

# WOODSON TERRACE POLICE DEPARTMENT

Chief Dominic Orlando  
Chief of Police

4305 Woodson Road, Woodson Terrace, MO 63134

Captain Bret Carbray  
Assistant Chief of Police



## APPLICATION FOR EMPLOYMENT

### Directions:

- Read each question carefully before answering.
- Be certain that each question is answered COMPLETELY and CORRECTLY and your answers are legible.
- Submit all documents as requested.
- If a question does not apply to you, write "N/A" (not applicable) in the space.
- Initial each page on the bottom right corner.
- Additional space is provided on pages 8 and 9 for answers that require clarification or further explanation. Please indicate the page number and the section when using the additional information page.

Under Federal Law the disclosure of your Social Security Number is completely voluntary. Your refusal to reveal your Social Security Number will in no way affect applications for any consideration for employment provided by the Woodson Terrace Police Department.

### WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

### Woodson Terrace Police Department Mission Statement

Our mission is to provide essential services, preserve peace and order, reduce the occurrence and impact of crime, facilitate traffic safety, and protect the constitutional rights of all persons.



# Woodson Terrace Police Department

(PLEASE PRINT)

## 1. APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Cell Phone#:		Home Phone#		Other Phone#	
List any other names you have ever used:					
Are you a citizen of the United States? <input type="radio"/> yes <input type="radio"/> no If no, are you authorized to work in the U.S.? <input type="radio"/> yes <input type="radio"/> no					
Have you ever previously applied with the City of Woodson Terrace? <input type="radio"/> yes <input type="radio"/> no If so, when?					
Place of Birth:		Date of Birth		Social Security Number	
Hgt:	Wgt:	Hair:	Eyes:	Positioned Applied for:	
Social Security Number:(optional)		Desired Start Date:		Desired Salary:	
Have you filed an employment application with another agency recently? <input type="radio"/> yes <input type="radio"/> no If "Yes" please list below					
Organization or Firm Name	Address	Position applied for	Date	Disposition	
Are you acquainted with any Woodson Terrace Police Department Employee? <input type="radio"/> yes <input type="radio"/> no If "Yes" please list below					

## 2. EDUCATION

High School		Address	
From	To	Did you graduate?	Degree
College		Address	
From	To	Did you graduate?	Degree
Other		Address	
From	To	Did you graduate?	Degree

## 3. MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain:		

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## 4. EMPLOYMENT

Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender.

Company		Phone (    )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From                      To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="radio"/> yes <input type="radio"/> no		
Company		Phone (    )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From                      To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="radio"/> yes <input type="radio"/> no		
Company		Phone (    )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From                      To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="radio"/> yes <input type="radio"/> no		
Company		Phone (    )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From                      To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="radio"/> yes <input type="radio"/> no		
Company		Phone (    )
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From                      To	Reason for Leaving	
May we contact your previous supervisor for a reference? <input type="radio"/> yes <input type="radio"/> no		

<b>5. PROFESSIONAL LICENSES, REGISTRATION OR CERTIFICATES</b> (EMT, GVW, Diver, POST, etc.)					
Name and complete address of Police Academy or Professional Licensing Agency:					
Name of Police Academy					
Street Address				Apartment/Unit/Suite #	
City		State		ZIP	
Type of license					
License Number:			Date issued		
<b>6. SPECIALIZED SKILLS</b>					
FOREIGN LANGUAGE		READING	SPEAKING	UNDERSTANDING	WRITING
Briefly list any training or skills, including computers, that would be of assistance in the job you are applying for. If you have any copies of certificates for any training, please attach them to the application:					
<b>7. FAMILY</b> Are you ? _____ Single _____ Married _____ Separated _____ Divorced _____ Widowed					
Spouse or Fiance's Name		DOB:	Address	Phone	Date of Marriage
Separated or Ex-spouse's name:		Date separated:	Address	Phone	Cause Number
If Spouse is deceased, provide full name:				Date of Death	
<b>LIST YOUR SPOUSE AND ALL CHILDREN RELATED TO YOU OR YOUR SPOUSE</b>					
NAME	RELATION	DATE OF BIRTH	ADDRESS	SUPPORTED BY WHOM	
<b>List the full names of your immediate family such as father, mother (maiden), brothers, and/or sisters.</b>					
NAME	ADDRESS	RELATIONSHIP	DOB	PHONE	OCCUPATION
					<b>Page 4     Initials</b>

