KISKIMINETAS TOWNSHIP POLICE DEPARTMENT

Armstrong County, Pennsylvania

EMPLOYMENT APPLICATION PACKET

SECTION 1 – APPLICANT INFORMATION

Position Applying For (check one): ẟ Full-Time ẟ Part-Time ẟ SRO ẟ Other

_____

Full Legal Name _____

Other Names Used _____

Date of Birth _____

Last 4 SSN _____

Driver's License Number / State _____

Home Address _____

Phone Number _____

Email Address _____

SECTION 2 – ELIGIBILITY & CERTIFICATION

Are you a U.S. Citizen? ẟ Yes ẟ No _____

Legally Authorized to Work in U.S.? ẟ Yes ẟ No _____

Act 120 Certified? ẟ Yes ẟ No _____

MPOETC Certification Number _____

Have you ever had Act 120 suspended or revoked? ẟ Yes ẟ No (If yes, explain)

_____

SECTION 3 – EMPLOYMENT HISTORY (Last 10 Years)

Employer 1

Employer Name _____

Address _____

Supervisor _____

Position Held _____

Dates Employed _____

Reason for Leaving _____

Employer 2

Employer Name _____

Address _____

Supervisor _____

Position Held _____

Dates Employed _____

Reason for Leaving _____

Employer 3

Employer Name _____

Address _____

Supervisor _____

Position Held _____

Dates Employed _____

Reason for Leaving _____

Employer 4

Employer Name _____

Address _____

Supervisor _____

Position Held _____

Dates Employed _____

Reason for Leaving _____

SECTION 4 – CRIMINAL & DRIVING HISTORY

Ever Arrested (other than minor traffic)? δ Yes δ No (Explain)

_____

Ever Convicted of a Crime? δ Yes δ No (Explain) _____

Pending Criminal Charges? δ Yes δ No _____

Driver's License Ever Suspended? δ Yes δ No (Explain)

_____

ATTACHMENT A – DETAILED BACKGROUND QUESTIONNAIRE

Have you ever used illegal drugs? If yes, type, date last used, frequency.

_____

_____

Have you ever falsified any official document?

_____

_____

Have you ever been terminated or forced to resign?

_____

_____

Have you ever been the subject of an Internal Affairs investigation?

_____

_____

Have you ever committed a crime you were not caught for?

_____

_____

Have you ever been involved in domestic violence, PFA, or similar order?

_____

_____

Have you ever defaulted on significant financial obligations?

_____

_____

Have you ever posted content on social media that could discredit law enforcement?

_____

_____

ATTACHMENT B – PERSONAL HISTORY STATEMENT

In your own words, provide a detailed personal history statement outlining your background, upbringing, education, work experience, reasons for seeking employment with the Kiskiminetas Township Police Department, and why you believe you are suited for the position of police officer. Attach additional pages if necessary.

Personal History Narrative:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

ATTACHMENT C – CHARACTER REFERENCES (NON-FAMILY ONLY)

REFERENCE 1

List three (3) character references who are not related to you by blood or marriage. References should have known you for at least two (2) years and may be contacted during the background investigation.

Years Known _____

Relationship to Applicant _____

Occupation _____

Email Address _____

Phone Number _____

City/State/Zip _____

Address _____

Full Name _____

REFERENCE 3

Years Known _____

Relationship to Applicant _____

Occupation _____

Email Address _____

Phone Number _____

City/State/Zip _____

Address _____

Full Name _____

REFERENCE 2

Years Known _____

Relationship to Applicant _____

Occupation _____

Email Address _____

Phone Number _____

City/State/Zip _____

Address _____

Full Name _____

APPLICANT CERTIFICATION

I certify that all statements contained in this application packet are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation may result in disqualification or termination. I further authorize a full background investigation including criminal history, driving record, credit history, employment verification, and reference interviews.

Applicant Signature _____

Date _____

FOR DEPARTMENT USE ONLY

Date Received _____

Background Investigator _____

Oral Board Score _____

Chief Recommendation ẟ Hire ẟ Do Not Hire _____

Board Action Date _____

MPOETC AUTHORIZATION & WAIVER (Pennsylvania Specific)

I hereby authorize the Kiskiminetas Township Police Department to request and obtain any and all records maintained by the Pennsylvania Municipal Police Officers' Education and Training Commission (MPOETC), including but not limited to certification status, training records, disciplinary records, and any notices of suspension or revocation. I understand that pursuant to Act 120 (53 Pa.C.S. Chapter 21), certification is required for appointment as a municipal police officer in the Commonwealth of Pennsylvania.

Applicant Signature _____

Date _____

BACKGROUND INVESTIGATION WAIVER & RELEASE

I, the undersigned applicant, hereby authorize the Kiskiminetas Township Police Department, Armstrong County, Pennsylvania, and its authorized representatives to conduct a comprehensive background investigation as part of my application for employment.

This investigation may include, but is not limited to: criminal history checks (local, state, and federal), Pennsylvania State Police records, MPOETC certification review pursuant to Act 120 (53 Pa.C.S. Chapter 21), driving history, credit history (if applicable), employment verification, educational verification, military records, civil court records, personal reference interviews, neighborhood inquiries, social media review, and any other lawful investigative methods deemed necessary.

I authorize any individual, employer (past or present), law enforcement agency, educational institution, financial institution, military branch, or governmental agency to release any and all information requested by the Kiskiminetas Township Police Department for purposes of evaluating my suitability for employment.

I hereby release and hold harmless the Kiskiminetas Township Police Department, Kiskiminetas Township, its elected officials, agents, employees, investigators, and all persons or entities providing information from any and all liability arising out of the release or use of such information, to the extent permitted by law.

I understand that this authorization shall remain valid throughout the duration of the hiring process and, if appointed, during my employment for purposes of administrative or disciplinary review.

This authorization is given voluntarily and with full understanding of its contents.

Applicant Printed Name _____

Applicant Signature _____

Date _____

Witness Signature (Department Representative) _____

Date _____