



## Fairway Police Department

5252 Belinder Ave, Fairway, Kansas 66205

913-262-2364 | 913-262-1881 (FAX)

J.P. Thurlo, Chief of Police



## Application for Employment

This is to advise you that the information solicited in this application for employment is necessary to complete the background investigation. This is to determine your eligibility for employment with the Fairway, Kansas Police Department. To ensure the department will have adequate information to complete this investigation, it is necessary that you complete the application in its entirety and submit all documents requested. You should be aware that willfully making a false statement or concealing a material fact in your application or subsequent interviews can be the basis for rejection as a candidate for employment with the Fairway, Kansas Police Department. Additionally, if you have already been hired and it is discovered you made false statements or concealed facts on your application or subsequent interviews will be the basis for termination.

---

Signature of Applicant

---

Date

Instructions: Print or type all answers. Read every question carefully and answer every question. Do not leave any blank spaces, if the question does not apply, write "DNA". Incomplete or unsigned applications cannot be accepted. Use the remark section, page 14, to explain any answer. Attach additional sheet if more space is required. All information is subject to verification. This application is confidential and will be used for official use only.

## Fairway Police Department

### **Equal Employment Opportunity Statement**

It is the policy of the City of Fairway, Kansas not to discriminate in its employment and personnel practices because of a person's age, sex, race, marital status, creed, color, national origin, religion, disability, citizenship, veteran status, and ancestry unless based upon a bona fide occupational qualification.

### STATEMENT OF PERSONAL HISTORY

Job Title Applying For: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

For purposes of Kansas Law Enforcement Training Center certification, you must be a citizen of the United States.

Are you a United States Citizen?: \_\_\_\_\_ Yes \_\_\_\_\_ No

After reviewing the job description, are you able to preform the essential functions of the position for which you are applying with or without reasonable accommodation?

\_\_\_\_\_

**MILITARY RECORD**

Branch of Service: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Date Separated: \_\_\_\_\_

Honorable Discharge: \_\_\_\_\_ Yes \_\_\_\_\_ No

If "No", give type of separation: \_\_\_\_\_

Were You Ever Subject to Disciplinary Action: \_\_\_\_\_ Yes \_\_\_\_\_ No

If "Yes", explain whether it was general, special, or summary court martial, Captain's mast, Article 15, or other:

---

---

---

Selective Service Number: \_\_\_\_\_

Selective Service Class: \_\_\_\_\_

**EDUCATION**

High School Attended: \_\_\_\_\_

Address of High School: \_\_\_\_\_

Graduate: \_\_\_\_\_ Yes \_\_\_\_\_ No      Year of Graduation: \_\_\_\_\_

Please list all colleges, technical/vocational schools attended, dates and degree attained:

College/School Name: \_\_\_\_\_

Address of College/School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ to \_\_\_\_\_

Graduate: \_\_\_\_\_ Yes \_\_\_\_\_ No      Degree: \_\_\_\_\_

College/School Name: \_\_\_\_\_

Address of College/School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ to \_\_\_\_\_

Graduate: \_\_\_\_\_ Yes \_\_\_\_\_ No      Degree: \_\_\_\_\_

College/School Name: \_\_\_\_\_

Address of College/School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ to \_\_\_\_\_

Graduate: \_\_\_\_\_ Yes \_\_\_\_\_ No      Degree: \_\_\_\_\_

## EMPLOYEMENT

Show every employer you have had for the past 15 years, and all periods of unemployment. Use additional sheet of paper if necessary. Start with most recent employer.

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_

**RESIDENCY**

List all addresses you have resided in the last 15 years, use additional sheets if necessary. Please start with your current address first.

Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_



**ARREST & SUMMONSES**

List all criminal actions in which you were a defendant. Please do not list traffic citations, those will be listed under driving record on page 11.

Date: \_\_\_\_\_ Charge: \_\_\_\_\_

Location: \_\_\_\_\_ Police Agency: \_\_\_\_\_

Charge Reduced To: \_\_\_\_\_

Court Disposition / Sentence: \_\_\_\_\_

Date: \_\_\_\_\_ Charge: \_\_\_\_\_

Location: \_\_\_\_\_ Police Agency: \_\_\_\_\_

Charge Reduced To: \_\_\_\_\_

Court Disposition / Sentence: \_\_\_\_\_

Date: \_\_\_\_\_ Charge: \_\_\_\_\_

Location: \_\_\_\_\_ Police Agency: \_\_\_\_\_

Charge Reduced To: \_\_\_\_\_

Court Disposition / Sentence: \_\_\_\_\_

Date: \_\_\_\_\_ Charge: \_\_\_\_\_

Location: \_\_\_\_\_ Police Agency: \_\_\_\_\_

Charge Reduced To: \_\_\_\_\_

Court Disposition / Sentence: \_\_\_\_\_

**CIVIL JUDGEMENTS**

List every civil action which has been brought against you.

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Action/Proceeding: \_\_\_\_\_

Court Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Action/Proceeding: \_\_\_\_\_

Court Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Action/Proceeding: \_\_\_\_\_

Court Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Action/Proceeding: \_\_\_\_\_

Court Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Action/Proceeding: \_\_\_\_\_

Court Disposition: \_\_\_\_\_

**DRIVING RECORD**

List all moving violations received.

Date: \_\_\_\_\_ Jurisdiction/Agency: \_\_\_\_\_

Charge: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Jurisdiction/Agency: \_\_\_\_\_

Charge: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Jurisdiction/Agency: \_\_\_\_\_

Charge: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Jurisdiction/Agency: \_\_\_\_\_

Charge: \_\_\_\_\_

Disposition: \_\_\_\_\_

Date: \_\_\_\_\_ Jurisdiction/Agency: \_\_\_\_\_

Charge: \_\_\_\_\_

Disposition: \_\_\_\_\_

**ADDITIONAL QUESTIONS**

Do you possess a valid Kansas driver's license?

\_\_\_\_\_ Yes \_\_\_\_\_ No                      Kansas License Number: \_\_\_\_\_

Did you ever possess a driver's license in any other state?

\_\_\_\_\_ Yes \_\_\_\_\_ No                      If "Yes", which state? \_\_\_\_\_

Was your license ever suspended or revoked?

\_\_\_\_\_ Yes \_\_\_\_\_ No                      If "Yes", please explain: \_\_\_\_\_

\_\_\_\_\_

Are you now or have you ever been a member of any foreign or domestic organization, association, movement, group, or combination of persons which is totalitarian, fascist, communist, subversive, or which has adopted or shows a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or the State of Kansas or which seeks to alter the form of government of the United States or Kansas by unconstitutional means?

\_\_\_\_\_ Yes \_\_\_\_\_ No                      If "Yes", please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any knowledge or information, in addition to that specifically called for in the preceding questions which is or which may be relevant, directly or indirectly, in connection with an investigation of your eligibility or fitness for the position which you are seeking; including, but not limited to, knowledge or information concerning your character, temperance, habits, employment, education, subversive activities, family, associations, criminal record, traffic violations, residence, or otherwise?

\_\_\_\_\_ Yes \_\_\_\_\_ No                      If "Yes", please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**AUTHORITY TO RELEASE INFORMATION**

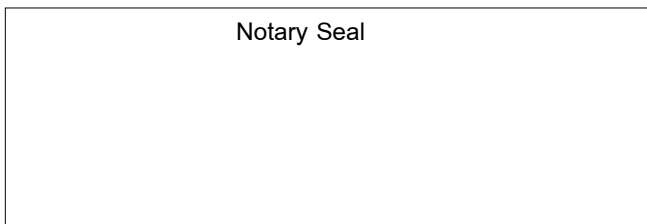
I, \_\_\_\_\_, hereby authorize any officer or authorized representative of the Fairway, Kansas Police Department bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to my employment, military, credit, or educational records including but not limited to academic, achievement, attendance, athletic, personal history, disciplinary records, medical records, and credit records. I, hereby, direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Fairway, Kansas Police Department. Consent is granted for the Fairway, Kansas Police Department to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I, hereby, release you, as the custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment including its officer, employees, or related personnel, both individually and collectively, from any and all liability for damages or 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.

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Current Address: \_\_\_\_\_



State of \_\_\_\_\_)

County of \_\_\_\_\_)

This instrument was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_.

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Appointment Expiration

