

# Borough of Ambridge Police Department



GENERAL INSTRUCTIONS: This application consists of 9 pages in several sections: a questionnaire; a Verification; a General waiver; and a description of essential job functions. Every one of these sections must be completed in order for the BOROUGH 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 referenced block. DO NOT MISSTATE OR OMIT MATERIAL FACTS SINCE THE STATEMENTS MADE HEREIN ARE SUBJECT TO VERIFICATION TO DETERMINE YOUR QUALIFICATIONS FOR EMPLOYMENT.

## QUESTIONNAIRE

1. \_\_\_\_\_ 2. \_\_\_\_\_  
Last Name First Name Middle Name Social Security Number

3. \_\_\_\_\_ 3A. (\_\_\_\_\_) \_\_\_\_\_  
Alias(es), Nickname(s) Maiden Name, Other Changes in Name Telephone Number

3B. Other Phone Numbers: \_\_\_\_\_

4. \_\_\_\_\_  
Present Residence Address Street/City/State/Zip

5. \_\_\_\_\_  
U.S. Citizen: Native (Yes/No) Naturalization No. Date Place Court

6. \_\_\_\_\_  
RESIDENCES: List all for past ten years beginning with current.

Month & Year		Address	With Whom Did You Live Where Are They Now?
From	To		


## POLICE OFFICER APPLICATION (continued)

7. VEHICLE OPERATOR'S LICENSE. Give the following information concerning any vehicle operator's license you have held or now hold:

Type of License	Number	Issuing Authority	Expiration
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Have you ever had a license suspended or revoked?

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8. CONVICTION OF CRIME.

Have you ever been convicted a crime other than a traffic violation? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, explain: \_\_\_\_\_

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9. FINANCIAL STATUS.

Do you have any income from any source other than your current listed principal occupation? Yes\_\_\_\_\_ No\_\_\_\_\_

How much? \_\_\_\_\_ How often? \_\_\_\_\_

The source(s) \_\_\_\_\_

10. PAST AND PRESENT MEMBERSHIP IN ORGANIZATIONS:

Name	Address	Zip	Type (Social, Fraternal, Professional, Etc.)	Office Held	Membership Dates	
					From	To

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## POLICE OFFICER APPLICATION (continued)

### 12. SUBVERSIVE ORGANIZATIONS:

(Yes/No)

\_\_\_\_\_ Are you now or have you ever been a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by any unconstitutional means?

\_\_\_\_\_ Are you or have you ever been affiliated or associated with any organization of the type described above, as an agent, official, or employee?

\_\_\_\_\_ Are you now associating with, or have you associated with, any individual including relatives who you know or have reason to believe are or have been members of any of the organizations identified above?

\_\_\_\_\_ Have you ever been engaged in any of the following activities of any organization of the type described above: Distribution(s) to, attendance at or participating in any organizational, social, or other activities of said organization or of any projects sponsored by them; the sale, gift, or distribution of any written, printed or other matter, prepared, reproduced, or published, by them or any of their agents or instrumentalities?

If yes to any of the answers above, describe the circumstances. Attach additional sheets for a fully detailed statement. If associated with any of these organizations, specify nature and extent of association with each, including office or position held, also include dates, places, and credentials now or formerly held. If associations have been with individuals who are members of these organizations, then list the individuals and the organization with which they were or are affiliated.

### 13. EDUCATION:

A. List all elementary, junior high and high schools attended

Name	Address	City	Zip	Dates Attended	Dates Completed	Graduated Yes/No

B. Higher Education. List all colleges or universities attended. Attach transcript from last institution.

Name	City	Zip	Dates Attended From To	Credit Hours Semester/Quarter	Degree Rec'd - Year

## POLICE OFFICER APPLICATION (continued)

- C. Other Schools or training (trade, vocational, military). For each give the name and location of school, dates attended, subjects studied, certificate earned, and any other pertinent data.

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14. SPECIAL QUALIFICATIONS AND SKILLS:

- A. Indicate type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued, and date current license expires.

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- 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.)

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15. EMPLOYMENT: Begin with your most recent job and list your work history for the past ten years, including part-time, temporary or seasonal employment, and all periods of unemployment.

