

Fon du Lac Park District Police Department  
Application for Employment

Instructions: Fill out this application completely and accurately. All statements in your application are subject to verification. Material Misrepresentation or omissions will bar or remove you from consideration for employment. Questions answered incompletely or left unanswered may bar or remove you from consideration for employment. All answers must be legible, or they may be discarded, which may bar or remove you from consideration for employment. If additional space is required to properly answer questions, please use extra pages, matching the number of the question to the answer extensions provided. Use the term "DNA" (does not apply) if the question does not apply.

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**Position Applied For:**

- New Hire Police Officer
- Experienced Police Officer

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**Personal Information**

**1. Name – Last, First, Middle**

\_\_\_\_\_

**2. List any other names or aliases you have used or been known by (including maiden name if applicable)**

\_\_\_\_\_  
\_\_\_\_\_

**3. Home address – Street, City, State, Country, Zip Code**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Phone number (with area code)

\_\_\_\_\_

5. Email address

\_\_\_\_\_

6. Date of Birth (mm/dd/yyyy)

\_\_\_\_\_

7. Place of Birth (Include City, State, Country or Territory)

\_\_\_\_\_

8. Sex

\_\_\_\_\_

9. Height- \_\_\_\_\_

10. Weight- \_\_\_\_\_

11. Eye Color- \_\_\_\_\_

12. Hair Color- \_\_\_\_\_

13. Are you a U.S. Citizen?

\_\_\_ Yes

\_\_\_ No

If yes,

\_\_\_ Native Born

\_\_\_ Naturalized

If naturalized, please provide particulars

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. With whom do you live at the address reported above? List full names and relationships.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**15.** List every member of your immediate family who is still living, including father, stepfather, mother, stepmother, sisters, stepsisters, brothers, stepbrothers. List by name, relationship, address, occupation.

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## **Employment History**

**16.** List ALL jobs, including temporary or part time jobs you have held. Please include periods of unemployment. Put your present or most recent job first. Include military service. If you were employed under a different name, please list that name.

### **Employer #1(Present or most recent)**

Employer Name \_\_\_\_\_

Employer Address

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Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

(If this is your current employer, document your starting date and conclude with "present".)

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_

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Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #2**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_  
\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #3**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_  
\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #4**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_  
\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #5**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_  
\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #6**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #7**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #8**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #9**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**Employer #10**

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

Type of Business \_\_\_\_\_

Name and Title of Supervisor \_\_\_\_\_

Dates Employed- From and To \_\_\_\_\_ - \_\_\_\_\_

Exact Title of Position Held \_\_\_\_\_

Explain What Your Duties Were \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name You Were Employed Under \_\_\_\_\_

**17.** Indicate by number any of the employers whom you do not wish us to contact. Explain reasons on each number why you would not like us to contact the employer.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**18.** Have you ever failed to complete a probationary period for any job?

\_\_\_ Yes

\_\_\_ No

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**19.** Would you be eligible to be rehired by all of your former employers (assuming there was a job available)?

\_\_\_\_\_ Yes      \_\_\_\_\_ No

If no, please explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**20.** Are you currently on any police eligibility lists?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list all departments

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**21.** Have you ever submitted an application for employment for or to any other police department or fire department?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list all departments for which you submitted applications for employment.

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**22.** Have you ever been a law enforcement officer, a firefighter or held a similar position?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list the positions, dates (from and to) and location

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**23.** Have you ever been terminated or requested to resign from a law enforcement or firefighter position after the probationary period?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**24.** Were you ever discharged or requested to resign by an employer because of misconduct, unsatisfactory service or while under investigation?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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25. Have you ever been rejected as a job applicant because of issues raised by (A) a background investigation; (B) a polygraph examination; (C) an oral interview; (D) a physical abilities test; (E) a psychological test?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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## Education

26. List the various schools you have attended and other information requested.

### High School(s)

1) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

2) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

### Business College(s) or Trade School(s)

Name and addresses of any business colleges or trade schools you may have attended; number of years completed; dates attended; if you graduated; grade point average; field of study

1) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

Field of Study \_\_\_\_\_

2) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

Field of Study \_\_\_\_\_

3) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

Field of Study \_\_\_\_\_

4) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

Field of Study \_\_\_\_\_

**Extension or Correspondence Courses**

Name and addresses of any extension or correspondence courses you may have taken; courses completed; dates attended; goals or certifications achieved; grade point average or overall result of courses taken

1) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Dates Attended \_\_\_\_\_ to \_\_\_\_\_ GPA or Pass/Fail : \_\_\_\_\_

Goals or Certifications Achieved \_\_\_\_\_

2) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Dates Attended \_\_\_\_\_ to \_\_\_\_\_ GPA or Pass/Fail : \_\_\_\_\_

Goals or Certifications Achieved \_\_\_\_\_

3) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Dates Attended \_\_\_\_\_ to \_\_\_\_\_ GPA or Pass/Fail : \_\_\_\_\_

Goals or Certifications Achieved \_\_\_\_\_

**Community College(s), College(s), or Universities**

Name and addresses of any community colleges, colleges or universities attended; dates attended; if you graduated; grade point average; degree(s) obtained

1) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

Degree Obtained \_\_\_\_\_

2) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

Degree Obtained \_\_\_\_\_

3) Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Years Attended \_\_\_\_\_ to \_\_\_\_\_ Did you Graduate? Y \_\_\_ N \_\_\_ GPA: \_\_\_\_\_

Degree Obtained \_\_\_\_\_

**27.** Were you ever expelled or suspended from any school?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**28.** List any other formal education beyond high school you may have including special training courses that may apply to the position Police Officer, firefighter, EMT, EMS, Paramedic.

