

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE _____

NAME

LAST

FIRST

MIDDLE

PRESENT ADDRESS

STREET

CITY

STATE

ZIP

PERMANENT ADDRESS

STREET

CITY

STATE

ZIP

PHONE NO.

ARE YOU 18 YEARS OR OLDER? Yes ☐ No ☐

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS?

Yes ☐ No ☐

EMPLOYMENT DESIRED

POSITION

DATE YOU
CAN START

SALARY
DESIRED

ARE YOU EMPLOYED NOW?

IF SO MAY WE INQUIRE
OF YOUR PRESENT EMPLOYER?

EVER APPLIED TO THIS COMPANY BEFORE?

WHERE?

WHEN?

REFERRED BY

EDUCATION	NAME AND LOCATION OF SCHOOL	*NO OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

SPECIAL SKILLS

ACTIVITIES: (CIVIC, ATHLETIC, ETC.)

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS.

U.S. MILITARY OR
NAVAL SERVICE

RANK

PRESENT MEMBERSHIP IN
NATIONAL GUARD OR RESERVES

*This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991.

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST).

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

	NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1				
2				
3				

THE FOLLOWING STATEMENT APPLIES IN: MARYLAND & MASSACHUSETTS. (Fill in name of state)
IT IS UNLAWFUL IN THE STATE OF _____ TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A
CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE
SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

Signature of Applicant _____

IN CASE OF
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE NO.

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.
IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY

DATE

REMARKS:

NEATNESS

ABILITY

HIRED: ☐ Yes ☐ No

POSITION

DEPT.

SALARY/WAGE

DATE REPORTING TO WORK

APPROVED: 1.

2.

3.

EMPLOYMENT MANAGER

DEPT. HEAD

GENERAL MANAGER

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination. This Application for Employment Form is sold for general use throughout the United States. TOPS assumes no responsibility for the inclusion in said form of any questions which, when asked by the Employer of the Job Applicant, may violate State and/or Federal Law.

Herington Police Department

Application and Personal History Statement

Your Personal History Statement will be used as the basis for a background investigation that will determine your eligibility and suitability for a position as a Police Officer with the Herington Police Department.

- 1) Your Personal History Statement must be hand printed legibly in black or blue ink, in your own hand writing
- 2) Answer all questions. If it does not apply to you, mark "N/A" for Not Applicable.
- 3) Avoid errors by reading the directions carefully before making any entries on the form.
- 4) You are responsible for obtaining correct contact information for all current and former employers, supervisors, professional references, personal references, neighbors, etc.
- 5) If there is insufficient space on the Personal History Statement, provide the answer on a separate sheet of paper. Be sure to reference the relevant section and question before continuing your answer.

FAILURE TO PROPERLY AND THOROUGHLY COMPLETE THIS DOCUMENT MAY RESULT IN DISMISSAL

DELIBERATE OMISSIONS OR MISREPRESENTATION WILL RESULT IN DISMISSAL

IMPORTANT READ CAREFULLY

If applicable, an original or certified copy of the documents below must be provided.

Birth Certificate	Marriage License(s)	Proof of Automobile Insurance
College Transcripts	High School Diploma	DD-214 Member Copy 4 (Long Form)
Divorce Decree(s)	Proof of GED	Law Enforcement Academy Transcript(s)

As an applicant for a position with the Herington Police Department, I understand that I am required to furnish information for use in determining my qualifications and suitability for public service. I understand that the Herington Police Department will not release any information provided to them to any person, including myself. The information submitted to the Herington Police Department is confidential and will be used only for investigating my suitability for employment with a public service agency.

I, _____, understand that I may be tested with a truth verification device regarding the information I have provided herein and do certify that I answered each question fully and truthfully.

Signature

Date

Subscribed and sworn to before me the _____ day of _____, 20 _____.

Notary Public in and for said County of Dickinson, State of Kansas.

Notary Public

Herington Police Department

Application and Personal History Statement

Applicant Name: _____
First Middle Last

List any other names currently or previously used, including maiden name:

Current Address: _____
Street / House Number / Apartment Number

_____ City State Zip

Social Security Number: _____ **Date of Birth:** _____

Driver's License Number: _____ **Issuing State:** _____

If you have ever held a driver's license issued by any other state, list the state below:

_____ State _____ State _____ State

_____ Height _____ Weight _____ Hair Color _____ Eye Color

Gender: ☐ Male ☐ Female

Race: ☐ White / Caucasian ☐ Black / African American ☐ Asian
☐ Hispanic / Latino ☐ Pacific Islander ☐ American Indian

Are you a United States citizen? ☐ Yes ☐ No

Place of Birth: _____
City County State

Telephone Numbers

Home

Cell

Work

Email Addresses

Social Media Accounts

Facebook

Twitter

Instagram

Snapchat

LinkedIn

Tumblr

Herington Police Department

Application and Personal History Statement

EMPLOYMENT HISTORY

Beginning with your present or most recent job, list ALL jobs you have held since age 16. Include all part-time, temporary, seasonal and voluntary positions. Include active duty military service and all periods of unemployment in proper time sequence.

