BELLEVILLE POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT

The City of Belleville is an equal opportunity employer and shall consider all qualified applicants for all positions without regard to race, color, sex, religion, national origin, age, height, weight, marital status, veteran status, handicap, or any other protected category.

YOU MUST ANSWER ALL QUESTIONS COMPLETELY AND TRUTHFULLY. FAILURE TO DO SO WILL RESULT IN RE-JECTION OF YOUR APPLICATION (YOU WILL NOT BE CONSIDERED FOR EMPLOYMENT), OR, IF NOT DISCOVERED UNTIL A LATER DATE, MAY RESULT IN DISCIPLINE OR DISCHARGE FROM EMPLOYMENT

Position Applied for: _____

Name _____
Last First Middle

Address _____
Street City State Zip Code

Telephone _____ Cell _____

Email _____

If you are applying for a position for which driving is a job requirement, do you presently have a valid Michigan driver's license? **Type of license**: ☐ Operator's license ☐ Commercial Driver's license (CDL)
Driver's License No. _____
(A license check will be conducted for applicants for positions requiring a current driver's license)
Are you a relative to any City of Belleville elected official or full-time employee?
Yes ☐ No ☐

If Yes: _____ _____
Name **Relationship**

Are you under 18 years of age? (If yes, attach work permit) Are	Yes ☐	No ☐
you currently working?	Yes ☐	No ☐
Are you on lay-off?	Yes ☐	No ☐
If yes, are you subject to recall?	Yes ☐	No ☐
Will you submit to a drug screening test?	Yes ☐	No ☐
Have you ever been employed by the City of Belleville?	Yes ☐	No ☐

If Yes: _____ _____ _____
Position Department Dates

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? Yes ☐ No ☐
(Proof of citizenship or immigration status is required upon employment)
Have you ever been fired? Yes ☐ No ☐
If Yes, give date, where you worked and explanation: _____

_____

Have you ever been convicted of a felony? Yes ☐ No ☐
If Yes, completely describe including location and date:

_____

NOTE: A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness and nature of violation, and rehabilitation will be considered.

Are you capable of performing with or without reasonable accommodation (special assistance, equipment or other help), the activities involved in the job or occupation for which you have applied? Yes ☐ No ☐

EDUCATION

	High School	Vocational/ Technical	College	Graduate
School Name, City/State				
Did you graduate? If not, number of credit hours completed)	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Degree/Certificate				
Major/Minor				

Describe any specialized training, apprenticeships, internships, skills, licenses, certificates, and extra-curricular activities that pertain to the position(s) for which you are applying.

_____

_____

_____

List professional, trade, business group memberships and offices held and volunteer work excluding groups the name and character of which indicate race, color, sex, religion, national origin, age, height, weight, marital status, veteran status, handicap, or any other protected class:

_____

_____

_____

REFERENCES

(Do not include relatives or former employers):

Name Address Telephone

_____

_____

_____

MILITARY SERVICE RECORD

Have you had any experience in the Armed Forces of the United States of America or in a State National Guard that is directly related to the position for which you are applying? Yes ☐ No ☐

If Yes, what branch?_____ Rank at discharge_____

Date of discharge_____ Were you honorably discharged? Yes ☐ No ☐

NOTE: A dishonorable discharge from the military will not necessarily be a bar to employment.

EMPLOYMENT HISTORY

List each job held within the last 20 years. Start with your present or last job first. **NOTE:** If more space is needed copy this page first.

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
Job Title	[redacted]		
Supervisor			
Reason(s) for Leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
Job Title	[redacted]		
Supervisor			
Reason(s) for Leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
Job Title	[redacted]		
Supervisor			
Reason(s) for Leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone			
Job Title	[redacted]		
Supervisor			
Reason(s) for Leaving			

WAIVERS AND ACKOWLEDGMENTS

Please read carefully before signing

1. I authorize the references and current and former employers listed in this application to give you any and all information concerning my current and previous employment and any pertinent information they may have, including disclosure of any disciplinary reports (even if more than four years old), and release all parties from any liability for any damages that may result from furnishing same to you. I further authorize you to release such information when such information may be requested by any prospective or subsequent employers without the need to provide me any notice of such disclosure.

2. I understand that the use of this application does not indicate that there are positions available, nor does it imply or create an employment contract. I understand that the only employment contracts are those specifically authorized by the City of Belleville management that have been reduced to writing and have been executed by both the employee and an authorized representative of the City of Belleville. Accordingly, I understand that no employment contract, either expressed or implied, for any period, is created hereby should the City of Belleville hire me.

3. If hired, I understand that my employment is at-will (just cause for union and/or civil service employees), and can be terminated at any time, with or without notice, for any reason at the option of either City of Belleville or me. Should the City of Belleville hire me, I agree to observe all of the City of Belleville's policies, practices, and procedures currently in existence and new and revised ones that may be issued in the future.

