

APPLICATION FOR COMMUNITY SERVICE OFFICER

Applicant's name: _____
 Last First Middle

**Brewster Police Department
631 Harwich Road
Brewster, Massachusetts 02631**

1. These forms must be typewritten or printed in blue or black ink by the applicant himself/herself.
2. All questions must be answered, if applicable. If not applicable, indicate n/a.
3. Failure to answer any and all questions truthfully, accurately or completely shall result in the applicant's disqualification, or, if discovered after an individual is accepted, termination from the program.
4. If the space provided is not sufficient for complete answers, or you wish to make additional comments, attach sheets the same size as these forms and indicate to which question those sheets pertain.
5. You are applying for a responsible public safety position. It is essential that you follow instructions specifically as directed. Make sure all dates and information are absolutely accurate.
6. If, after submitting this application, you become no longer interested in appointment, please notify the Chief of Police in a timely manner.
7. A Criminal Offender Record Information (CORI) check will be performed on each applicant who submits an application for an internship with this police department.
8. Please provide a valid email address to receive notification of your status in the hiring process.

I have read and understand the above instructions.

Applicant Signature

Application closing date: Rolling

For Office Use:

Date Received: _____

To The Applicant. READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS.

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, national origin or disability, (As does the Americans with Disabilities Act). Federal Law also prohibits discrimination on the basis of age with respect to certain individuals. The Laws of Massachusetts also prohibit some or all of the above-stated discrimination as well as some additional types, such as discrimination based upon ancestry, sexual orientation and marital status.

Questions with an asterisk (*) immediately to the left of the questions are optional. Although the information is useful in our examination of applicants, your decision not to answer any or all of the asterisk questions will not be held against you.

I. PERSONAL HISTORY

- a. Name: _____
(First) (Middle) (Last)
- Address: _____
(Number & Street)
- _____
- (City/Town) (State)/(Country) (Zip)
- Email address (for notification): _____
- b. Date of Birth _____ Social Security No.: _____
- c. Other Names Used: Give any other names by which you have been legally known (if any):
- Name: _____ Date(s) When Used: _____
- Why Used: _____
- Name: _____ Date(s) When Used: _____
- Why Used: _____
- d. How long have you lived at this address? _____
- Phone: _____
- (Home) (Business)

- e. In chronological order, please state every place you have resided within the past ten years. Include addresses while attending school, if away from home, and all military addresses. (Note: Your present address should be listed on the first line below.)

From Month/Year	To Month/Year	Address	(Apt. #)	City/Town	State	Landlord's Name and Telephone #

- f. Do you have a relative employed by this municipality? Yes [] No [] If yes, please give name and relationship: _____
- g. Do you personally know any police officers or other employees working in this department?
Yes [] No [] If yes, name and rank (if known): _____

- h. What is your schedule availability? (ex. Monday, Tuesday, Friday 8a-10p; Wednesday 12p-8p, etc.) _____

- i. If your application is considered favorably, on what date can you start your program?

- j. Do you possess a valid driver's license from the Commonwealth of Massachusetts?
Yes [] No [] Driver's License No.: _____
- k. Was your driver's license in this state, or any state, ever suspended or revoked?

Yes [] No [] If yes, give details: _____

II. EDUCATION

a. List the name and address of the following schools you attended and dates of graduation.

	School Name, Address and Phone Number	Graduated Yes/No	Number of Years Attended	Degree	Major
High School					
College					
Other:					

b. Were you ever dismissed from a school or was any disciplinary action, including scholastic probation, ever taken against you during your scholastic career?

Yes [] No [] If yes, give school, date and action taken:

School: _____ Date: _____

Action Taken: _____

III. EMPLOYMENT HISTORY

- a. Starting with the most recent and in reverse chronological order, list all employments (including summer and part-time employments while attending school). All time must be accounted for. If you were unemployed for a period of time, please indicate the dates of unemployment. (Use additional sheets of paper if necessary.) Applicants may also include verifiable work performed on a volunteer basis.

Dates		Name and Address of Employment	Supervisor's Name and Title	
From Mo./Yr.	To Mo./Yr.			
Reason for Leaving:				

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From Mo./Yr.	To Mo./Yr.			
Reason for Leaving:				

Dates		Name and Address of Employment	Supervisor's Name and Title	
From Mo./Yr.	To Mo./Yr.			
Reason for Leaving:				

b. Have you ever been fired or forced to resign because of misconduct or unsatisfactory employment? Yes [] No []. If yes, give details:

c. Are you eligible for rehire with each of your former employers? Yes [] No [] If no, please explain:

d. Do you have any dispatch experience? Yes [] No []

If yes, give details (dates, positions, etc.): _____

IV. MILITARY SERVICE

Have you ever served on active duty in the Armed Forces of the United States or the National Guard? Yes [] No [] If yes, what was the highest rank attained? _____

If yes, please complete each of the following:

a. General Information

Branch of Military Service

Serial Number

Dates of Active Duty

From: _____

To: _____

Type of Discharge

Date of Discharge

Member of Reserve?