**8. RESIDENCE: LIST ALL PLACES YOU HAVE LIVED IN THE PAST 10 YEARS**

MONTH/YEAR FROM	MONTH/YEAR TO	ADDRESS	LIVED WITH?

**9. CRIMINAL CONVICTIONS:**

Other than traffic, have you, as an adult or juvenile, been charged or convicted of a Felony, Misdemeanor, or Domestic Assault? ☐ yes ☐ no If yes, list below

CHARGE	AGENCY	COURT OF JURISDICTION	LOCATION (City, County, State)	DATE

**10. Driving History:**

List all driving citations or summonses you have received beginning with the most recent.

Month/Year	Charge	City/State	Issuing Department/Agency	Disposition

**11. Vehicles**

List all vehicles which you currently own, lease, or personally use.

Year	Make	Model	License Number	State

**12. Vehicle Accidents**

How many vehicle accidents have you been involved in during the past 5 years?

List the accidents:


### 13. REFERENCES

Please list three professional references you have known for at least 3 years or more.

Full name	Known how long?
Relationship	Phone (    )
Address	
Full name	Known how long?
Relationship	Phone (    )
Address	
Full name	Known how long?
Relationship	Phone (    )
Address	

### 14. E-MAIL ADDRESS: List all E-mail addresses:

Primary	Secondary
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### 15. SOCIAL MEDIA: List all social media site accounts, personal Blogs, and screen names that you have an active or past accounts with.


### 16. Financial Status: List all sources of income at the present time.

Type of Income	Firm or Source of Income	Annual Amount
Your Salary		
Other Employment		
Dividends / Interest		
Military		
Other (Specify)		
		Total:

If your spouse is employed, list the name of the business:	Phone:
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Title:	Company Address:
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Mark "Yes" if any of the questions involves you, your spouse, or an ex-spouse. List an explanation on pages 8 or 9 if you marked "yes" to any questions below.

A. Have you ever been delinquent in any of your financial obligations?	<input type="radio"/> yes	<input type="radio"/> no
B. Have you ever had any of your property repossessed?	<input type="radio"/> yes	<input type="radio"/> no
C. Have you ever filed bankruptcy?	<input type="radio"/> yes	<input type="radio"/> no
D. Have you ever been sued in court?	<input type="radio"/> yes	<input type="radio"/> no
E. Has your tax return ever been audited by the IRS for any reason other than a random audit?	<input type="radio"/> yes	<input type="radio"/> no

### 17. NOTICE TO APPLICANT

Information that you provide on this application is subject to verification. Previous employers may be contacted as references. Do you want to be informed before we contact your present employer?

