

POLICE

Naples City

1420 East 2850 South

Naples, UT 84078

435-789-9449 Fax 435-781-2209

Police Officer Application Information

Applicants will be required to provide the following documents (as applicable) when requested. Failure to provide all required documentation may result in your application being eliminated from the process

Birth Certificate

If Naturalized, Naturalization Certificate with photo

High School Diploma or GED Certificate

All Post-Secondary Degrees and Vocational Training Certificates

Currently certified SFO, BCO or LEO must provide POST Certificates

Former military members must provide discharge or separation papers (i.e. DD-214)

To receive appointment as a law enforcement officer to this agency, you must meet the following:

You must be at least 21 years of age.

You must be a United States Citizen

You must have no felony conviction(s), including any felony conviction(s) that may have been expunged

You must have no felony behavior involving use, production, transportation or sale of illegal drugs or narcotics

You must have a high school diploma or equivalent

You must currently have, or be able to obtain, a Utah Driver License

You must be able to qualify for vehicle insurance in the use of a motor vehicle

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Application for Employment

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, martial status, veteran status, disability or any other legally protected status

1. Personal Information

Name

Telephone

Address

City, State, Zip

Social Security Number

Date of Birth

Current Driver License Number

State

Email Address

Are you related to anyone in our employ?

If yes, Who and How?

Have you been convicted of any criminal offenses other than minor traffic violations?

If Yes, explain

Do you have any criminal charges pending?

If yes, explain

Are you currently employed?

May we contact your present employer for a reference?

2. Work Information

Position Applying For

Date available for work

Willing to work: Full time Part Time On-Call Shift

Can you travel if a job requires it?

Have you ever been asked to resign, resigned in lieu of termination or been dismissed by an employer?
If Yes, please provide employer name, date and details

3. Education

High School Years Attended
City, State, Zip
Graduation Date

College/Technical School Years Attended
Address
City, State, Zip Telephone
Graduation Date
Degree Received Major/Minor

P.O.S.T. Date Attended
Address
City, State, Zip Telephone
Graduation Date Certification Received

Attach copy of certification from P.O.S.T.

Indicate any foreign languages you can speak, read, and/or write:

Indicate level of fluency 1 2 3 4 5 (1 not at all fluent, 5 very fluent)

Describe specialized training, skills, and other activities:

Describe computer skills and indicate if you have ever used Spillman

4. Employment Experience

Begin with your present or last job and provide 10 years history. If additional space is needed, please use a separate sheet of paper

Employer Telephone

Address

City, State, Zip

Position Held

Supervisor

Employment dates to

Ending Salary (hourly)

Describe the work performed and your main duties

Reason for leaving

Employer

Telephone

Address

City, State, Zip

Position Held

Supervisor

Employment dates to

Ending Salary (hourly)

Describe the work performed and your main duties

Reason for leaving

Employer

Telephone

Address

City, State, Zip

Position Held

Supervisor

Employment dates to

Ending Salary (hourly)

Describe the work performed and your main duties

Reason for leaving

5. Personal and Professional References

Please give the following information for three personal or professional references who are not related to you.

Name	Relationship
Home Phone	Work Phone
Address	
City, State, Zip	Email

Name	Relationship
Home Phone	Work Phone
Address	
City, State, Zip	Email

Name	Relationship
Home Phone	Work Phone
Address	
City, State, Zip	Email

6. Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience and attach any related certificates

State any additional information you feel may be helpful to us in considering your application

Please list the last 10 years of residential history (include physical address and names and phone numbers for all landlords)

7. Applicant's Statement and Authorization to Release Information

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this is not and is not intended to be a contract of employment.

By applying for employment to Naples Police Department, I hereby authorize Naples Police Department and its representatives to consult with former employers, schools, or other agencies with which I have been employed or associated who may have information bearing on my professional competence, character, and ethical qualifications. I hereby release from liability all representatives of Naples Police Department for their acts performed in good faith and without malice in connection with evaluating my application and my credentials. I further release all individuals, present and former employers, and organizations who provide information to Naples Police Department, in good faith and without malice, concerning my professional competence, ethics, character, and other qualifications for employment, and I hereby consent to the release of such information.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that all hiring is conditional subject to a medical and physical evaluation and drug testing. I understand also, that I am required to abide by all Naples City Corporation and Naples Police Department policies, procedures, and The General Directives.

I understand that the Naples Police Department has adopted a Drug Free and Tobacco Free Workplace applicable to all of its applicants and employees.

I further understand and agree that if I am offered employment at Naples Police Department, my employment will be for no definite term and that either I, or Naples Police Department will have the right to terminate the employment relationship at any time, with or without cause, and with or without notification. I also understand that this status can only be altered by a written contract of employment which is specific as to all material terms and is signed by me and the Chief of Police of Naples Police Department

Signature

Date

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Voluntary Self Identification Form

This form is to be completed and delivered with the Application of Employment. The information on this survey will NOT be considered while recruiting, screening, or selection of candidates. The information on this form is for statistical data collection only. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

I wish to complete this survey

Yes

No

Position(s) applied for

Gender

Male

Female

Prefer to Not Say

Race/Ethnic Background

Asian/Pacific Islander

American Indian/Native American/Alaskan

Black (Not of Hispanic Origin)

White (Not of Hispanic Origin)

Hispanic

Unknown

Prefer to Not Answer

Disabled

Yes

No

Veteran

Yes

No

How did you hear about this position?

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____, have made application for a Peace Officers position with the NAPLES POLICE DEPARTMENT and it is my understanding that a comprehensive investigation of my background will be conducted in connection with my application. Additionally, it is my understanding that any history adversely reflecting on my qualifications for employment by such investigation may be cause for disqualification for appointment or my dismissal upon due consideration of the facts by the NAPLES POLICE DEPARTMENT.

I hereby give to the NAPLES POLICE DEPARTMENT, or duly authorized representative of the NAPLES POLICE DEPARTMENT, the authority to conduct any comprehensive investigation of my background the NAPLES POLICE DEPARTMENT deems necessary, including but not necessarily limited to, oral discussions with any persons concerning my background. Also, generally, I hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by or to any authorized representative of the NAPLES POLICE DEPARTMENT, whether said records are public or private, including those which may be deemed to be a privileged, controlled, protected or confidential nature. In particular, I hereby authorize the full and complete disclosure of any and all records pertaining to my background: including but not necessarily limited to; the records of educational institutions, finance or credit institutions, commercial or retail mercantile establishments, and public utility companies; records of medical and psychiatric consultation and/or treatment, including those of hospitals, clinics, private practitioners, the U.S. Department of Veterans Affairs; and generally all military service medical records and other records of all military facilities; employment and pre-employment records, including background investigation reports, the results of polygraph examinations, efficiency ratings, disciplinary records, complaints or grievances filed by or against me; and records and recollections of attorneys at law who have represented me in any case which I have had an interest.

I hereby appoint any authorized representative designated by the NAPLES POLICE DEPARTMENT as an authorized agent for me for the purpose of inspecting any arrest records information maintained by any law enforcement agency concerning me.

To the custodian of the records discussed herein, I hereby direct you to release such information to the bearer of this Authorization for Release of Information or a copy thereof. A copy of this release form will be valid as an original hereof, even though that copy does not contain an original writing of any signature.

I hereby release the custodian or custodians of such records and the NAPLES POLICE DEPARTMENT and the State of Utah, including any of their agents, employees or representatives in any capacity, from any and all claims of liability or damage of whatever kind or nature which at any time could result to me, my heirs, assigns, associates, personal representative or representatives of any nature because of compliance by said custodian or custodians with this Authorization of Release of Information and my request contained herein for this release or because of any use of these records by the NAPLES POLICE DEPARTMENT or the State of Utah. This release is binding, now and in the future, on me, my heirs, assigns, associates, personal representative or representatives of any nature.

Utah Code Annotated 34-42-1 states in part that an employer who in good faith provides information about the job performance, professional conduct, or evaluation of a former or current employee to a prospective employer of that employee, at the request of the prospective employer of that employee, may not be held civilly liable for the disclosure or the consequences of providing the information. There is a rebuttable presumption that an employer is acting in good faith when the employer provides information about the job performance, professional conduct, or evaluation of a former or current employee to a prospective employer of that employee, at the request of the prospective employer of that employee.

_____ Applicant Signature	_____ Date
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Subscribed and sworn to before me this _____ day of _____, 20____

NOTARY PUBLIC

Residing in: _____

My Commission expires: _____