



**TOWN OF LAKEVIEW
POLICE OFFICER APPLICATION**

525 N 1st Street

Lakeview OR 97630

Phone: 541.947.2029

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Roberta Vanderwall, Town Manager

Townmanger@Townoflakeview.org

READ THESE INSTRUCTIONS CAREFULLY BEFORE PROCEEDING These instructions are provided as a guide to assist you in properly completing your Personal History Statement. It is essential that the information be accurate in all respects. It will be used as the basis for a background investigation that will determine your eligibility for employment.

Your Personal History Statement should be printed legibly in black ink. Answer all questions to the best of your ability. Sign and date the "Affirmation", "Authorization for Release of Information Agreement", and "Permission to Obtain Consumer Report" forms. Your signature on the "Authorization for Release of Information Agreement" must be notarized.

If a question is not applicable to you, enter N/A in the space provided.

Avoid errors by reading the directions carefully before making any entries on the form. Be sure your information is correct and in proper sequence before you begin.

You are responsible for obtaining correct addresses including zip codes. If you are not sure of an address, check it by personal verification. Your local library may have a directory service or copies of local phone directories.

If there is insufficient space on the form for you to include all information required, attach extra sheets to the Personal History Statement. Be sure to reference the relevant section and question number before continuing your answer.

An accurate and complete form will help expedite your investigation. On the other hand, deliberate omissions or falsifications may result in disqualification. No matter how qualified you are in other respects, you cannot become a Lake County Sheriff's Office employee if your truthfulness is in doubt.

The Americans with Disabilities Act prohibits employers from making medically-related inquiries prior to a Conditional Offer of Employment. Therefore, if you are completing this personal history statement before you have received a Conditional Offer of Employment, do not divulge information concerning physical or medical conditions, either past or current.

You must include the following with your application:

- A copy of your high school diploma or GED, even if you are a college graduate.
- A copy of your DD214 military release if you served in the military.

Position Applied For: _____

TOWN OF LAKEVIEW
Pre-Employment Background Investigation
Personal Profile Questions

Name: _____ Date: _____

The following questions are an addendum to the Statement of Personal History for the Town of Lakeview. Please answer each question by circling either Yes (Y) or No (N). Any question answered Yes, needs to be thoroughly explained on a supplemental page. Be aware that if there are any willful misrepresentations, omissions or falsifications of the following questions or explanations; your application will be rejected, and you will be disqualified from applying from any future position with the Town of Lakeview Police Department, or if after your acceptance for employment, subsequent investigation should disclose misrepresentation, falsification, or omission, it will be just cause for immediate dismissal.

PERSONAL PROFILE QUESTIONS

A. GENERAL

1	Yes	No	Have you ever had any non-Oregon driver's licenses or identification cards issued to you?
2	Yes	No	Have you ever been refused a non-Oregon driver's license?
3	Yes	No	Have you ever applied for a permit to carry a concealed weapon?
4	Yes	No	Have you ever been suspended, expelled or put on probation from any junior high, high school or college?
5	Yes	No	Have you ever had automobile insurance canceled or denied?
6	Yes	No	Have you ever been placed in a "High Risk" automobile insurance category?
7	Yes	No	Have you ever been notified by the motor vehicles division that your driver's license was about to be suspended or revoked for any reason?
8	Yes	No	Have you ever been a habitual gambler?
9	Yes	No	Have you ever been publicly intoxicated?
10	Yes	No	Have you ever driven while under the influence of intoxicants?
11	Yes	No	Are you now or have you ever participated with an organization that advocates or supports the use of force or other unlawful means to deny anyone their rights under the US Constitution?