From Date	Name & Address of Employer	Job Title	Why did you leave?
To Date		Description of Duties	
Salary	Name of Supervisor	Name of Co-Worker	

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## POLICE OFFICER APPLICATION (continued)

From Date	Name & Address of Employer	Job Title	Why did you leave?
To Date		Description of Duties	
Salary	Name of Supervisor	Name of Co-Worker	

*If additional employer blocks are needed, please attach requested information on separate sheet.*

Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)? If yes, state reason:

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Have you ever resigned after being informed your employer intended to discharge you for any reason? If yes, explain, giving name and address of employer, approximate date, and reasons in each case.

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### 16. MILITARY STATUS:

Yes No

Have you ever served in the U.S. Armed Forces?

If yes, attach a photocopy of discharge or separation papers.

\_\_\_\_\_

A. While in the military service were you ever convicted for any crime graded as a misdemeanor, felony or greater offense? If yes, give date, place, law enforcing authority or type of court or court martial, charge and action taken for each incident, using separate sheet to record this information.

\_\_\_\_\_

B. Are you presently a member of a U.S. Reserve or State Guard organization? If yes, complete the following:

\_\_\_\_\_

Grade and Service No.: \_\_\_\_\_

Service and Component: \_\_\_\_\_

Organization and Station or Unit and address: \_\_\_\_\_

\_\_\_\_\_ Status: \_\_\_\_\_

Indicate reserve obligation, if any: \_\_\_\_\_

## POLICE OFFICER APPLICATION (continued)

17. CHARACTER REFERENCES: List only character references who have definite knowledge of your qualifications for the position of application. List 5 character references. (Do not list relatives, former employers, or persons living outside the United States.)

	Name	Address	Home Phone	Work Phone	Years Known
1.					
2.					
3.					
4.					
5.					

18. 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.


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 belief and are made in good faith.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

POLICE OFFICER APPLICATION (continued)

WAIVER AND RELEASE FOR BACKGROUND INVESTIGATION



I, \_\_\_\_\_, hereby give the Borough of Ambridge Police Department the right to make a thorough investigation into my background, previous employment, education and references in order to ascertain my suitability for service as a police officer. I release from all liability and claims any and all persons, companies and corporations (public and private) supplying any information whatsoever to representatives of Ambridge Borough Police Department. This includes and is not limited to parties with whom I have entered into a written or oral agreement which contains a confidentiality clause. I release, indemnify and hold harmless Ambridge Borough, its officials, officers and employees from and against any and all liability which might result from conducting such an investigation.

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Signature

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Date

POLICE OFFICER APPLICATION (continued)

ESSENTIAL DUTIES OF A POLICE OFFICER

1. Running for several hundred yards;
2. Climbing over obstacles;
3. Crawling;
4. Pushing motor vehicles;
5. Pulling or carrying accident, fire or crime victims;
6. Using physical force to apprehend and subdue arrestees;
7. Withstanding prolonged exposure, as long as twelve (12) hours, to extreme weather conditions;
8. Withstanding prolonged periods of standing and sitting;
9. Withstanding frequent exposure to stress-producing situations such as encountering persons injured or killed by accidents, crimes or suicide;
10. Dealing with domestic disputes;
11. Dealing with verbal and physical abuse of the officer, including taunts, insults, and threats to the officer, family members, or fellow police officers;
12. Communicate effectively with individuals suffering from trauma;
13. Operate a motor vehicle for long periods of time;
14. Use a firearm effectively; and
15. Fill out written reports in a clear and concise manner.

I have reviewed the above list of essential job functions for an Ambridge Borough police officer and believe that:

\_\_\_\_\_ I can fully perform all duties with or without reasonable accommodations.

\_\_\_\_\_ I cannot fully perform all duties even with accommodations.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**POLICE OFFICER APPLICATION (continued)**

**VERIFICATION**

The information I have provided in the foregoing Application is true and correct to the best of my knowledge belief and understanding. I understand that any false statement contained therein is subject to the penalties prescribed by 18 Pa. C.S.A. § 4904, relating to unsworn falsification to authorities.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_