4. I understand that any employment offer is conditional upon the result of the drug screening test, post offer pre-employment medical examination, and background investigation (when applicable based on the position sought).

5. I understand that if I have a physical, mental, or other impairment that would interfere with my ability to perform in a position but that may be accommodated by, for instance, the purchase of equipment or devices, the provision of readers or interpreters, or the restructuring or altering of work schedules, the Michigan Persons With Disabilities Civil Rights Act requires me to notify the Employer's Personnel Department in writing of need for accommodation within 182 days after I knew or should reasonably have known that the accommodation was needed.

6. I agree that any lawsuit against the City of Belleville arising out of my employment or termination of employment, including but not limited to, claims arising under the State or Federal Civil Rights statutes, must be filed within six months of the event giving rise to claims or be forever barred. I waive any limitations period to the contrary. For circumstances in which the statutory period of limitations is less than six months, the statutory limit will apply.

I HAVE READ, UNDERSTAND, AND AGREE TO THE TERMS OF EACH OF THE ABOVE SIX (6) INDIVIDUAL STATEMENTS, AS INDICATED ABOVE.

SIGNATURE _____ DATE

_____

MICHIGAN COMMISSION ON LAW ENFORCEMENT STANDARDS
927 Centennial Way, Lansing, MI 48913

CANDIDATE'S PERSONAL HISTORY STATEMENT AND AFFIDAVIT

Instructions to the Applicant:

The Michigan Commission on Law Enforcement Standards (Commission) requires all candidates seeking law enforcement licensing, admittance to a basic law enforcement training academy, or admittance to the Recognition of Prior Basic Training and Experience (RPTE) program comply with the Commission's selection and employment standards. Candidates must maintain compliance with the selection and employment standards throughout the training period and at the time of initial licensing or reactivation of their law enforcement license.

The State of Michigan Administrative Code (Rule 28.14203(e)) requires that candidates "Possess good moral character as determined by a favorable comprehensive background investigation covering school and employment records, home environment, and personal traits and integrity. Consideration will be given to a history of, and circumstances pertaining to, having been a respondent to a restraining or personal protection order. Consideration shall also be given to all law violations, including traffic and conservation law convictions as indicating a lack of good moral character."

The information you provide in this personal history statement will be used to evaluate and determine your suitability for the position of law enforcement officer. The information you provide in this document will be discussed with you. If you are an academy recruit you will be required to sign and have this affidavit notarized in support of the provided information prior to the start of the academy.

Please read this questionnaire carefully and complete it accurately and thoroughly. Return the completed personal history statement with your application to a basic law enforcement training program, law enforcement agency, or the Commission as appropriate. **When completing this personal history statement, please keep in mind that:**

1. The completion of this form is mandatory,

2. The PHSA must be downloaded, opened in the Adobe application and completed electronically. Once completed electronically, the PHSA can be printed for signatures and to be notarized. Handwritten PHSA will no longer be accepted.

3. All statements are subject to verification, and

4. In accordance with R 28.14601 through 28.14609, deliberately making false statements, committing fraud, or failing to disclose requested information are grounds for denying law enforcement licensure, enrollment into or dismissal from a basic law enforcement training program, and/or the RPTE program. Further sanctions by the Commission may be imposed including a two-year ineligibility period from applying for enrollment in any basic law enforcement training program, or permanently denying your application. Subsequent license revocation may also be imposed for making a materially false statement or committing fraud in the application process.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

Required Attachments

To complete your background the following documents are required to be attached to your questionnaire:

1. High school diploma, GED, transcripts, or other proof of high school education. Attainment of an associate or baccalaureate degree shall be evidence of having met this standard.

2. For pre-service regional and pre-service college recruits, official college or university transcripts showing a degree was conferred. Official transcripts must contain the name of the institution, confirmation the degree was awarded, and it must include the registrar's signature. (Note: The Commission only accepts official transcripts for review.)

   If a degree will be awarded following completion of the basic law enforcement training program, a letter from the college or university's registrar's office confirming that you will have completed all degree requirements may be sufficient, contact a Commission Field Representative for further guidance. An official copy of the transcript must be sent to the Commission upon conferral of the degree.

3. Copy of your military discharge (DD-214) if applicable. This shall be the long form DD-214, which is the unredacted, undeleted, unedited version. If you were the subject of any disciplinary action, administrative investigations, hearings, or poor performance evaluations while in the military, a copy of all related documentation is required.

4. Proof of U.S. citizenship (birth certificate, US passport, naturalization certificate, or certificate of citizenship). Photocopies or electronic copies are acceptable.

5. Any and all police reports or documents detailing your contacts with law enforcement.

6. Any Register of Actions for your court records.

It is to your advantage to respond openly. Any negative factor(s) in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence, and its degree of relevance to the job of a law enforcement officer.

Do not leave any question or response blank. If a question does not apply mark the space "Not Applicable" or "N/A."

I, _____ have read and understand these instructions prior to completing the following Personal History Statement and Affidavit.