B. EMPLOYMENT

1 2	Yes	No	Have you ever applied with the Town of Lakeview previously?
1 3	Yes	No	Are you unwilling or unable to work rotating shifts, work hours, or days off?
1 4	Yes	No	Would you be incapable of using deadly force if necessary in the line of duty?
1 5	Yes	No	Should you be employed by this department, do you anticipate any income other than your salary?
1 6	Yes	No	Do you presently have any income other than your regular salary?
1 7	Yes	No	Have you ever applied for employment with any criminal justice system agencies? Which agencies? When?
1 8	Yes	No	Have you ever had another criminal justice system agency begin or complete a background investigation on you?
1 9	Yes	No	Have you ever been denied employment from another criminal justice agency?
2 0	Yes	No	Have you ever failed, dropped out, or resigned from a law enforcement academy?
2 1	Yes	No	Have you ever completed a law enforcement academy?
2 2	Yes	No	Have you ever been discharged from any position?
2 3	Yes	No	Have you ever been asked to resign from a job?
2 4	Yes	No	Have you ever resigned to avoid discharge, had a negotiated resignation, or resigned while under suspension or while dismissal proceedings were pending?
2 5	Yes	No	Have you ever had a probationary period extended for any reason?

26	Yes	No	Have you ever been the subject of a job-related investigation?
27	Yes	No	Have you ever been the subject of a sex or racial harassment complaint?
28	Yes	No	Have you ever had any complaint of unnecessary force or brutality filed against you?
29	Yes	No	Have you ever been demoted in a job?
30	Yes	No	Have you ever received penalty days off?
31	Yes	No	Have you ever had a pay raise delayed or withheld?
32	Yes	No	Have you ever left a job without giving proper notice?
33	Yes	No	Have you ever been disciplined by an employer?
34	Yes	No	Will any of your past or present employers give you an unfavorable recommendation?
35	Yes	No	Have you ever been informed by a previous employer that you were ineligible for rehire?
36	Yes	No	Have you ever been counseled or disciplined for sick leave abuse or tardiness?
37	Yes	No	Have you ever had your integrity questioned in an employment setting?
38	Yes	No	Have you ever raised your voice in anger to a co-worker or supervisor?
39	Yes	No	Have you ever been late for work more than four times a year?
40	Yes	No	Have you ever called in sick to work when you were not really sick?

C. FINANCIAL

4 1	Yes	No	Have you ever received unemployment compensation?
4 2	Yes	No	Have you ever sued anyone or been sued by anyone?
4 3	Yes	No	Have you ever had a judgement rendered against you?
4 4	Yes	No	Have you ever filed for bankruptcy or been declared bankrupt?
4 5	Yes	No	Have you ever had any of your property repossessed?
4 6	Yes	No	Have you ever had a debt turned over to a collection agency?
4 7	Yes	No	Have you ever had your wages garnished?
4 8	Yes	No	Have you ever been delinquent in paying any of your taxes?
4 9	Yes	No	Have you ever failed to file a federal income tax return?
5 0	Yes	No	Have you ever avoided paying any lawful debt by moving?
5 1	Yes	No	Have you ever failed to support any child of yours?
5 2	Yes	No	Have you ever failed to fully repay a student loan?
5 3	Yes	No	Are there any pending civil actions against you?
5 4	Yes	No	Have you ever filed a false insurance claim?
5 5	Yes	No	Have you ever settled a lawsuit out of court in which you received a cash payment?
5 6	Yes	No	Have you ever settled any civil suit out of court in which you, your insurance company or anyone else was required to make a cash payment to another party?

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D. CRIMINAL

57	Yes	No	Have you ever been convicted of a crime or an offense?
58	Yes	No	Have you ever been given a trespass warning?
59	Yes	No	Have you ever been given an eviction notice?
60	Yes	No	Have you ever been asked to take a polygraph examination?
61	Yes	No	Have you ever failed a polygraph examination?
62	Yes	No	Have you ever filed a false police report?
63	Yes	No	Have you ever pointed a firearm at another person outside of work in law enforcement or in the military?
64	Yes	No	Have you ever discharged a firearm at another person?
65	Yes	No	Have you ever been arrested or detained for shoplifting?
66	Yes	No	Have you ever been in the presence of anyone using illegal drugs in the last five years?
67	Yes	No	Have you ever knowingly allowed anyone to possess or use illegal drugs in your home or vehicle within the last five years?
68	Yes	No	Have you ever struck or injured a person since you were 18 years old?
69	Yes	No	Have you ever disciplined a child that caused bruises or injury?
70	Yes	No	Have you ever furnished alcohol to a minor not in your custodial control?

