



OAK GROVE, MISSOURI POLICE DEPARTMENT

Employment Application

Which position are you applying for: _____ Today's Date: _____

Applicant Information

Last Name: _____ First Name: _____ M.I. _____

Address: _____

City/State/Zip: _____

Telephone: _____ Email Address: _____

Are you Missouri POST Certified? Yes No If Yes, your POST Number? _____

Are you currently attending a Police Academy? Yes No

If Yes, Which Academy? _____ Graduation Date? _____

Are you 21 years or older? Yes No

Are you lawfully authorized to work in the United States? Yes No

Education

	Institution Name	Years Completed	Field of Study	Graduate or degree
High School/GED				<input type="checkbox"/> Yes <input type="checkbox"/> No
College/university				<input type="checkbox"/> Yes <input type="checkbox"/> No
Business/technical				
Additional				

Military Background

Have you served in the Armed Forces? Yes NO If Yes, What Branch: _____

Number of Years Served? _____ Rank Achieved: _____

Occupational Specialty/Special Training:

Employment History/Salary

What is the minimum salary you will accept if offered this job? _____

Have you ever been employed by the City of Oak Grove: Yes No

If yes, in which department? _____ Dates: _____

Position held: _____ Supervisor: _____

Reason for leaving: _____

Please list all previous employment with your present or most recent employer first. If you have more than six previous employers, you should attach additional sheets utilizing the same format as the application.

Employer name and address:	Position title/duties, skills:	Start/End Date:
		Reason for leaving:
Salary:	Supervisor:	Telephone:
Employer name and address:	Position title/duties, skills:	Start/End Date:
		Reason for leaving:
Salary:	Supervisor:	Telephone:
Employer name and address:	Position title/duties, skills:	Start/End Date:
		Reason for leaving:
Salary:	Supervisor:	Telephone:
Employer name and address:	Position title/duties, skills:	Start/End Date:
		Reason for leaving:
Salary:	Supervisor:	Telephone:
Employer name and address:	Position title/duties, skills:	Start/End Date:
		Reason for leaving:
Salary:	Supervisor:	Telephone:
Employer name and address:	Position title/duties, skills:	Start/End Date:
		Reason for leaving:
Salary:	Supervisor:	Telephone:

Conviction Record Information

Have you ever been convicted of a felony, misdemeanor or other violation of law other than traffic violation? Yes No

Are you subject to any pending criminal charges currently? Yes No

If you answered "yes" to either of the above questions, please complete the chart below.

Charge	Nature of Offense	Date	City/State Disposition of Case

Addition Space If Needed

DISCLOSURE AND AUTHORIZATION

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

The City of Oak Grove may obtain information about you for employment purposes from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation or personal characteristics which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security number validation, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying. You have the right, upon written request made within a reasonable time, to request whether a consumer report has been requested and compiled about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Validity Screening Solutions, PO Box 860443, Shawnee, KS 66286-0443, 866.915.0792, www.validityscreening.com, or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing the City of Oak Grove and/or its agents to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report. Employment may be refused to any individual who is subject to a pending criminal charge, has been convicted of a felony, misdemeanor, or other offense, or is not bondable (where bondability is required), if the circumstances of the pending charge or conviction substantially relate to the circumstances of the particular job. Any false information or omission on this application will disqualify you from further consideration for employment and will be grounds for dismissal, if discovered at a later date. You understand and agree that you may be required to take one or more physical examinations, including a drug screen after you have been made a conditional offer of employment. You agree and consent to take such examinations at such times directed by the City, and release the City, its officials, officers, employees and agents from any claim arising in connection with such examinations or their use.

Acknowledgment and Authorization

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and certify that I have read and understand the document. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the City of Oak Grove at any time after receipt of this authorization and throughout any resulting employment with the City of Oak Grove, if applicable. To this end, I hereby authorize, without reservation, any police department, law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, credit reporting agency, employer, or insurance company to furnish any and all background information requested by Validity Screening Solutions, PO Box 860443, Shawnee, KS 66286-0443, 866.915.0792, www.validityscreening.com, or other outside organization acting on behalf of the City of Oak Grove, and/or the City of Oak Grove itself. I agree that a faxed, electronic or photocopy of this Authorization shall be as valid as the original.

Signature: _____ Date: _____
(Required in order to consider your application complete.)

Last Name: _____ First Name: _____ MI: _____
(Please type or print)

Other Names/Alias: _____

Social Security Number: _____ Date of Birth: _____
(I understand there is a risk with sending my social security number by email and accept that risk if provided.)

EEOC Notice N-915.043 II states a pre-employment inquiry on the part of the employer for information such as date of birth or age on an application form is not, in itself, a violation of the Age Discrimination in Employment Act (ADEA). The ADEA of 1967 prohibits discrimination in employment on the basis of age.

Driver's License Number: _____ State: _____ Type: Operator's CDL/Class: _____

The information requested above is used to assist in the completion of a background investigation. The information will be maintained in a limited access file, detached from your application. The information will be used for the sole purpose of identification when conducting a background investigation. The City is fully committed to a policy of hiring without regard to sex, age, color, race, religion, national origin or disability as prescribed by Federal and State laws.