

City of Warr Acres Police Department Application for Employment

The City of Warr Acres does not discriminate on the basis of race, color, sex, national origin, age, marital or veteran status, political affiliation, disabled status or any other legally protected status.

The Police Department is concerned with your ability to perform the job and will not at this time consider your need for reasonable accommodation. If, after reviewing your application form, verifying your responses and conducting necessary interviews and/or tests, you are considered for the job and would need reasonable accommodation to perform the essential job functions, the parties will explore these alternatives. **REMEMBER**, the Police Department conducts a pre-employment exam which will determine whether you can do the essential functions of the job without substantial risk to yourself and/or the public.

Print or type answers to each question clearly and completely. All questions must be answered. This is an application for employment and no employment contract is being offered. The City of Warr Acres may change wages, benefits and conditions of employment at any time. If you need assistance in completing this application form, or in participating in the selection process, please inform the person at the lobby window.

Date of Application	Position Applying For	
Last Name	First Name	Middle Initial
Address	City/State/Zip	
Home/Cell Phone Number	Email Address	
Have you ever worked for the City of Warr Acres? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give date(s) and reason for leaving		
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>Proof of Citizenship or Immigration status may be required upon employment.</i>		
What is the earliest date you would be available to work?	Are you available to work (check one or more) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-time <input type="checkbox"/> Shifts <input type="checkbox"/> Weekends <input type="checkbox"/> Holidays	
Driver's License number	State	Expiration date
Are you related to any current City of Warr Acres employee or any member of the City Council? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please give their name, department and relationship to you.		

Do you have: (check all that apply)

- High School Diploma
 G.E.D.
 Some College Hours
 Two Year College Degree
 Four Year College
 Post Graduate Degree

List any specialized training, licenses or certificates that you have which would help us determine your suitability for this position. (e.g. CPR certified, CLEET Certified, Commercial Class Driver's License, etc.)

Employment Experience In the spaces below, complete the information requested for your current employer and two previous employers.

Employer	Address	Telephone number
Job Title or Position Held	Name of Supervisor	Salary
Dates Employed ____/____ to ____/____	Reason for leaving	

Employer	Address	Telephone number
Job Title or Position Held	Name of Supervisor	Salary
Dates Employed ____/____ to ____/____	Reason for leaving	

Employer	Address	Telephone number
Job Title or Position Held	Name of Supervisor	Salary
Dates Employed ____/____ to ____/____	Reason for leaving	

Read Carefully Before Signing

I certify that the facts given in this application are true and correct to the best of my knowledge. I hereby grant permission to the City of Warr Acres Police Department to investigate any information included in this application. I understand that I may be required to take a medical examination. I understand that the City of Warr Acres is a drug free workplace and agree to submit to drug screening. I understand that this application is not a contract of employment. I hereby release the City of Warr Acres and its agents from any and all liability in making any inquiries or investigations relative to information contained herein. I understand that any false or misleading statements made within this application can be cause for my disqualification for or dismissal from employment. I understand that I will be required to abide by all rules regulations and policies of the City of Warr Acres Police Department.

Signature of Applicant	Date
------------------------	------