



# ELK TOWNSHIP POLICE DEPARTMENT

## Pre-Employment Application

APPLICANT INFORMATION											
Last Name					First				M.I.	Date	
Street Address							Apartment/Unit #				
City					State				ZIP		
Phone					E-mail Address						
Date Available					Social Security No.				Date of Birth		
Position Applied for											
Are you a citizen of the United States?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Have you ever worked for our agency in the past?			YES <input type="checkbox"/>		NO <input type="checkbox"/>
Do you have any work-related experience?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, what?					
Have you ever been convicted of a crime?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain					

EDUCATION											
High School					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
College					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
Police Academy					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	PTC Cert.				

REFERENCES											
<i>Please list two personal references.</i>											
Full Name					Relationship						
Company					Phone						
Address											
Full Name					Relationship						
Company					Phone						
Address											

PREVIOUS EMPLOYMENT									
Company					Phone				
Address					Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone				
Address					Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone				
Address					Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone				
Address					Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				

MILITARY SERVICE							
Branch				From		To	
Rank at Discharge				Type of Discharge			
If other than honorable, explain							

DISCLAIMER AND SIGNATURE			
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.			
Signature			Date

OFFICIAL USE ONLY
Date Received:
Application Deadline: