## CAPE ELIZABETH POLICE DEPARTMENT

325 Ocean House Road, Cape Elizabeth, Maine 04107

Tel. (207) 767-3323

## APPLICATION FOR EMPLOYMENT

\*IMPORTANT - READ CAREFULLY Return this form completed with a copy of your driver's license. If you were in the military, please supply a DD214.

\* Incomplete applications will be rejected without notice to the applicant

# PERSONAL

					Date				
Name				Social Secu	urity N	0			
	Last	First	Middle						
Present Addre	ss								
				Tel	ephor	ne No	-		
Applying for:	[] Full-Time Police	e Officer	[] Reserve Police Off	serve Police Officer [] Part-Time Clerk					
∟ist any relativ	res who are now (or \	were formerly	y) in the employ of the T	own of Cape	Elizab	eth_			
			ich will be of special be ederal and State law pro						
		RE	ECORD OF EDUCATIO	N					
School	Name and Address	Last Year ess of School Course of Study Completed (Circle)				List Diploma or Degree			
High School				1	2	3	4		
College				1	2	3	4		
Other			<u></u>	1	2	3	4		
		MILI	TARY SERVICE RECO	PRD					
Were you in th	ne Armed Forces? Y	es No_	_ If yes, what branch?						
-			Date of enlistment:						
			Forces that is relevant t						

# LIST PRESENT AND PAST EMPLOYMENT, BEGINNING WITH MOST RECENT

Name and Address of Company and Type of Business From	То	Reason for Leaving	Supervisors Full Name		
Describe the work you did:					
Name and Address of Company and Type of Business From	То	Reason for Leaving	Supervisors Full Name		
Describe the work you did:					
Name and Address of Company and Type of Business From	То	Reason for Leaving	Supervisors Full Name		
Describe the work you did:					
Name and Address of Company and Type of Business From	То	Reason for Leaving	Supervisors Full Name		
Describe the work you did:					
I hereby give permission to contact the e	mployers listed above	concerning my prior work ex	kperience.		
	Signed				
If there is a particular employer(s), you do	o not wish us to conta	ct, please indicate which one	e(s)		

#### **PERSONAL REFERENCES**

(Not former employers or relatives)

Name and Occupation	Address		Phone Number		
	PLEASE READ A	ND SIGN BELOW			
may result in my dismissal. I further application obligate the Town of Capunderstand and agree that my emplo	understand that this applicat e Elizabeth in any way if the yment is at-will and can be t	ion is not intended to b Cape Elizabeth Police erminated by either my	ed, any false statement on this application be a contract for employment, nor does thin Department decides to employ me. It was self or the Town of Cape Elizabeth with of for cause) by the respective parties at any		
character and credit record through a employment I further authorize the C information is obtained through perso	iny investigation or credit ago ape Elizabeth Police Departi anal interviews with my neigh aracter, general reputation, p at within a reasonable period	encies or bureaus of its ment to make an invest abors, friends, or others personal characteristics	with whom I am acquainted. This inquirant and mode of living. I understand that I		
		X	Signature of Applicant		
			ed that the following information is needed equirements, a bona fide occupational		
Have you ever been convicted of	an offense? Yes	No	If yes, give complete details:		
Date Offense	Location	Department	Disposition of Case		
Do you have any cases pending a	against you? Yes	No	If yes, give <u>complete</u> details:		

IMPORTANT: The Cape Elizabeth Police Department utilizes the ALERT test as a pre-employment, general knowledge testing instrument. To be considered for employment, you MUST submit your ALERT T-SCORE here\_\_\_\_\_\_ and supply a copy of your ALERT test results with this application: