



LINCOLN CHARTER TOWNSHIP POLICE DEPARTMENT

APPLICANT REVIEW PACKET

BACKGROUND INVESTIGATION QUESTIONNAIRE

IMPORTANT

This packet and the information provided herein is confidential and used for the sole purpose of conducting a pre-employment background investigation. False, misleading or incomplete information will constitute grounds for denial of employment or termination of employment.

SERVING STEVENVILLE AND LINCOLN TOWNSHIP

5599 S. CLEVELAND AVE.- STEVENVILLE, MICHIGAN 49127 - TELEPHONE (269) 429-2444 - FAX (269) 429-8077

Personal Background

1. Full Name

(First) (Middle) (Last)

2. Present Address

(Street and Number) (City) (State) (Zip)

3. Permanent Address

(Street and Number) (City) (State) (Zip)

4. Temporary Address

(Street and Number) (City) (State) (Zip)

5. Telephone Number _____ (Home) _____ (Business)

6. Mobile Telephone _____ Email Address _____

7. Have you used any name (including nicknames), other than that listed above, to obtain education, employment, finances, or for any other purpose? Yes No

If yes, explain

(If a legal change, indicate date, location and authority)

8. Date of birth _____ Age _____ Place of Birth _____

9. Are you a U.S. Citizen? Yes No

10. Your Physical Description _____ (Height) _____ (Weight) _____ (Hair) _____ (Eyes)

11. List All Identifying Scars, Marks and/or Tattoos

Personal Background (cont.)

12. Have you ever made application to another Law Enforcement Agency? Yes No

If yes, list the date, name and address of the agency. (If you have applied to more than one, list the same information for each agency on an additional sheet.)

Date _____

Name _____

Address _____

Current Status of Application _____

13. Are you able to work any shift, e.g. midnights, afternoons, days? Yes No

If no, explain _____

Applications are required to furnish the following information relative to the background investigation if applicable:

- A. Birth Certificate
- B. Social Security Card
- C. Current Driver's License
- D. Diplomas, degrees, certificates of training or school transcripts
- E. DD-214 Military Discharge
- F. Copies of all accident reports
- G. MCOLES Certificate/or proof of employment as a Police officer

Autobiography

14. In the space provided, provide use with a written history of your life. Follow the instructions carefully.

- Use a black ball point pen, No pencils.
- Sign your Autobiography using your full legal signature.

Traffic and Criminal History

15. Michigan Operators License Number _____

Other State Operators License Number _____

16. Vehicle Type _____ License Plate # _____ Liens _____

Vehicle Type _____ License Plate # _____ Liens _____

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Vehicle Type _____ License Plate # _____ Liens _____

17. Have you ever been arrested for any reason other than a Traffic Violation? Yes No

If yes, list the date, charge, disposition, location and name and address of the arresting agency.

Note: The above section is to include any and all arrests other than those for traffic violations.

Having been arrested does not mean you cannot be appointed. The seriousness, recency, number, pattern and surrounding circumstances will be considered.

18. Have you ever been involved in a civil litigation? Yes No

If yes, list the date, purpose, disposition and jurisdiction of the action.

19. Have you ever been involved in an accident where another person was injured or killed?

Yes No

If yes, explain in detail _____

Questions 20-24 concern experiences that might affect your attitude toward Law Enforcement. "Yes" answers do not mean that you cannot be appointed.

20. Have any immediate family members (father, mother, brothers, sisters, spouse, children) been convicted of any crime other than a traffic violation in the last five (5) years? Yes No

If yes, list name, charge and disposition _____

Traffic and Criminal History (cont.)

21. Have you ever been investigated by any Law Enforcement Agency for any reason?

Yes No

Investigation _____

22. Have you or a member of your immediate family been a victim of crime? Yes No

If yes, list particulars _____

23. List all Traffic Citations which you have been issued. (Include date, charge, location, name and address of issuing Agency and disposition.)