From: _____ To: _____ ☐ Present ☐ Unemployed
Month / Year Month / Year

Employer: _____

Address: _____
Street City State

Phone: _____ Name of Supervisor: _____

Job Title: _____

Reason for Leaving: _____

Are you eligible for rehire? ☐ Yes ☐ No

From: _____ To: _____ ☐ Present ☐ Unemployed
Month / Year Month / Year

Employer: _____

Address: _____
Street City State

Phone: _____ Name of Supervisor: _____

Job Title: _____

Reason for Leaving: _____

Are you eligible for rehire? ☐ Yes ☐ No

From: _____ To: _____ ☐ Present ☐ Unemployed
Month / Year Month / Year

Employer: _____

Address: _____
Street City State

Phone: _____ Name of Supervisor: _____

Job Title: _____

Reason for Leaving: _____

Are you eligible for rehire? ☐ Yes ☐ No

Herington Police Department

Application and Personal History Statement

EMPLOYMENT HISTORY (CONTINUED)

Beginning with your present or most recent job, list ALL jobs you have held since age 16. Include all part-time, temporary, seasonal and voluntary positions. Include active duty military service and all periods of unemployment in proper time sequence.

From: _____
Month / Year

To: _____
Month / Year

☐

Present

☐

Unemployed

Employer: _____

Address: _____

Street

City

State

Phone: _____

Name of Supervisor: _____

Job Title: _____

Reason for Leaving: _____

Are you eligible for rehire?

☐

Yes

☐

No

From: _____
Month / Year

To: _____
Month / Year

☐

Present

☐

Unemployed

Employer: _____

Address: _____

Street

City

State

Phone: _____

Name of Supervisor: _____

Job Title: _____

Reason for Leaving: _____

Are you eligible for rehire?

☐

Yes

☐

No

From: _____
Month / Year

To: _____
Month / Year

☐

Present

☐

Unemployed

Employer: _____

Address: _____

Street

City

State

Phone: _____

Name of Supervisor: _____

Job Title: _____

Reason for Leaving: _____

Are you eligible for rehire?

☐

Yes

☐

No

Herington Police Department

Application and Personal History Statement

MILITARY SERVICE

Have you registered with Selective Service? ☐ Yes ☐ No

Have you ever been rejected by any branch of the Armed Forces? ☐ Yes ☐ No

Have you ever been a member of any branch of the U.S. Armed Forces? ☐ Yes ☐ No

If yes, complete sections below. If no, skip to page 7.

Branch of Service:

<input type="checkbox"/> Army	<input type="checkbox"/> Navy	<input type="checkbox"/> Air Force	<input type="checkbox"/> Marines	<input type="checkbox"/> Coast Guard
<input type="checkbox"/> Active Guard / Reserves	<input type="checkbox"/> Air National Guard			<input type="checkbox"/> National Guard

Date of Induction: _____ Date of Discharge: _____

Highest Rank obtained: _____

Type of Discharge: ☐ Honorable ☐ General ☐ Bad Conduct
☐ Dishonorable ☐ Other Than Honorable (GOTH)

Branch of Service:

<input type="checkbox"/> Army	<input type="checkbox"/> Navy	<input type="checkbox"/> Air Force	<input type="checkbox"/> Marines	<input type="checkbox"/> Coast Guard
<input type="checkbox"/> Active Guard / Reserves	<input type="checkbox"/> Air National Guard			<input type="checkbox"/> National Guard

Date of Induction: _____ Date of Discharge: _____

Highest Rank obtained: _____

Type of Discharge: ☐ Honorable ☐ General ☐ Bad Conduct
☐ Dishonorable ☐ Other Than Honorable (GOTH)

Have you ever received a Field Grade Article 15? ☐ Yes ☐ No

Have you ever received a Company Grade Article 15? ☐ Yes ☐ No

Have you ever been tried by deck, summary, special or general courts-martial?