Signature _____ **Date** _____

AUTHORITY:	1965 PA 203; 2017 PA 128
COMPLIANCE:	Voluntary
PENALTY:	No License Activation/ Employment/ Academy Enrollment

08/2025

Michigan Commission on Law Enforcement Standards
927 Centennial Way, Lansing, MI 48913
Email: MSP-MCOLES@Michigan.Gov
Main Line: 517-636-7864

WAIVER & AUTHORIZATION FOR RELEASE OF INFORMATION

Sections A & B to be completed by all applicants (non-licensed, currently licensed, and previously licensed law enforcement officers)
Section C to be completed by all current or previously licensed law enforcement officers.

Section A *– This form shall be completed electronically with your responses typed into the appropriate spaces.*

Last Name:	First Name:	Middle Name:	Suffix (Jr, Sr, III):	
Other Name(s) Known By (Including Aliases, by Marriage, or Legal Name Change)				
Social Security No.*:	Date of Birth:	Phone No.:	Gender‡:	Race‡:
Residence Address (Street, City, State, Zip):			Highest Degree:	
Drivers License No.:	Issuing State:	E-Mail Address:		

Section B *– Authorization for release of information:*

I hereby authorize any individual, agency or organization to furnish to the Michigan Commission on Law Enforcement Standards, _____[1], their representatives and/or agents (including, but not limited to, academies or contractors) any and all information pertaining to my background and ability to comply with the standards for selection, employment, training and licensing as a law enforcement officer. Such information includes, but is not necessarily limited to: employment, criminal, academic, military, and personal histories; academic attendance and driving records; and medical records (includes medical/psychological, including diagnosis and prognosis, if any).

I hereby authorize any individual, agency or organization to release such information upon request. This authorization is executed with the full knowledge and understanding that the information is for official use by the Michigan Commission on Law Enforcement Standards and the _____[1].

Further, I hereby authorize the Michigan Commission on Law Enforcement Standards to release any and all records collected pursuant to this authorization to any individual, agency or organization for the legitimate purposes of fulfilling the Commission's statutory and administrative objectives.

I hereby release any individual, agency or organization, including its officers, employees and related personnel, both individually and collectively, from any and all damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this Authorization for Release of Information, or any attempt to comply with it.

This Authorization shall continue in effect until revoked by me in writing. A completed and signed photocopy or electronic copy of this Authorization shall have the same force as the original.

Applicant Signature:	Today's Date:

[1] Type or print the name of the hiring law enforcement agency or the enrolling academy.

Section C to be completed by all current or previously licensed law enforcement officers only

Section C – Former Michigan employing law enforcement agency authorization:

I hereby authorize any and all of my former employing Michigan law enforcement agencies to provide the _____[1], with a copy of the record regarding the reason or reasons for, and circumstances surrounding, my separation of service created by any former employing law enforcement agency or agencies. ***(Under 2017 PA 128, MCL 28.561, et seq. a hiring law enforcement agency shall not hire a law enforcement officer unless the hiring law enforcement agency receives the record regarding the reason or reasons for, and circumstances surrounding, a separation of service from each prior employing law enforcement agency.)***

Applicant Signature:	Today's Date:

[1] Type or print the name of the hiring law enforcement agency or the enrolling academy.

AUTHORITY:	1965 PA 203; 2017 PA 128
COMPLIANCE:	Voluntary
PENALTY:	No License Activation/ Employment/ Academy Enrollment

* This information is confidential. Confidential information is protected by the Federal Privacy Act.

‡ This information is for the purposes of EEO reporting only.

08/2025

Affidavit of _____

Michigan Commission on Law Enforcement Standards
927 Centennial Way, Lansing, MI 48913

CANDIDATE'S PERSONAL HISTORY STATEMENT AND AFFIDAVIT IN SUPPORT OF APPLICATION TO ENTER INTO THE TRAINING OR LICENSING PROCESS

PLEASE TYPE YOUR RESPONSES TO THIS QUESTIONNAIRE INTO THE APPROPRIATE FIELDS

PERSONAL INFORMATION

Persons completing this form shall begin answering the questions below only after carefully reading the preceding instructions.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

LAST NAME	FIRST NAME	MIDDLE NAME

DATE OF BIRTH (MM/DD/YYYY)	SOCIAL SECURITY NUMBER*	DRIVER'S LICENSE NO.	STATE

OTHER NAMES USED
(Enter any name changed due to marriage or divorce, legal change to your name, or alias used. Provide explanation for any other names used. Documentation may be requested.)

