. List any specialty training you have received. YES NO Were you ever disciplined? If yes, explain fully on a separate sheet. ΜI ITARY HISTORY AND STATUS YES NO Have you ever served in the military on active duty? Include initial active duty training with the National Guard and the Reserves. If yes, attach a copy of your DD214 Highest rank attained and Type of discharge Military **Dates Branch** rank at separation From То YES NO Are you eligible to re-enlist? If not, explain fully on a separate sheet. YES NO Are you currently on active duty (full-time)? What is your expected end-of-service obligation date? List any citations and award received. YES NO Were you ever disciplined (court martial, article 15, captain's mast, etc.) while on duty? If yes, explain fully on a separate sheet.

QUALIFICATIONS					
YES NO	O Is there anything that will preve without, reasonable accommodal lf yes, please explain.	nt you from performing the essential functi ations?	ons of this job, with or		
What experien	ces do you have from past employment	that would qualify you for this position?			
What experien	ces do you have that show you can work	well with people?			
ADDIT	TIONAL INFORMATI	ON			
	other employment, training, special ski your qualifications that were not mention	lls, or autobiographical information that wi oned above.	ll assist us arriving at an		
CHAR	ACTER REFERENCE	S			
Please list three (3) professional and three (3) personal references.					
Professional Reference	Name	Address	Contact Number		
Reference					
Personal References	Name	Address	Contact Number		

REQUEST FOR BACKGROUND INFORMATION

Dear Applicant:

Jobs with the City of Alexandria involve contact with people. We ask that you complete the questions below to help us evaluate your suitability to work with people. All Applicants for employment are expected to provide us with background information. You are not being singled out from other applicants for closer inspection. This insert is part of the application. Any misrepresentation or omission of fact may be grounds for disqualification from further consideration or termination from employment regardless of when the misrepresentation or omission is discovered.

Conviction of a crime or any affirmative answer provided by you on this is not an automatic bar to employment. The City of Alexandria will consider the nature of any conviction or alleged underlying an affirmative response, the date of the alleged conduct in question, your intervening conduct, the relationship between an offense or alleged conduct underlying an affirmative response, and the position for which you are applying.

сэропэс,	arra trie pos	sition for which you are applying.			
YES	NO	If you are now working, is your conduct as an employee or the quality of your work the focus of any investigation by your current employer?			
	If yes,	describe below.			
YES	NO	Have you ever resigned from a job after being disciplined by your employer or after being offered the opportunity to resign rather than being terminated?			
	If yes,	describe below			
YES	NO	Have you ever been investigated for, c	harged with. plead guilty or "no cont	est" to any crime?	
	If yes,				
	, 52,		-1	-	
Date		Location	Charge	Fine or Sentence	
YES	NO	Have you ever been charged with a crime, other than minor traffic offenses, where the court has deferred further proceedings without entering a finding of guilt, placed you on probation, in a public service program and/or an educational program?			
	If yes,	describe below.			
Date		Location	Charge	Fine or Sentence	
YES	NO	Have you ever been arrested for or co	nvicted of a crime that the Court has	NOT expunged?	

If yes, please explain fully on a separate sheet of paper.

REQUEST FOR BACKGROUND INFORMATION - CONTIUNED YES NO Have you ever been or are you currently involved as a plaintiff, defendant, petitioner or respondent in ay civil court case? please explain fully on a separate sheet of paper. If yes, YES NO Do you currently possess a handgun permit? YES NO Have youever been denied a handgun permit or had a handgun permit revoked? please explain why. YES NO Do you currently possess a valid driver license? License State **Expiration Date:** License Number: YES NO Has your driver's license ever been suspended/revoked? If yes, what state(s): Reason for the suspension(s): YES NO As a diver, have you been involved in any traffic accidents in the last five years? Location **Description Date** Please provide a list of cities and states where you have resided in the past ten years. I affirm that all information contained in this application is true and accurate to the best of my knowledge. If I have given any information on this application, shown to be omitted, untrue, or altered on this application now or in the future, I understand I will be subject to termination from my position.

Date

Signature

CHECK APPLICATION CAREFULLY - BE CERTAIN ALL ITEMS ARE POMPLETE BEFORE SUBMITTING OR MAILING.

Upload photo as a separate attachment when emailing your application or securely affix photo

2.5"x2.5"

Photograph to be front view, head, and shoulders, 2.5" square, and taken within the past six months.

Other photographs are not acceptable.

Be sure all required items are included with the application

- Birth certificate (copy only)
- High School, GED, and, if applicable, college transcript (grade reports are not accepted)
- Military DD214 (if applicable), DD217 (if active duty)
 - If active duty, a letter of endorsement from a military commander
 - Any supporting letters of commendations from a military personnel file
 - Copies of specialized training certificates and awards
- · Previous law enforcement documentation
 - Copy of law enforcement academy certificate
 - Copies of commendations and awards
- Photograph 2.5"x2.5" head and shoulders
- Provide a copy of your driver's license.

This application will not be considered if all information is not complete and all required documents are not attached

Applications should be emailed to: records@cityofalexandria.in.gov

- An Equal Opportunity/Affirmative Action Employer Complying with all provisions of the Americans with Disabilities Act



PUBLIC SAFETY APPLICATION



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CITY OF ALEXANDRIA ALEXANDRIA POLICE DEPARTMENT AUTHORIZATION AND RELEASE

I authorize the administration of the City of Alexandria to check my employment history, including without limitation, reference check, and to seek release of investigatory information, including a "limited criminal history", possessed by any private or public employees or local, state, or federal agencies to provide the City of Alexandria any information they may need. I will cooperate to the extent necessary to obtain the release of the information.

I expressly waive in connection with any request for, or provision of such information, any claims, causes or action, without limitation, defamation, infliction or emotional distress, invasion or privacy, or interference with contractual relations that I might otherwise have against the City of Alexandria, its officials, employees, trustees or agents, or against any provider of such information.

I HAVE READ THIS AUTHORIZATION AND RELEASE OF ALL CLAIMS, AND I EXPRESSLY AGREE TO THE TERMS SET OUT HERIN.

Please print your name	:		
Signature :		Date : ———	