



DOUGLASS TOWNSHIP POLICE DEPARTMENT
ROBERT B. EVANS, CHIEF OF POLICE

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**DOUGLASS TOWNSHIP POLICE DEPARTMENT
POLICE OFFICER APPLICATION**

General Instructions: This application consists of several sections. Every one of these sections must be completed in order for the Township to accept the Application as complete. Print (do not type) an answer to every question. If a particular question does not apply to you, so state with N/A. If space available is insufficient, use reverse side and proceed with the number of the reference block. Do not mistake or omit material fact since the statements made herein are subject to verification to determine your qualifications for employment.

1. _____ 2. _____
Last Name, First Name, Middle Date of Birth

3. _____
Alias(es) Nickname(s), Maiden Name, other name changes Phone Number

4. _____
Present Address (street/city/state/zip)

5. _____
U.S. Citizen (Y/N) Naturalization No. Date Place Court

6. Social Security Number _____ Email _____

7. VEHICLE OPERATORS LICENSE – Give the following information concerning any vehicle operator license you have held or now hold.

Driver Number State Class Expiration

Have you ever had a license suspended or revoked? _____

8. CONVICTION OF A CRIME

Have you ever been convicted of a misdemeanor, felony or greater criminal violation?
Yes / No. If yes, state violation, court of jurisdiction, and date of conviction.

9. EDUCATION

A. List high school/s attended.

Name	City	Zip	Dates Attended	Dates Completed	Graduated Yes/No
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B. Higher Education. List all colleges or universities attended

Name	Dates Attended	Dates Completed	Graduated Yes/No
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C. Other schools or training (trade, vocational, military). Give for each the name and location of school, dates attended, subjects studied, certificate earned, and any other pertinent data.

10. SPECIAL QUALIFICATIONS AND SKILLS

A. Indicate type special license such as pilot, radio operator, etc.

B. Special skills you possess and machines and equipment you can use. (For example, computer programmer, polygraph operator, vehicle inspection mechanic, scientific or professional devices.)

11. FOREIGN LANGUAGE: Enter language and indicate fluency.

Language	Reading	Speaking	Understanding	Writing
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12. EMPLOYMENT: Please list your last two previous employers

From Date	Name and Address of Employer	Job Title	Why did you leave?
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To Date	Description of Duties
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Salary	Name of Supervisor	Name of Co-worker
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From Date	Name and Address of Employer	Job Title	Why did you leave?
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To Date	Description of Duties
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Salary	Name of Supervisor	Name of Co-worker
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From Date	Name and Address of Employer	Job Title	Why did you leave?
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Have you ever resigned after being informed your employer intended to discharge you for any reason? Have you ever been fired from previous employer? If yes, explain, giving name and address of employer, approximate date, and reason.

13. MILITARY STATUS:

Yes	No
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Have you ever served in the U.S. Armed Forces?

_____	_____
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Do you claim veteran's preference?

_____	_____
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14. CHARACTER REFERENCES: List only character references who have definite knowledge of your qualifications for the position of application. List 3 character references.

Name	Address	Home Phone	Work Phone	Years Known
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15. Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to take or which might require further explanation? If yes, give details.

16. Additional Information:

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me above are true, complete and correct to the best of my knowledge and are made in good faith.

Signature of Applicant

Date

Please submit resume upon returning this application.