LAST NAME	FIRST NAME	MIDDLE NAME

EXPLANATION:

EXPLANATION:

ARE YOU A CITIZEN OF THE UNITED STATES? (Provide a copy of your birth certificate, US passport, naturalization certificate, or certificate of citizenship) ○Yes ○No

HOME ADDRESS	CITY	STATE	ZIP

SECOND ADDRESS (School, new address, etc.)	CITY	STATE	ZIP

PHONE NO.	ADDITIONAL PHONE NO.	E-MAIL	BASIC TRAINING ATTENDED OR YOU ARE APPLYING TO ATTEND:

AUTHORITY: 1965 PA 203; 2017 PA 128
COMPLIANCE: Voluntary
PENALTY: No License Activation/ Employment/ Academy Enrollment

* This information is confidential. Confidential information is protected by the Federal Privacy Act.

PLACES YOU HAVE RESIDED

List all places you have lived beginning with your present residence and working back 10 years.

Residences for the entire period must be accounted for without breaks. Indicate the actual physical place of residence (PO box is not acceptable). If you split your time between residences, you must list them all. A residence is any location you regularly inhabited.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

DATES OF RESIDENCY (MM/DD/YYYY) FROM: TO:	☐ OWNED BY YOU ☐ RENTED OF LEASED BY YOU ☐ MILITARY HOUSING ☐ OTHER: _____	
STREET ADDRESS	**CITY AND STATE**	**ZIP CODE**

PROVIDE THE NAME OF A NEIGHBOR, LANDLORD, OR OTHER PERSON WHO KNEW YOU AT THIS ADDRESS

NAME	EMAIL	PHONE NO.

PROVIDE YOUR RELATIONSHIP TO THIS PERSON: (check all that apply)

☐ Neighbor ☐ Friend ☐ Landlord ☐ Business Associate ☐ Other _____

DATES OF RESIDENCY (MM/DD/YYYY) FROM: TO:	☐ OWNED BY YOU ☐ RENTED OF LEASED BY YOU ☐ MILITARY HOUSING ☐ OTHER: _____	
STREET ADDRESS	**CITY AND STATE**	**ZIP CODE**

PROVIDE THE NAME OF A NEIGHBOR, LANDLORD, OR OTHER PERSON WHO KNEW YOU AT THIS ADDRESS

NAME	EMAIL	PHONE NO.

PROVIDE YOUR RELATIONSHIP TO THIS PERSON: (check all that apply)

☐ Neighbor ☐ Friend ☐ Landlord ☐ Business Associate ☐ Other _____

DATES OF RESIDENCY (MM/DD/YYYY) FROM: TO:	☐ OWNED BY YOU ☐ RENTED OF LEASED BY YOU ☐ MILITARY HOUSING ☐ OTHER: _____	
STREET ADDRESS	**CITY AND STATE**	**ZIP CODE**

PROVIDE THE NAME OF A NEIGHBOR, LANDLORD, OR OTHER PERSON WHO KNEW YOU AT THIS ADDRESS

NAME	EMAIL	PHONE NO.

PROVIDE YOUR RELATIONSHIP TO THIS PERSON: (check all that apply)

☐ Neighbor ☐ Friend ☐ Landlord ☐ Business Associate ☐ Other _____

If you need to add additional previous residences, click "Add Additional Previous Residences" and a page will be added to the end of the document.

Add Additional Previous Residences

EMPLOYMENT ACTIVITIES

List and account for all employment types and activities, including unemployment, self-employment, internships, and volunteer work, beginning with the present, and working backwards. Your entire work history starting at age 16 must be accounted for without breaks.

Include life-time employment history (paid or volunteer) with any enforcement agency or military service at any age.

Provide separate entries for employment activities with the same employer but at different location(s). Account for all military service, including active duty, National Guard/Reserve, and contract work. Provide separate entries for different duty stations.

Explain in detail the reason(s) for leaving each employment activity. The reason for leaving must articulate the circumstances for the separation. Stating "resigned in good standing" or "resigned while under investigation" is not sufficient.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

DATES OF EMPLOYMENT (MM/DD/YYYY)
FROM: **TO:**

SELECT YOUR EMPLOYMENT ACTIVITY

☐ NON-GOVERNMENT EMPLOYMENT ☐ GOVERNMENT ☐ SELF-EMPLOYMENT
☐ ACTIVE MILITARY DUTY ☐ UNEMPLOYMENT ☐ VOLUNTEER
☐ NATIONAL GUARD/RESERVE ☐ INTERNSHIP ☐ OTHER

EMPLOYER / ENTITY NAME	ADDRESS	
IMMEDIATE SUPERVISOR (Include rank if military)	**SUPERVISOR EMAIL**	**SUPERVISOR PHONE NO.**
POSITION HELD	**REASON FOR LEAVING**	

DATES OF EMPLOYMENT (MM/DD/YYYY)
FROM: **TO:**

SELECT YOUR EMPLOYMENT ACTIVITY

☐ NON-GOVERNMENT EMPLOYMENT ☐ GOVERNMENT ☐ SELF-EMPLOYMENT
☐ ACTIVE MILITARY DUTY ☐ UNEMPLOYMENT ☐ VOLUNTEER
☐ NATIONAL GUARD/RESERVE ☐ INTERNSHIP ☐ OTHER

EMPLOYER / ENTITY NAME	ADDRESS	
IMMEDIATE SUPERVISOR (Include rank if military)	**SUPERVISOR EMAIL**	**SUPERVISOR PHONE NO.**
POSITION HELD	**REASON FOR LEAVING**	

If you need to add additional previous employment, click "Add Additional Previous Employment" and a page will be added to the end of the document.