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\_\_\_\_\_  
\_\_\_\_\_

**29.** Do you have any experience as a Police Officer, for example, as an auxiliary Police Officer or former part-time or full-time Police Officer?

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**30.** Are you fluent in any languages other than English?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list languages spoken

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## **Driver's License and Traffic Record**

**31.** Can you operate an automobile?

\_\_\_ Yes

\_\_\_ No

**32.** Do you have a valid driver's license in Illinois or any other state?

\_\_\_ Yes

\_\_\_ No

Please list all states or U.S. Territories in which you have held a drivers license.

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**33.** Has your driver's license, from Illinois, or any other state, ever been suspended or revoked?

\_\_\_ Yes

\_\_\_ No

If yes, please explain, including dates and states

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**34.** Have you ever had a restricted driving permit, judicial driving permit, or has your license been held for supervision?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**35.** List ALL traffic convictions and ALL tickets or citations to which you pleaded guilty and approximate dates

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**36.** Do you currently have auto insurance?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If no, please explain

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**37.** Has your auto insurance ever been cancelled for any reason?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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### **Criminal History (Adult, Minor or Juvenile)**

**38.** In the last five (5) years, have you (even once) taken, used or experimented with any illegal drug(s), or any controlled drug(s) or prescription drug(s) (such as, but not limited to Vicodin or Darvocet) not prescribed to you?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain what drugs, where, how often, approximate dates of usage, and reasons.

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**39.** In the last five (5) years, have you (even once) sold or provided to another person any illegal drugs (including marijuana) or any controlled drug(s) or prescription drug(s)?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain in detail

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40. Do you drink alcoholic beverages?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please state frequency and amounts

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**Answering “yes” to the following questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account. NOTE: You are not obligated to disclose the existence of any conviction or arrest records which have been sealed or expunged pursuant to Chapter 20, Section 2630/12 of the Illinois Compiled Statutes.**

41. Have you ever pleaded guilty or no contest to, or been convicted of a felony?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please provide dates and details

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42. Have you ever been placed on court supervision or probation?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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43. Have you ever been fingerprinted by a police agency other than for an arrest?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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44. Have you ever been the victim of a crime?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**45.** Are there any warrants (traffic or otherwise) or judgments pending against you?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**46.** Has an order of protection or restraining order ever been entered against you?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**47.** Have you ever sought an order of protection or restraining order against someone else?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**48.** Have you ever stolen or taken any property without permission from an employer, a business, or any individual?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**49.** Have you ever been involved in any way in the crime of arson?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**50.** Did you ever plan to take part in or commit any serious crime?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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## Military Service

51. Have you ever serviced in any military organization of the United States?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list the following:

Branch \_\_\_\_\_

Unit \_\_\_\_\_

Rank \_\_\_\_\_

Dates From and To \_\_\_\_\_

Address of Base \_\_\_\_\_

Branch \_\_\_\_\_

Unit \_\_\_\_\_

Rank \_\_\_\_\_

Dates From and To \_\_\_\_\_

Address of Base \_\_\_\_\_

Branch \_\_\_\_\_

Unit \_\_\_\_\_

Rank \_\_\_\_\_

Dates From and To \_\_\_\_\_

Address of Base \_\_\_\_\_

52. Give date and location of entrance to active duty (city and state)

\_\_\_\_\_  
\_\_\_\_\_

53. Give date and location of discharge from active duty (city and state)

\_\_\_\_\_  
\_\_\_\_\_

54. What type of discharge did you receive? Be exact (honorable, medical, dishonorable conditions, etc.)

\_\_\_\_\_  
\_\_\_\_\_

55. What was your rank at discharge?

\_\_\_\_\_

**56.** Are you receiving or have you ever received a government disability pension?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**57.** Have you ever been classified by a Selective Service Draft Board as a conscientious objector?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**58.** Were you ever convicted at a court martial?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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## **Personal**

**59.** Are you paying court-ordered child support?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**60.** Are you current in the payment of child support?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If no, please explain

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**61.** Have you ever been delinquent in the payment of child support?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain (including state of delinquency, reason for delinquency, dates of delinquency)

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**62.** If it became necessary to take a human life in the course of your duties as a law enforcement officer, would any religious or other beliefs prevent you from doing so?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**63.** Do you have any other beliefs or prejudices which would prevent you from fully performing the duties of a law enforcement officer?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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**64.** Are there any incidents in your life or details not mentioned herein which may influence the evaluation of your suitability for employment as a law enforcement officer?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

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## **Residence**

**65.** List your past and present addresses, starting with the present first

a. From (month and year) to (month and year or present)

\_\_\_\_\_

Address of residence, city and state

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b. From (month and year) to (month and year or present)

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Address of residence, city and state

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c. From (month and year) to (month and year or present)

\_\_\_\_\_

Address of residence, city and state

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d. From (month and year) to (month and year or present)

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Address of residence, city and state

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e. From (month and year) to (month and year or present)

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Address of residence, city and state

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f. From (month and year) to (month and year or present)

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Address of residence, city and state

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g. From (month and year) to (month and year or present)

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Address of residence, city and state

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h. From (month and year) to (month and year or present)

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Address of residence, city and state

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I HEREBY CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS EMPLOYMENT APPLICATION, AND ALL ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT ANY MATERIAL MISREPRESENTATION OR OMISSION WILL RESULT IN DISQUALIFICATION FOR THE POSITION FOR WHICH I AM APPLYING OR TERMINATION OF EMPLOYMENT IF I HAVE BEEN EMPLOYED AT THE TIME OF DISCOVERY.

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SIGNATURE

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Printed Name

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Dated this Day

