

APPLICATION FOR EMPLOYMENT LAW ENFORCEMENT, JAIL OR SECURE JUVENILE DETENTION OFFICER

NOTICE: All questions must be answered. Incomplete or illegible applications will not be considered. If the space provided is insufficient for complete answers or you wish to furnish additional information, please attach additional pages.

	1. PERSO	NAL INFORMATION					
Name (Last, First, Middle)	ocial Security # (xxx-xx-xxxx)						
Address (Apartment, Street, P.O. Box)	Home Telephone Number						
City	State		Zip Code	Work Telephone Number			
Email Address	ł			Cell Phone Number			
Have you successfully completed the basic train	ing required for c	ertification (i.e. 720-h	our law enforc	ement academy)? Yes No			
have you successfully completed the basic train	ing required for c						
If yes, what type(s) of basic training have you su	iccessfully comple	eted? Law Enforcer	ment Jai	Secure Juvenile Detention			
If applicable, include the name of the school whe	ere you completed	d basic training and t	he date that tra	ining was completed:			
				_			
Are you at least 18 years old? Yes No							
Are you a United States citizen? Yes No							
Do you have a high school diploma, GED or HSE	Do you have a high school diploma. GED or HSED? Yes No						
De you have an Associate Degree or 60 associat	to dograa laval aal	llaga aradita ar higha					
Do you have an Associate Degree or 60 associat	te degree level col	nege creats or highe					
If No, were you employed as a law enforcement officer prior to February 1, 1993? Yes No							
The college credit requirement as written in Wiscons officers first employed on or after February 1, 1993.	sin Administrative C	Jode § LES 2.01(1)(e)	, pertains to law	enforcement and tribal law enforcement			
Have you ever been convicted of a felony? Yes							
		Г					
Have you ever been convicted of a misdemeanor	r crime of domest	ic violence? Yes					
Are you prohibited by state or federal law from p	oossessing a firea	rm? Yes No					
Do you possess a valid Wisconsin driver's licens	se or a valid drive	r's license from anot	her state? Ye	s No			
	<u> </u>						
		EDUCATION ates					
	From	_ / / \	_				
Name of School(s)	(mm/yyyy)	To (mm/yyyy)	Degi	ree, Diploma, or Credits Earned			
High School(s)							
College(s)							

3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. To furnish additional employment information, attach sheets of the same size and format as this application.

Name and Address of Employer	Dates of Employment			
Name and Address of Employer	From (mm/yyyy)	To (mm/yyyy)		
Name of Employer:				
Address:	Full-Time Part-Time	Annual Salary/Wages:		
City:	State:	Zip Code:		
Supervisor's Name / Telephone Number:	May we contact the employer / supervisor? Yes No			
Position and kind of work:	Reason for Leaving:			
	Dates of En	nnlovment		
Name and Address of Employer	From (mm/yyyy)	To (mm/yyyy)		
Name of Employer:				
Address:	Full-Time Part-Time	Annual Salary/Wages:		
City:	State:	Zip Code:		
Supervisor's Name / Telephone Number:	May we contact the employer / supervisor? Yes No			
Position and kind of work:	Reason for Leaving:			
	Dates of Employment			
Name and Address of Employer	From (mm/yyyy)	To (mm/yyyy)		
Name of Employer:				
Address:	Full-Time Part-Time	Annual Salary/Wages:		
City	State:	Zip Code:		
Supervisor's Name / Telephone Number:	May we contact the employer / supervisor? Yes No			
Position and kind of work:	Reason for Leaving:			

4. MILITARY SERVICE							
Branch of Service	From (mm/yyyy)	To (mm/yyyy)	Active Duty or Reserve	Highest Grade	Skill Specialty or Primary Duty		
Honorably Discharged from Military Service? Yes No Not Applicable							

5. REFERENCES

Give three references (not relatives, or present employer; avoid listing members of the clergy).

Name:

Position/Title/Profession:

Number of Years Acquainted:

Address:

City/State/Zip:

Telephone Number:

Name:

Position/Title/Profession:

Number of Years Acquainted:

Address:

City/State/Zip:

Telephone Number:

Name:

Position/Title/Profession:

Number of Years Acquainted:

Address:

City/State/Zip:

Telephone Number:

6. GENERAL

COMPLETE IF INSTRUCTED TO DO SO BY EMPLOYING AGENCY.

Attach no more than one additional page for each answer.

- A. Why have you chosen to apply for this position?
- B. Discuss things you have done which have contributed to your life experience. Be sure to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.
- C. Why do you believe you could relate to and/or work with people of different races, genders, cultures, ages, socio-economic groups, and educational levels?

APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW

Information provided and statements made as part of this application may be grounds for not employing you or for dismissing you after you begin work. All information and statements made are subject to verification.

CERTIFICATION

ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION, ARE COMPLETE, CORRECT, AND TRUE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

Applicants Signature

Date Signed

Under the provisions of § 19.36, Wis. Stats., I request that my identity as an applicant for this position not be revealed without my consent or until required under law.

Applicants Signature

Date Signed