Add Additional Previous Employment

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

1. Have you ever been talked to, interviewed, or suspected of any crime? ○Yes ○No
   If yes, fully explain in detail below, including dates, locations, and circumstances.

☐ Check this box to continue response on additional page at the end of the document

2. Have you ever been talked to, interviewed, or suspected of any form of harassment (inappropriate sexual behavior, sexual harassment, ethnic harassment) or violence (threatening behavior or assaultive behavior)? ○Yes ○No
   If yes, fully explain in detail below, including dates, locations, and circumstances.

☐ Check this box to continue response on additional page at the end of the document

3. Have you ever been subject to discipline or proposed discipline for any reason, including: coaching, verbal reprimand or written reprimand, forfeiture of time, loss of pay, suspension of any type of employment or voluntary work? ○Yes ○No
   If yes, fully explain in detail below, including dates, locations, and circumstances.

☐ Check this box to continue response on additional page at the end of the document

4. Have you ever received a below-average performance rating or evaluation? ○Yes ○No
   If yes, fully explain in detail below, including dates, locations, and circumstances.

☐ Check this box to continue response on additional page at the end of the document

5. Have you ever been terminated from employment, asked to resign, afforded the opportunity to resign in lieu of termination, failed a probationary period, decided to resign during or to avoid an inquiry from any place of employment, or volunteer work? ○Yes ○No
   If yes, fully explain in detail below, including dates, locations, and circumstances.

☐ Check this box to continue response on additional page at the end of the document

6. Have you ever been an unsuccessful candidate for a law enforcement position (either volunteer or paid) or academy enrollment because you did not meet the qualifications? ○Yes ○No
   If yes, fully explain in detail below, including position dates, locations, and circumstances.

☐ Check this box to continue response on additional page at the end of the document

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

7. Have you ever gone on a ride-a-long with any law enforcement agency as an observer? ○ Yes ○ No
If yes, list the agency, officer you rode with, and date of ride-along.

☐ Check this box to continue response on additional page at the end of the document

MILITARY SERVICE

Applicants with prior military service must submit a copy of their DD-214 Form with their application to the law enforcement agency, basic law enforcement training program, or to the Recognition of Prior Basic Training and Experience (RPTE) program. **The DD-214 submitted shall be the long form, which is the unredacted, undeleted, unedited version.**

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

8. Have you ever served in the armed forces, National Guard, or military reserves? ○ Yes ○ No

9. If yes, describe your duty assignment(s) and Military Occupation Specialties (MOS):

☐ Check this box to continue response on additional page at the end of the document

Dates of Service (MM/DD/YYYY)
From: To:

10. Fully describe the details of your service (include branch of service, when, where, and the circumstances):

☐ Check this box to continue response on additional page at the end of the document

11. While on active duty, Reserves, or National Guard, were you the subject of any judicial, non-judicial, or administrative action or review, or were you the subject of an investigation, trial, or disciplinary action? ○ Yes ○ No
If yes, fully explain in detail below. Provide the allegations, dates, locations, and outcomes.

☐ Check this box to continue response on additional page at the end of the document

12. Have you ever been demoted? ○ Yes ○ No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

13. Have you ever been reassigned subsequent to an inquiry or investigation? This includes reassignment while an inquiry or investigation is pending. ○ Yes ○ No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

14. Did you receive an honorable discharge? ○ Yes ○ No
If no, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

MOTOR VEHICLE OPERATION

List all summonses, citations, tickets, verbal or written warnings received by you for any traffic law violation, violation that you received while in a motor vehicle, whether you were the driver or passenger. Include reduced, dismissed, held in abeyance, taken under advisement. Include handicap parking violations and unpaid tickets.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

DATE (MM/DD/YYYY)	NATURE OF VIOLATION (Initial Cause for Stop, Charge or Citation)	TICKETED Yes/No	JURISDICTION/AGENCY WHERE VIOLATION OCCURRED	DISPOSITION (Final Disposition - Fine, Points, Probation, Other)

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

15. Do you currently have active violation points on your driver's license? ○Yes ○No
If yes, how many points do you have? _____

16. Has your driving privileges ever been denied, suspended, revoked in this state or any other state, the District of Columbia, a possession or territory of the U.S., or Canada? ○Yes ○No
If yes, fully explain the details below (what, when, where, and why).

☐ Check this box to continue response on additional page at the end of the document

17. Do you currently, or have you ever had any *restrictions* placed on your driver's license? ○Yes ○No
If yes, fully explain the nature of restriction and the reason for the restriction below.

☐ Check this box to continue response on additional page at the end of the document

18. Have you ever been involved in a traffic crash where you were determined to be at fault or partially at fault? ○Yes ○No
If yes, fully explain the details below.

☐ Check this box to continue response on additional page at the end of the document

19. Have you ever been issued a citation or otherwise charged under motor vehicle code or for a criminal offense? ○Yes ○No
If yes, fully complete the following table.

☐ Check this box to continue response on additional page at the end of the document

DATE (MM/DD/YYYY)	LOCATION	CITATIONS OR CHARGES	INVESTIGATING POLICE AGENCY	DESCRIBE INJURIES

LEGAL HISTORY

Please provide the following information if you have ever:

- Been interviewed or questioned by a police agency as a suspect, complainant, or witness (either as a juvenile or an adult) about any criminal offense or civil infraction.
- Been arrested, issued a citation, taken to a police station, fingerprinted, or charged with any criminal offense or civil infractions.
- Received an adjudication of guilt (as defined in MCL 26.602(a)) or any criminal offense including expungements or conviction set asides (MCL 780.621), marijuana offense set asides (MCL 780.621e, 621f), automatic set asides (MCL 780.621g), Holmes Youthful Trainee Act dispositions (MCL 762.11), or drug court dispositions (MCL 333.7411). Criminal offenses and charges include, but are not limited to: conservation law violations, appearance tickets, or criminal traffic violations. **NOTE:** Include any diversion programs, delayed or deferred sentencing. List civil infractions not included in Motor Vehicle Operation section above.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

DATE (MM/DD/YYYY)	LAW ENFORCEMENT AGENCY OR COURT	INITIAL CHARGE, VIOLATION, OR REASON FOR CONTACT	FINAL DISPOSITION (Conviction, dismissal, fines, probation, jail, etc.)

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

20. Have you ever had a criminal conviction expunged or set aside? ○Yes ○No
If yes, fully explain in detail below (nature of crime, county where expunged or set aside, and when).

☐ Check this box to continue response on additional page at the end of the document

21. Have you ever been placed on court probation, parole, or any form of supervision (including, but not limited to, informal probation)? ○Yes ○No
If yes, fully explain in detail below (when, where, why, etc.).

☐ Check this box to continue response on additional page at the end of the document

22. Have you ever received a pardon or commutation for a criminal offense? ○Yes ○No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

23. Have you ever been released on bail, or released on personal recognizance, or other release conditions? ○Yes ○No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

24. Have you ever been required to appear before a juvenile or family court in connection with a status or delinquency offense? ○Yes ○No
If yes, fully explain in detail below (when, where, why, etc. and include the final disposition).

☐ Check this box to continue response on additional page at the end of the document

25. Are you now or have you ever been a plaintiff or defendant in any civil court action? (e.g., torts, bankruptcy, small claims, financial, friend of the court, divorce, etc.) ○Yes ○No
If yes, fully explain in detail below. Include case numbers and the disposition.

☐ Check this box to continue response on additional page at the end of the document

26. Have you ever been a respondent at any stage in a request for a restraining order, personal protection order, or similar order in this state, or any other jurisdiction? A respondent is the person enjoined or prohibited from certain behaviors or actions. ○Yes ○No
If yes, fully explain in detail below. Provide dates, court of jurisdiction, circumstances of the order, and final disposition.

☐ Check this box to continue response on additional page at the end of the document

FINANCIAL HISTORY

The basic law enforcement training academy, law enforcement agency, or the Commission may require you to submit a current financial or credit history statement to verify the information provided below.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

27. Have you ever filed for or declared bankruptcy?	O Yes	O No
28. Have any of your bills ever been turned over to a collection agency?	O Yes	O No
29. Have you ever been evicted for non-payment of rent?	O Yes	O No
30. Have you ever had a credit card canceled or suspended by the company for unpaid balances?	O Yes	O No
31. Have you ever had purchased goods repossessed?	O Yes	O No
32. Have you ever been in arrears for court ordered child support?	O Yes	O No

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

33. If you answered yes to any of the above questions (27 through 32), fully explain in detail below:

☐ Check this box to continue response on additional page at the end of the document

EDUCATION HISTORY

List your educational achievements here. A high school diploma or GED is required for enrollment into a Commission approved academy and for licensing. Official college transcripts are required for enrollment into the basic academy as a preservice recruit, and official transcripts confirming the award of a degree are required for license eligibility. Only recognized accredited colleges and universities are accepted. College degrees are evidence of meeting the high school requirement.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

HIGH SCHOOL	LOCATION	DIPLOMA OR GED?	DATE (MM/DD/YYYY)
		○Yes ○No	

COLLEGE	LOCATION	DEGREE	CREDIT HOURS	DATE (MM/DD/YYYY)

VOCATIONAL/TRADE SCHOOL/OTHER	LOCATION	DEGREE OR CERTIFICATE	DATE (MM/DD/YYYY)

ADDITIONAL/OTHER	LOCATION	DEGREE OR CERTIFICATE	DATE (MM/DD/YYYY)

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

34. Have you ever been suspended or expelled from any high school or post-secondary school? ○Yes ○No
(Post-secondary schools include colleges, universities, graduate schools, business, and vocational schools.)
If yes, fully explain in detail below (include school, date, and circumstances).