24. List all traffic accidents in which you have been involved. (Include date, location and Police Department.)

Education

25. High School _____

Address _____ Telephone _____

Dates Attended From _____ To _____

Did you Graduate? Yes No

If no, have you completed a General Education Development Test (G.E.D)? Yes No
(YOU MUST PROVIDE HIGH SCHOOL TRANSCRIPTS OR G.E.D SCORES.)

Education (cont.)

26. College _____

Address _____ Telephone _____

Dates Attended From _____ To _____

Did you Graduate? Yes No Degree _____

Major _____ If No, years completed? _____

27. Correspondence or Trade School _____

Address _____ Telephone _____

Dates Attended From _____ To _____

Courses _____

Years, Months or Hours Completed _____

Did you Graduate? Yes No

28. List any coursework or training which you have completed which you believe would be directly useful to you for these positions such as Police Science, Criminology, Sociology, Public Speaking or Law.

Note: If you have further education or have attended other high schools, colleges or correspondence or trade schools, use an additional sheet and give details.

29. What languages can you read, speak and/or understand? _____

Financial Status

30. Have you ever been refused credit? Yes No

If yes, give name of business that refused credit, dates and reason for refusal.

Name of Business

Date

Reason for Refusal

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

31. Have you now or have you ever had a court action, such as a garnishment, wage assignment or judgement against you? Yes No If yes, give details below.

| Type of Action | When Occurred | Original Amount | Present Balance | Monthly Payment | Amount or Arrears, if any |
|----------------|---------------|-----------------|-----------------|-----------------|---------------------------|
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

32. Have you ever filed for bankruptcy? Yes No

If yes, explain _____

33. Have you ever had any personal property repossessed? Yes No

If yes, explain _____

34. Have you ever been subjected to any type of collection action? Yes No

If yes, explain _____

Activities

35. List any activities in which you have been involved which you believe reflect your interest in social service work or community affairs. Include, for example, Tutoring, Drug Treatment, Crisis Work, Correctional Program Assistance, Coaching or Counseling.

36. List any Honors, Awards or other forms of recognition which you have received for Scholarship, Athletics or other achievements.

37. List any Offices of Leadership (Elected or Appointed) which you have held as part of, or apart from school. Provide dates.

Employment History

38. Were you ever sued for actions arising from your duties? Yes No

If yes, explain _____

Employment History (cont.)

39. Have you ever been subject to an internal investigation or inquiry? Yes No

If yes, explain _____

40. Were you ever the subject of a citizen's complaint? Yes No

If yes, explain _____

41. Chronological history of employment, account for all periods. Include casual employment. Include all periods of unemployment, and state what you did during these periods. List the most recent position first. Include both fulltime and part-time positions.

NOTE: Employers, supervisors and co-workers may be interviewed by the Investigator. Employment discharge or discipline does not mean you cannot be appointed. The seriousness, recency, and surrounding circumstances will be considered.

Dates of Employment From _____ To _____

Employer _____ Telephone _____

Address _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary/Hourly Wage \$ _____

What were your duties? _____

Reason for leaving? _____

Dates of Employment From _____ To _____

Employer _____ Telephone _____

Address _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary/Hourly Wage \$ _____

What were your duties? _____

Reason for leaving? _____

Employment History (cont.)

Dates of Employment From _____ To _____

Employer _____ Telephone _____

Address _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary/Hourly Wage \$ _____

What were your duties? _____

Reason for leaving? _____

Dates of Employment From _____ To _____

Employer _____ Telephone _____

Address _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary/Hourly Wage \$ _____

What were your duties? _____

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Dates of Employment From _____ To _____

Employer _____ Telephone _____

Address _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary/Hourly Wage \$ _____

What were your duties? _____

Reason for leaving? _____

Dates of Employment From _____ To _____

Employer _____ Telephone _____

Address _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary/Hourly Wage \$ _____

What were your duties? _____

Reason for leaving? _____

Military

Selective Service Number _____ Military Serial Number _____

42. Have you ever served in the military of a foreign government? Yes No

If yes, answer questions 46-50 regarding that service.