7 1	Yes	No	Have you ever been the plaintiff or the defendant of a civil restraining order or stalking order?
7 2	Yes	No	Have you ever furnished illegal drugs to anyone?
7 3	Yes	No	Have you ever given or displayed pornographic material to anyone under the age of 18 years?
7 4	Yes	No	Have you ever been the suspect in any police investigation?
7 5	Yes	No	Have you ever been charged with a crime?
7 6	Yes	No	Have you ever had a warrant issued for your arrest?
7 7	Yes	No	Have you ever been detained, questioned, held on suspicion, fingerprinted or taken into custody by law enforcement officers for any reason other than minor traffic tickets?
7 8	Yes	No	Have you ever been the victim of a crime?
7 9	Yes	No	Have you ever been placed into a diversion program as the result of an arrest?
8 0	Yes	No	Have you ever been or are you currently under investigation by any law enforcement agency concerning any alleged violation of the law?
8 1	Yes	No	Have you ever stolen anything worth more than \$50?
8 2	Yes	No	Have you ever stolen a motor vehicle?
8 3	Yes	No	Have you ever been the driver or passenger in a vehicle you were not authorized to use (joyride)?
8 4	Yes	No	Have you ever been the subject of a federal or state civil rights violation investigation?
8 5	Yes	No	Have you ever committed any sexual crime?
8 6	Yes	No	Have you ever or are you now wanted for any reason by any law enforcement agency?

87	Yes	No	Have you ever sold, cultivated, manufactured or transported any illegal drug?
88	Yes	No	Have you complied with the selective service registration requirements? If so, When? <hr/>

Answer the following questions if you have ever been in the military or in government defense service.

E. MILITARY

89	Yes	No	Do you currently hold a secret clearance issued by a federal agency?
90	Yes	No	Do you currently hold a secret clearance issued by a federal agency?
91	Yes	No	Have you ever performed duties which required certification under a "Human Reliability" or "Personnel Reliability" (PRP) program?
92	Yes	No	Have you ever served in any branch of the armed services? (if yes, answer next 6 questions)
93	Yes	No	While in the service were you ever court-martialed?
94	Yes	No	While in the service were you ever placed under military arrest?
95	Yes	No	While in the service did you ever receive any type of disciplinary action?
96	Yes	No	While in the service were you ever reduced in rank or grade?
97	Yes	No	While in the service were you ever A.W.O.L. or on unauthorized leave?
98	Yes	No	When you left the service, could you have re- enlisted if you wanted to?

ANSWER THE FOLLOWING QUESTIONS WITHOUT ANY WRITTEN EXPLANATION

Yes	No	Have you ever used illegal drugs to include marijuana? If Yes, list what drugs you have used, and date of last use.
Yes	No	Have you used any controlled substance in an unlawful manner in the last 6 months?

Remember to give explanations for any "yes" answers on an additional sheet.

Signed _____ Date _____

TOWN OF LAKEVIEW
POLICE OFFICER APPLICATION
PERSONAL HISTORY STATEMENT

A. **APPLICANT IDENTIFICATION** – Information provided in this section is used for identification purposes only.

Name:

Last, First and Middle

Home Address: _____

Street City State Zip

Mailing Address: _____

Street City State Zip

Home Phone: _____ Work Phone: _____ Ext. _____

E-mail address _____ Cell or Pager # _____

Date of Birth: _____ Social Security number: _____

Nickname(s), maiden name, or other names by which you have been known:

Place of birth: _____ Are you a U.S. citizen? Yes No

Naturalized? Yes/ No If no, please provide documents as proof of immigration.

Driver's license #: _____ Expiration date: _____ State: _____

List other States in which you've had a driver's license:

Height: _____ Weight: _____ Color of eyes: _____ Color of hair: _____

EXPERIENCE AND EMPLOYMENT – Beginning with your present or most recent job, list all employment held for the past 10 years, including part-time, temporary or seasonal employment. Include all periods of unemployment. Attach extra pages if necessary. Please indicate if you are fearful that your present job would be in jeopardy if inquiries were made.

Employer: _____ Job Title: _____
Supervisor's Name and Title: _____
From (mo./yr.): _____ To (mo./yr.): _____ Full Time: ____ Part Time: ____
Specific Duties: _____

Reason for Leaving:

May we contact this employer if you are still employed with the employer: Yes ____ No ____

Employer: _____ Job Title: _____
Supervisor's Name and Title: _____
From (mo./yr.): _____ To (mo./yr.): _____ Full Time: ____ Part Time: ____
Specific Duties: _____

Reason for Leaving:

May we contact this employer if you are still employed with the employer: Yes ____ No ____

Employer: _____ Job Title: _____
Supervisor's Name and Title: _____
From (mo./yr.): _____ To (mo./yr.): _____ Full Time: _____ Part Time: _____
Specific Duties: _____

Reason for Leaving:

May we contact this employer if you are still employed with the employer: Yes _____ No _____

Employer: _____ Job Title: _____
Supervisor's Name and Title: _____
From (mo./yr.): _____ To (mo./yr.): _____ Full Time: _____ Part Time: _____
Specific Duties: _____

Reason for Leaving:

May we contact this employer if you are still employed with the employer: Yes _____ No _____

C. EDUCATIONAL HISTORY

Did you graduate from high school or receive an equivalent diploma: Yes _____ No _____

Name of college or university you attended, if any:

From (mo./yr.): _____ To (mo./yr.): _____ Major: _____
Minor: _____
Graduation date: _____

DEGREES AND CERTIFICATIONS RECEIVED:

Have you received any specialized schooling or training: Yes ___ No ___

Name of school or training program: _____

From (mo./yr.): _____ To (mo./yr.): _____ Major: _____

Minor: _____ Graduation date: _____

Certificates, degrees, etc. earned: _____

Please identify below any special training, licenses, certificates, office equipment, languages, or other special skills you may have that are pertinent to the position for which you are applying:

A job description for the position(s) for which you are applying has been provided. Are you able to perform the essential job functions required of the position with or without reasonable accommodation(s): Yes ___ No ___

D. SPECIAL QUALIFICATIONS & SKILLS

List any special licenses you hold (such as pilot, radio operator, scuba, etc.). Show licensing authority, original date of issue, and date of expiration: List any specialized machinery or equipment, which you can operate:

If you are fluent in a foreign language, indicate in each area your degree of fluency (excellent, good, fair): LANGUAGE, READING, SPEAKING, UNDERSTANDING and WRITING

Have you ever applied for a permit to carry a concealed weapon? No Yes

If yes, please provide the following:

Permit granted: Yes _____ No _____ Date: _____

Name of law enforcement agency: _____

Purpose: _____

List any other special skills or qualifications you may possess:

E. LEGAL

Have you ever been convicted of a crime? Yes _____ No _____

Have you ever been arrested for a crime, even though you were not convicted? No Yes

Have you ever been detained (stopped, contacted, or questioned) by the police? No Yes (Other than for Traffic Infractions)

If yes, complete the following (list juvenile as well as adult occurrences): POLICE AGENCY, DISPOSITION, CRIME CHARGED, CITY & STATE, DATE OF CASE

Have you ever been involved as a party in civil litigation? Yes _____ No _____

If yes, give details:

Have you ever used an illegal drug, including marijuana? Yes _____ No _____

If yes, please list the drugs used, when last used, and the frequency of use:

F. MOTOR VEHICLE OPERATION

Has your driver's license ever been suspended or revoked?

If yes, give date, location and reasons:

List all driving citations you have received as an adult or juvenile, excluding parking tickets: MONTH & YEAR, CHARGE, CITY & STATE, DISPOSITION

Describe in a brief narrative any traffic accidents in which you have been involved, giving approximate dates and locations:

G. RELATIVES, REFERENCES, ACQUAINTANCES

Are you? single/ married/ separated/ divorced/ widowed/other

If married:

Date of marriage: _____

City & State: _____

Spouse's name and Date of Birth: _____

IF EVER SEPARATED, DIVORCED OR WIDOWED:

Previous spouse's full name: _____

Date of birth: _____

Current address: _____

Date of marriage _____

Date of divorce decree: _____

*Attach additional pages if necessary

A. **REFERENCE OR ACQUAINTANCES** – List seven persons who know you well enough to provide current information about you. Do not list relatives or former employers.