☐ yes    ☐ no

18. Employment Questionnaire -List explanations on pages 8 or 9 for any marked "yes" questions.		
A. Do you know of any reason that you could not pass a background check?	<input type="radio"/> yes	<input type="radio"/> no
B. Have you ever been dismissed, fired, or asked to resign from any employment?	<input type="radio"/> yes	<input type="radio"/> no
C. Have you ever received disciplinary action from an employer?	<input type="radio"/> yes	<input type="radio"/> no
D. Have you ever stolen from an employer?	<input type="radio"/> yes	<input type="radio"/> no
E. Have you ever been unemployed for a period of time in excess of 6 months?	<input type="radio"/> yes	<input type="radio"/> no
F. Have you ever assisted someone in committing a crime?	<input type="radio"/> yes	<input type="radio"/> no
G. Have you ever falsified a police report?	<input type="radio"/> yes	<input type="radio"/> no
H. Have you ever accepted money not to report a crime?	<input type="radio"/> yes	<input type="radio"/> no
I. Has any driver's license issued to you ever been suspended or revoked?	<input type="radio"/> yes	<input type="radio"/> no
J. Were you ever served with a criminal or civil subpoena.	<input type="radio"/> yes	<input type="radio"/> no
K. Have the police ever been called to any of your former or current residence for any reason?	<input type="radio"/> yes	<input type="radio"/> no
L. Are you currently under investigation for any violation of the law?	<input type="radio"/> yes	<input type="radio"/> no
M. Have you ever been suspended, expelled, or asked to leave any school for disciplinary reasons?	<input type="radio"/> yes	<input type="radio"/> no
N. Have you ever committed a crime where you were not arrested or the crime went undetected?	<input type="radio"/> yes	<input type="radio"/> no
O. Have you ever served in a military or naval organization of any foreign government?	<input type="radio"/> yes	<input type="radio"/> no
P. Have you ever used, sold, or otherwise handled in an illegal manner any controlled substance?	<input type="radio"/> yes	<input type="radio"/> no
19. Use of Force:		
<p>A. If the necessity arose for you to use deadly force in the course of your duties as an officer, would you have any relectancy to do so:</p> <p>If "Yes", please explain in detail:</p> <div style="text-align: right;"><input type="radio"/> yes    <input type="radio"/> no</div>		
<p>B. Have you ever used a weapon to defend yourself or another?</p> <p>If "Yes", please explain in detail:</p> <div style="text-align: right;"><input type="radio"/> yes    <input type="radio"/> no</div>		
<p>C. As the need to do so may arise at any time, are you physically capable of making a forceful arrest requiring physical strength and exertion?</p> <div style="text-align: right;"><input type="radio"/> yes    <input type="radio"/> no</div>		
In 25 to 50 words, explain why you wish to be a Police Officer at the Woodson Terrace Police Department.		

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Use this page for any addition information. List the section number where the additional information applies.

[illegible]



Use this page for any addition information. List the section number where the additional information applies.

[illegible]

## 20. DISCLAIMER AND SIGNATURE

I acknowledge that, unless otherwise defined by law, any employment relationship with this department is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date:



# WOODSON TERRACE POLICE DEPARTMENT

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Chief of Police

4305 Woodson Road, Woodson Terrace, Missouri 63134

Captain Bret Carbray  
Assistant Chief of Police



## Certificate of Applicant Authorization for Release of Information

\_\_\_\_\_  
Last Name First Name Middle Initial

\_\_\_\_\_  
Address

DOB: \_\_\_\_\_

I \_\_\_\_\_, do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to ANY authorized representative of the Woodson Terrace, Mo Police Department, whether the said records are of public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions, including records of deposits, withdrawals and balances of checking and savings accounts, and loans, and also the records of commercial or retail credit agencies (including credit reports and/or ratings); military records; public utility companies; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, and salary records; real estate and personal property tax statements and records, and other financial statements and records wherever filed; medical records; records of complaint, arrest, trial and/or convictions for alleged or actual violations of law; including criminal, civil and/or traffic records; the results of any polygraph examinations; records of complaint of a civil nature made by or against me, wheresoever located, and to include the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case in which I presently have, or have had an interest;

I reiterate, and emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation which may provide pertinent data for the Woodson Terrace Mo Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I hereby release you, as the custodian of such records, and any school, college, university, or other educational institution, consumer reporting agency, or retail business establishment including it's officers, employees, or related personnel, 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. Consent is granted to the Woodson Terrace Mo Police Department to furnish such information, as described above, to third parties in the course of fulfilling it's official responsibilities.

I understand that all materials pertaining to this background investigation become the property of the Woodson Terrace Mo Police Department and will not be returned to me.

\_\_\_\_\_  
Print Name Signature Date

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

My Commission expires \_\_\_\_\_ 20\_\_\_\_\_.

Notary \_\_\_\_\_.

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