Yes [] No []

Branch: _____

V. REFERENCES

- a. List three references (not relatives, in-laws, former or present employers, fellow employees or school teachers) who are responsible adults, have reputable standing in their community and who have known you for at least five years. All persons to whom you refer may be asked to appraise your character, ability, experience, personality and other qualities.

First Reference

Name: _____

Address: _____

Phone: _____ Relationship: _____

How Long Has This Person Known You? _____

Second Reference

Name: _____

Address: _____

Phone: _____ Relationship: _____

How Long Has This Person Known You? _____

Third Reference

Name: _____

Address: _____

Phone: _____ Relationship: _____

How Long Has This Person Known You? _____

VI. CRIMINAL RECORD

Note: With regard to questions contained in this section, under Massachusetts Law, you may answer "no record" if any of the following circumstances are applicable:

- (1) *You have never been arrested for violation of a criminal statute;*
- (2) *You have been arrested but have never been tried for a criminal offense;*
- (3) *You have been tried for a criminal offense but were not convicted;*
- (4) *You have a first conviction for any of the following misdemeanors:*

<i>(a) drunkenness</i>	<i>(b) simple assault</i>	<i>(c) speeding</i>
<i>(d) minor traffic violation</i>	<i>(e) affray or</i>	<i>(f) disturbance of the peace;</i>
- (5) *You have not been convicted of a criminal offense within the five years before the date of this application and you have been convicted of misdemeanors where the date of conviction or the termination of incarceration, if any, occurred more than five years before the date of this application;*
- (6) *You have felony or misdemeanor convictions which have been sealed pursuant to Massachusetts Law ; or*
- (7) *You have juvenile delinquency or child in need of services complaints which were not transferred to Superior Court for prosecution.*

- a. Have you ever been convicted of a felony? Yes [] No []
- b. Have you ever been, or are you currently the subject of any petition for restraining order requested or issued pursuant to c. 209A or other abuse prevention statutes, of the Massachusetts General Laws or similar laws of other states? Yes [] No [] If you have answered yes, please explain when and where.

Date	Police/Department	Charge/Court/Disposition	Docket No.

IT IS UNLAWFUL IN MASSACHUSETTS TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

Thank you for completing this application and your interest in employment with the Brewster Police Department

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW INDICATING THAT YOU UNDERSTAND AND AGREE TO THE TERMS AS STATED.

I understand that a physical, which includes a drug screening urinalysis, may be required after an employment offer has been made. I understand that this is not a contract of employment and I or the municipality may sever the employment relationship at any time for any reason. Any oral or written statement to the contrary, including any which are made by a City/Town representative, are disavowed and may not be relied upon by any prospective or existing employee.

I understand also that the Brewster Police Department has established day and night tours for which I must be available as required. I further understand that any appointment tendered me will be contingent upon the results of a complete character and fitness investigation, and I am aware that willfully withholding information or making false statements on this application will be the basis for rejection of my application or dismissal from the Brewster Police Department. I agree to these conditions and I hereby certify that all statements made by me on this application are true and complete to the best of my knowledge. I hereby give the Brewster Police Department authorization to contact any person reasonably related to the character and fitness investigation and to request that an independent credit report be prepared as to my financial condition. I also authorize any person contacted to share written and oral information which is reasonably related to the public safety position for which I am applying.

Finally, I hereby release, discharge and exonerate this municipality, its agents and representatives, and any person furnishing or receiving information, from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, or other information or investigations made by or on behalf of this municipality. This authority shall continue until revoked in writing by the undersigned.

Date

Signature of Applicant

GENERAL RELEASE

Date: _____

I, _____, born at _____
on _____, having filed an application for a community service
officer position with the Brewster Police Department, consent to have an investigation made as
to my moral character, reputation and fitness for the position to which I have applied. I also
agree that such information as may be received, reported to and reviewed by the appointing
authority. I agree to give any further information which may be required in reference to my past
record.

I also authorize and request every person, firm, company, corporation, governmental agency,
court, association or institution having control of any documents, records and other information
pertaining to me, to furnish to the Brewster Police Department any such information, including,
documents, records, files regarding charges or complaints filed against me, formal or informal,
pending or closed, or any other pertinent data, and to permit the Brewster Police Department or
any of its agents or representatives to inspect and make copies of such documents, records and
other information.

Specifically, in addition, I hereby authorize the release of the following data or records to the
Brewster Police Department: _____

I hereby release, discharge and exonerate the Brewster Police Department, its agents and
representatives and any person so furnishing information from any and all liability of every
nature and kind arising out of the furnishing or inspection of such documents, records and other
information or the investigations made by or on behalf of the Brewster Police Department.

This authority shall continue for one year unless sooner revoked in writing by the undersigned.

Signed

Witness

Address

CORI CHECK ACKNOWLEDGMENT

I, _____ residing at _____
_____, acknowledge that a Criminal Offender Record
Information (CORI) check will be performed as part of the Brewster Police Department's hiring
process. I further acknowledge that a refusal to allow the CORI check to be performed will
cause my application to no longer be considered for employment.

Signature