43. Selective Service Board Number _____ Address _____

44. Draft Classification _____ Draft Lottery Number _____

45. Dates of Active Service From _____ To _____

From _____ To _____

46. Branch of Service _____ Last Station _____

47. Rank upon discharge _____ Type of Discharge Honorable Other

48. Were you ever the subject of a court martial or other disciplinary action? Yes No

If yes, use an additional sheet to give details. _____

49. Are you presently, or have you ever been a member of any Military Reserve Organization?

Yes No

If yes, Branch of Service _____ Rank _____

Present Station _____

50. Were you ever the subject of an investigation or disciplinary sanction while in the military?

Yes No

If yes, provide a detailed explanation _____

NOTE: You must provide Certificate of Separation, DD0-214, if you were separated from any branch of the Military Service.

References

51. List five (5) character references, other than employers or supervisors, who know you intimately.

A. Name _____

Business Address _____

Residence Address _____

Telephone _____ Business Telephone _____

Email _____ Relationship _____

B. Name _____

Business Address _____

Residence Address _____

Telephone _____ Business Telephone _____

Email _____ Relationship _____

C. Name _____

Business Address _____

Residence Address _____

Telephone _____ Business Telephone _____

Email _____ Relationship _____

D. Name _____

Business Address _____

Residence Address _____

Telephone _____ Business Telephone _____

Email _____ Relationship _____

E. Name _____

Business Address _____

Residence Address _____

Telephone _____ Business Telephone _____

Email _____ Relationship _____

References (cont.)

52. List the names and addresses of any Law Enforcement Officials who you know personally.

Name _____

Address _____

Agency Employed By _____ Telephone _____

Name _____

Address _____

Agency Employed By _____ Telephone _____

Name _____

Address _____

Agency Employed By _____ Telephone _____

Name _____

Address _____

Agency Employed By _____ Telephone _____

Residence Record

53. List all residences since birth.

Dates _____ (From) _____ (To) Address _____

Recreation

54. List any Recreational Activities which you participate in.

55. List all civic groups, fraternities, leagues or clubs you belong to, if any:

Other Information

56. In the area below, you may furnish any information which you feel will be of value to the investigator. Or, you may further explain anything you wish regarding your application for these positions.

READ CAREFULLY BEFORE SIGNING

I certify that all answers to the above questions are true and complete to the best of my knowledge, and I agree and understand that any misstatement of material facts contained in this questionnaire may cause forfeiture upon my part of all rights to any employment in the service of the Lincoln Charter Township Police Department.

(Signature) _____ (Date) _____

(Witness) _____ (Date) _____

Investigator's Comments



LINCOLN CHARTER TOWNSHIP POLICE DEPARTMENT

TO WHOM IT MAY CONCERN:

I hereby authorize any representative of the Lincoln Charter Twp. Police Department bearing this release to obtain information from your files or other sources pertaining to my personal background including, but not limited to, academic, athletic, achievement, attendance, personal history, disciplinary action, medical, credit or any other records you may have regarding me. I hereby direct you to release such information upon the request of the bearer. This release is executed with the full knowledge and understanding that the information is for the official use of the Lincoln Township Police Department. I hereby release you, the institution or establishment which you represent both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below:

FULL NAME: _____

CURRENT ADDRESS: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____ **TELEPHONE NUMBER:** _____

Dated This _____ Day Of _____, 20 _____

SIGNATURE

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LINCOLN CHARTER TOWNSHIP POLICE

I, Officer (print name) _____

Do Not Have _____

Do Have _____

Any convictions in any state on my record, of domestic violence or assaults that could be considered a domestic violence offense under today's state or federal standards.

I declare that the foregoing statement is true to the best of my information, knowledge and belief.

Signed: _____ Date _____

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