☐ Check this box to continue response on additional page at the end of the document

35. Have you ever been subject to formal discipline procedures, short of suspension or expulsion from school for unacceptable behavior at any high school or post-secondary school? ○Yes ○No
If yes, fully explain in detail below (include school, date, and circumstances).

☐ Check this box to continue response on additional page at the end of the document

36. Have you ever been denied admission to, withdrew from, or dismissed from, a basic law enforcement training academy or criminal justice academic program? ○Yes ○No
If yes, fully explain in detail below (include school/academy, date, and circumstances).

☐ Check this box to continue response on additional page at the end of the document

INTERNET PRESENCE

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

37. List all social media platforms you belong to, follow, or utilize:

☐ Check this box to continue response on additional page at the end of the document

38. Do you now, or have you ever associated with a social media group that advocates, or has advocated for the violent overthrow of the federal, state, or local government? O Yes O No
If yes, fully explain the details below.

☐ Check this box to continue response on additional page at the end of the document

39. Have you ever used the internet or any online service (e.g., Dark Web, TOR Browser, etc.) to obscure or anonymize your identity or activity while using the internet or other networks/systems? O Yes O No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

40. Have you ever used the internet or any online service to commit a crime or to view, download, transfer, forward, or possess any illegal material or material that explains, informs, or demonstrates how to commit a crime or engage in illegal activities? O Yes O No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

MCOLES STANDARDS AND ELIGIBILITY

The basic law enforcement training academy, law enforcement agency, and the Commission must determine if you meet the Commission's selection and employment standards and if you are able to perform the essential job functions of a law enforcement officer. Answer the following questions to the best of your ability.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

41. Have you read and do you fully understand the Commission's current selection and employment standards to qualify for law enforcement licensing, and do you attest that you comply with these provisions? O Yes O No

    The standards may be found at www.michigan.gov/mcoles

42. Have you ever failed to submit to, or tested positive on, a drug screen test for any type of employment or licensing? O Yes O No
    If yes, fully explain in detail below (dates, locations, and which drugs).

    ☐ Check this box to continue response on additional page at the end of the document

43. Have you ever sought and received a written determination from the Commission regarding any situation which may affect compliance with the minimum selection and employment standards? O Yes O No
    If yes, fully explain in detail below (dates, locations, etc.).

    ☐ Check this box to continue response on additional page at the end of the document

44. To your knowledge, have you ever been investigated for an alleged standards violation, or subject to additional review to determine whether you met the selection and employment standards? O Yes O No
    If yes, fully explain in detail below and provide copies of previous written determinations.

    ☐ Check this box to continue response on additional page at the end of the document

45. Have you ever been removed from, or withdrawn from, an employment application process for any position with a federal, state, territory, local, or tribal law enforcement agency? O Yes O No
    If yes, fully explain in detail below (dates, locations, etc.).

    ☐ Check this box to continue response on additional page at the end of the document

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

46. Have you ever been removed from, or withdrawn from, a federal, state, territory, local, or tribal law enforcement training academy? ○Yes ○No
If yes, fully explain in detail below (dates, locations, etc.).

☐ Check this box to continue response on additional page at the end of the document

47. Have you ever had your law enforcement license or certification in Michigan, or any other state, territory or tribe, or federal license, denied, suspended, revoked, forfeited, or restricted by administrative action or stipulation? ○Yes ○No
If yes, fully explain in detail below (dates, locations, etc.).

☐ Check this box to continue response on additional page at the end of the document

48. Have you ever been charged or convicted of a crime that is a misdemeanor under federal, state, or local law that has as an element of the use or attempted use of physical force, or the threatened use of a deadly weapon against a current or former spouse, parent, guardian or person with who you cohabitated or have cohabitated or with whom you have a child in common or against any person similarly situated to a spouse, parent or guardian (commonly known as domestic violence)? ○Yes ○No
If yes, fully explain in detail below (Note: federal law prohibits individuals convicted of qualifying domestic violence offenses from possessing a firearm).

