



CHIPPEWA FALLS POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

210 Island Street, Chippewa Falls, WI 54729
Administrative Assistant -715-726-2707
www.chippewafallspd.org

This information is for official use only and will not be released to unauthorized persons.

Date _____

NOTICE: Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable.) Applications which are not complete and legible will not be considered. If space provided is not sufficient for complete answers, or you wish to furnish additional information, attach sheets of the same size as this application, and number answers to correspond with questions.

1. NAME

Name in full (last, first, middle) _____

List all other names you have including nicknames; if female, furnish maiden name. If you have ever used any surnames other than your own true name, during what period and under what circumstances were these names used? if you have ever legally changed your name, give date, place, and court.

Place of Birth _____

2. RESIDENCES

Present Residence Address: (Apartment, Street, City, State, Zip Code) _____

Telephone Numbers: Residence _____ Cell _____

Email Address: _____

Complete address to which you wish mail sent (include zip code and telephone number if different from above).

List chronologically ALL of your past residences during the past seven years. (Include addresses while attending school if away from home and all military addresses including any off military base).

Dates		Apt. No.	Street Address	City	State
From	To				

3. EDUCATION

Name of School	Location	Dates		Course Pursued	Degree or Diplomas
		From	To		
High Schools					
Colleges					
Graduate School					
L.E. Academy/Recruit School					

Were you ever dismissed from a school because of disciplinary action?

No

Yes

(School)

(Date)

(Type of Action)

4. WORK EXPERIENCE

Give a complete record of any employment, self-employment or military service you have had in the past ten years. You may include positions beyond the ten year period if they are related to the position applied for. Start at the top with your present or most recent job. Indicate any change in job title under the same employer as a separate position.

Present or Most Recent Employer	Address of Business (Street and City)	Kind of Business
Your Title	Reasons for Leaving or Considering Leaving	Name _____ Title _____
Your Duties		Phone No. of Supv. _____
		From (Mo. & Yr.) _____ To (Mo. & Yr.) _____
		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time (_____ Hrs. Per _____)
		Rate of Pay Beginning Ending \$ _____ per _____ \$ _____ per _____
Employer	Address of Business (Street and City)	Kind of Business
Your Title	Reasons for Leaving or Considering Leaving	Name _____ Title _____
Your Duties		Phone No. of Supv. _____
		From (Mo. & Yr.) _____ To (Mo. & Yr.) _____
		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time (_____ Hrs. Per _____)
		Rate of Pay Beginning Ending \$ _____ per _____ \$ _____ per _____
Employer	Address of Business (Street and City)	Kind of Business
Your Title	Reasons for Leaving or Considering Leaving	Name _____ Title _____
Your Duties		Phone No. of Supv. _____
		From (Mo. & Yr.) _____ To (Mo. & Yr.) _____
		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time (_____ Hrs. Per _____)
		Rate of Pay Beginning Ending \$ _____ per _____ \$ _____ per _____
Employer	Address of Business (Street and City)	Kind of Business
Your Title	Reasons for Leaving or Considering Leaving	Name _____ Title _____
Your Duties		Phone No. of Supv. _____
		From (Mo. & Yr.) _____ To (Mo. & Yr.) _____
		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time (_____ Hrs. Per _____)
		Rate of Pay Beginning Ending \$ _____ per _____ \$ _____ per _____

Use a separate sheet to continue with any additional qualifying employment data, using same format as above:

May we obtain references from the employers named above? Yes No
If no, name and explain exceptions.

If you were discharged for cause from any employment, state the details:

5. REFERENCES

Give five references: Professional acquaintances (Numbers 1, 2, and 3)
Personal acquaintances (Numbers 4 and 5)

1. Complete Name	No. of Yrs. Acquainted	Occupation
(Street)	(City & State)	(Phone)
Residence or Business Address _____		

Email Address _____		

2. Complete Name	No. of Yrs. Acquainted	Occupation
(Street)	(City & State)	(Phone)
Residence or Business Address _____		

Email Address _____		

3. Complete Name	No. of Yrs. Acquainted	Occupation
(Street)	(City & State)	(Phone)
Residence or Business Address _____		

Email Address _____		

4. Complete Name	No. of Yrs. Acquainted	Occupation
(Street)	(City & State)	(Phone)
Residence or Business Address _____		

Email Address _____		

5. Complete Name	No. of Yrs. Acquainted	Occupation
(Street)	(City & State)	(Phone)
Residence or Business Address _____		

Email Address _____		

6. GENERAL

Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties of a law enforcement officer, or which might require further explanation?

Yes No If Yes, give details

7. MILITARY RECORD

Have you ever served active duty in the Armed Forces of the United States?

No Yes Highest rank attained _____

Branch of Military Service _____ Serial Number _____ Dates of active duty
From _____ To _____
(month, day, year)

Type of Discharge _____ Basis for Discharge _____ Member of Reserve? No Yes
 Ready Standby
Service Branch _____

Was any type of disciplinary action taken against you in service which remains a part of your permanent record?

No Yes Nature of: _____

National Guard _____ Present _____ Former _____ None _____
If you attended drills, meetings, or camps, give name of unit and location.

8. COURT RECORD

You should understand that a job offer will be contingent on several things, including but not limited to, criminal history investigations for what the Wisconsin State Statutes deem substantially related to this particular job or licensed activity. If you have any concerns about this, you may list them below.

9. OTHER RELEVANT TRAINING

Training	Location	Date
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

I understand that any appointment tendered me will be contingent upon the results of a complete background investigation, and I am aware that willfully withholding information or making false statements on this application will be basis for dismissal. I agree to these conditions and hereby certify that all statements made on this application are true and complete, to the best of my knowledge.

Signature of Applicant _____

Date _____