Name: _____ Years known: _____

Address

EMAIL: _____

Residence phone: _____ Business phone: _____

Business address: _____

Name: _____ Years known: _____

Address: _____

EMAIL: _____

Residence phone: _____ Business phone: _____

Business address: _____

B. **FINANCIAL HISTORY** – Sources of income

What is your present salary or wage? _____

Do you have income from any source other than your principal occupation?

Yes _____ No _____ If yes, how much? _____ How often? _____

The source? _____

Do you have a bank account? Savings account average balance: \$ _____

Name & address of bank _____

Have you ever had any debt turned over to a collection agency? _____

If yes, explain: Have you ever had anything repossessed? Yes _____ No _____

(continued next page)

1) Are there any events in your life that may reflect on your suitability to perform duties of the position for which you are applying, or is there anything in your background that requires further explanation? Yes _____ No _____ If you answered “yes”, please explain.

2) In your own handwriting, please write in a short paragraph explaining why you want this position.

AFFIRMATION:

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to the questions. I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection or termination of employment.

Signature of Applicant

Date Completed

AUTHORIZATION FOR RELEASE OF INFORMATION AGREEMENT

APPLICANT'S NAME _____

CURRENT ADDRESS _____

TELEPHONE NUMBER _____

DATE _____ SIGNATURE _____

TO WHOM IT MAY CONCERN: I am an applicant for a position with the Town of Lakeview, Oregon. The Town needs to thoroughly investigate my employment background and personal history to evaluate my qualifications for this position. It is in the public interest that all relevant information concerning my personal and employment history be disclosed to the Town of Lakeview.

I hereby authorize any representative of the Town of Lakeview bearing this release to obtain any information in your files pertaining to my employment records, or any part thereof, regardless of whether those records are considered public, private or confidential. The intent of this authorization is to provide full and free access to my background and history, for the specific purpose of conducting a background investigation that may provide relevant information for the Town of Lakeview Police Department to consider in determining my suitability for employment with the Town. It is my specific intent to provide access to personnel information, however personal or confidential it may appear to be. This release does not authorize the release of any medical records.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history including any arrest records, any information in investigatory files, efficiency ratings, complaints or grievances against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another in any case in which I was involved, attendance records, polygraph examinations, any internal affairs investigations and discipline, including any files which are deemed to be confidential or sealed.

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the requested information, regardless of any prior agreement I have made with you or your organization to the contrary. The Town of Lakeview will discontinue processing of my application and/or background check if you refuse to provide the requested information.

For and in consideration of the Town's acceptance and processing of my application for employment and background check, I agree to hold harmless and indemnify the Town of Lakeview, its officers, agents, and employees from any claim or liability associated to my background check and any decision to employ, not employ, or cease employing me with the Town of Lakeview.

I understand that if information of a serious criminal nature is discovered in this investigation, that information will be turned over to the proper authorities.

I understand that the Privacy Act, 5 USC § 552a, prohibits disclosure of certain federal records without my signed authorization or other statutory exemption. My signature above indicates my express permission to release these records pursuant to 5 USC § 552a (b), to the Town of Lakeview for their use in conducting this background check.

A photocopy or telephonic facsimile (fax) of this release shall be valid as an original, even though such photocopy or fax does not contain my original signature. This release is valid for six months from the date of my signature above.

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public for Oregon

My commission expires the _____ day of _____, 20_____.

DISCLOSURE TO APPLICANTS

THIS IS TO INFORM YOU THAT A “CONSUMER REPORT” MAY BE OBTAINED FOR EMPLOYMENT PURPOSES BY THE TOWN OF LAKEVIEW. THE TOWN REQUESTS THAT YOU SIGN THE ATTACHED AUTHORIZATION INDICATING WRITTEN PERMISSION FOR THE TOWN TO OBTAIN THE REPORT.

A “Consumer Report” includes communications from a consumer reporting agency regarding an individual’s credit history, credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living.

PERMISSION TO OBTAIN CONSUMER REPORT

I have read and understand the attached disclosure. I hereby knowingly and voluntarily give my permission for the Town of Lakeview to obtain a copy of a Consumer Report on me.

Dated this _____ day of _____, 20____.

Applicant Signature: _____

Printed Name: _____