☐ Check this box to continue response on additional page at the end of the document

49. Have you ever advocated for, or supported in any way, the overthrow of the United States government by force or violence, or any state and local government by force or violence, or have you been a member of an organization that supports the overthrow of government by force or violence? ○Yes ○No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

50. Are you now, or have you ever been, a member or associate of a hate group, or any other group that advocates discrimination, genocide, or violence against individuals because of their religion, race, color, national origin, ethnic origin, age, sex, height, weight, familial status, marital status, political affiliation, sexual orientation, gender identity, gender expression, or disability? ○Yes ○No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

51. Are you now, or have you ever, engaged in membership in a hate group, participated in hate group activity, or advocated for public expressions of hate? ○Yes ○No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

52. Have you ever made postings, statements, or endorsements advocating discrimination, genocide, or violence against individuals because of their religion, race, color, national origin, ethnic origin, age, sex, height, weight, familial status, marital status, political affiliation, sexual orientation, gender identity, gender expression, or disability? ○Yes ○No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

53. Have you ever expressed or exhibited bias against individuals because of their real or perceived religion, race, color, national origin, ethnic origin, age, sex, height, weight, familial status, marital status, political affiliation, sexual orientation, gender identity, gender expression, or disability? ○Yes ○No
If yes, fully explain in detail below.

☐ Check this box to continue response on additional page at the end of the document

54. Do you have, or have you ever had, restrictions on the purchase or possession of a firearm or ammunition pursuant to federal or state law? ○Yes ○No
If yes, fully explain in detail below (dates, locations, reason(s), etc.).

☐ Check this box to continue response on additional page at the end of the document

EMPLOYED RECRUITS AND RPTE CANDIDATES

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

If you need additional space to fully explain your response to the below questions, check the box next to "Check this box to continue response on additional page" and a page will be added to the end of the document.

55. Have you ever been employed by any law enforcement or public safety agency (police, corrections, fire, etc.), either in Michigan or elsewhere, that was not in accordance with the Federal Fair Labor Standards Act (e.g., you were not paid minimum wage for all hours worked). ○Yes ○No
If yes, fully explain in detail below (agency/employer, dates of employment, etc.).

☐ Check this box to continue response on additional page at the end of the document

This section only applies to basic academy employed recruits and employed RPTE candidates.

As an employed recruit or employed RPTE candidate, I understand that to be in compliance with the Commission's administrative rules 28.14102(a), (b), and (c), and for the purposes of this section R 28.14206, that on the first day of training, I meet all the Federal Fair Labor Standards Act requirements. This statement means: 1) I am receiving at least minimum wage from the employer I have identified on my application for all hours spent in the academy and any additional hours worked outside the academy; 2) I am not volunteering to work time for my employer.

Check each statement below to indicate you have read and understand each statement below:

☐ I understand these requirements and am verifying that my employment meets these requirements at the time of entry into this training session. I also understand that I may be required to produce, to the training director, a copy of proof that wages are being paid to me by my employing agency during the enrolled training session.

☐ I understand that if there is any change in my employment status during this training session, I must notify the training director and the Commission immediately.

☐ I recognize that any misrepresentation on my part to obtain licensing or a state subsidy of tuition costs constitutes fraud and is punishable as a felony under MCL 750.218.

ADDITIONAL INFORMATION

The Commission has a statutory responsibility to ensure those entering the law enforcement profession in Michigan possess the appropriate character fitness (MCL 28.609(2)(i)); R 28.14203e)). Accordingly, this page is provided to allow you the opportunity to fully explain in detail any additional relevant information that might not have been specifically asked for on this personal history statement but would be considered information the Commission may need to fully consider your application. You have an obligation to disclose all relevant information and, therefore, shall err on the side of disclosure.

Failure to disclose relevant information from your background is a revocable offense, and will prevent you from proceeding in the selection, training, and licensing process.

☐ Check this box to continue response on additional page at the end of the document

Affidavit of_____

PLEASE WAIT TO SIGN BELOW IN THE PRESENCE OF A NOTARY

NOTE: If you are an academy recruit this Personal History Statement and Affidavit must be completed and notarized prior to the beginning of the academy.

STATE OF MICHIGAN)
) ss.
COUNTY OF_____)

Applicant's Social Security Number:_____

Employing Law Enforcement Agency, Basic Law Enforcement Academy, or Recognition of Prior Basic Training and Experience (RPTE) Program: _____

Now comes_____ and being first duly sworn certifies as follows:
Print Candidate's Name

I affirm that the information I have provided above in this Personal History Statement is true, accurate and complete and this document constitutes an official statement within the purview of Michigan statutes and is subject to verification by any Commission approved basic law enforcement training program, employing law enforcement agency and/or the Commission, and I understand that a failure to fully disclose information required by this affidavit constitutes misrepresentation or fraud and shall constitute grounds for denial of entry into basic law enforcement training, denial of a law enforcement officer license, or revocation of license as a law enforcement officer in Michigan pursuant to MCL 28.609(12), MCL 28.609a(5), MCL 28.609b(12), MCL 28.609c(11), and MCL 28.609d(13).

Candidate's Name (print) _____

Candidate's Signature: _____ Date signed: _____

The foregoing affidavit was acknowledged before me the following date _____

(Name of Person) who is personally known to me or who has produced _____

(Type of identification) as identification and who did (did not) take an oath.

Signature of Notary _____

Commissioned in _____ County

Acting in _____ County

Commission Expires _____

(Notary's Stamp/Seal)