☐ Yes ☐ No If yes, explain: _____

Herington Police Department

Application and Personal History Statement

EDUCATIONAL HISTORY

From: _____
Month / Year

To: _____
Month / Year

☐ Present

Name of School: _____

Address: _____
Street City State

Major: _____ Minor: _____

☐ Bachelor's Degree ☐ Associate's Degree ☐ Diploma ☐ Certificate

☐ Not Applicable Credit Hours Earned: _____

From: _____
Month / Year

To: _____
Month / Year

☐ Present

Name of School: _____

Address: _____
Street City State

Major: _____ Minor: _____

☐ Bachelor's Degree ☐ Associate's Degree ☐ Diploma ☐ Certificate

☐ Not Applicable Credit Hours Earned: _____

From: _____
Month / Year

To: _____
Month / Year

☐ Present

Name of School: _____

Address: _____
Street City State

Major: _____ Minor: _____

☐ Bachelor's Degree ☐ Associate's Degree ☐ Diploma ☐ Certificate

☐ Not Applicable Credit Hours Earned: _____

Have you ever been expelled from any school you have attended? ☐ Yes ☐ No

If yes, briefly explain: _____

Have you ever been placed on academic probation? ☐ Yes ☐ No

Herington Police Department

Application and Personal History Statement

MARITAL AND FAMILY HISTORY

Check all that apply:

I am: ☐ Single ☐ Engaged ☐ Married ☐ Divorced ☐ Widowed

Current spouse, fiancée, girlfriend, boyfriend or significant other:

Name	Date of Birth	Relationship
------	---------------	--------------

Does this person live with you? ☐ Yes ☐ No ☐ N/A

If you are divorced or widowed, provide the information of your former spouse below:

1	Name	Date of Birth
---	------	---------------

2	Name	Date of Birth
---	------	---------------

3	Name	Date of Birth
---	------	---------------

List all children related to you and/or your spouse (Natural, Step-Children, Adopted or Foster):

1	Name	Date of Birth	Relationship
---	------	---------------	--------------

2	Name	Date of Birth	Relationship
---	------	---------------	--------------

3	Name	Date of Birth	Relationship
---	------	---------------	--------------

4	Name	Date of Birth	Relationship
---	------	---------------	--------------

5	Name	Date of Birth	Relationship
---	------	---------------	--------------

List all person(s) you currently share a residence with that are not family members:

1	Name	Date of Birth	Relationship
---	------	---------------	--------------

2	Name	Date of Birth	Relationship
---	------	---------------	--------------

3	Name	Date of Birth	Relationship
---	------	---------------	--------------

4	Name	Date of Birth	Relationship
---	------	---------------	--------------

Herington Police Department

Application and Personal History Statement

FINANCIAL STATUS

Monthly Income

Report all sources of income including income generated by your spouse or any other person that you share financial responsibilities with. Include rental property, reimbursements on loans, part-time jobs, primary jobs, etc.

Amount	Source
Total Montly Income:	

Debt

Report all sources of debt including debt held by your spouse or any other person that you share financial responsibilities with. Include rent, mortgages, vehicle payments, charge accounts, credit cards, loans, child support payments, utilities, day care, insurance and any other debts and payments. Do not include cash expenses such as groceries, gasoline, etc.

Total Balance	Monthly Payment	Source
Total of Monthly Debt / Payments:		

Herington Police Department

VEHICLE REGISTRATION

List all vehicles you own or drive:

1	Year	Make	Model	License Plate
2	Year	Make	Model	License Plate
3	Year	Make	Model	License Plate
4	Year	Make	Model	License Plate
5	Year	Make	Model	License Plate

PROFESSIONAL REFERENCES

List 5 persons who know you well. Do not include any friends, family members or significant others.

1	Name	Phone Number	Years Known
	Address		Relationship
2	Name	Phone Number	Years Known
	Address		Relationship
3	Name	Phone Number	Years Known
	Address		Relationship
4	Name	Phone Number	Years Known
	Address		Relationship
5	Name	Phone Number	Years Known
	Address		Relationship

Herington Police Department
Application and Personal History Statement

LEGAL, CIVIL AND EMPLOYMENT QUESTIONNAIRE

Have you ever been ARRESTED or CONVICTED of a Felony Offense in any state?

☐ Yes ☐ No If yes, what offense? _____

Have you ever been CONVICTED of a violation of United States Code (Federal Offense)?

☐ Yes ☐ No If yes, what offense? _____

Have you ever sold, manufactured, produced or possessed with the intent to sell a controlled substance? ☐ Yes ☐ No

Have you ever sold, manufactured, produced or possessed with the intent to sell prescription drugs? ☐ Yes ☐ No

Have you ever been convicted of unlawfully possessing a controlled substance other than marijuana? ☐ Yes ☐ No

Have you ever been CONVICTED of any offense involving Domestic Violence or Stalking?

☐ Yes ☐ No

Have you ever been ARRESTED or CONVICTED of Perjury or any other offense related to providing false testimony in an official proceeding? ☐ Yes ☐ No

Have you ever been ARRESTED or CONVICTED for any offense involving a crime of deception including, but not limited to, Theft or Fraud? ☐ Yes ☐ No

Have you ever been ARRESTED or CONVICTED of K.S.A. 21-6002 Official Misconduct?

☐ Yes ☐ No

Have you ever committed a crime that has never been discovered? ☐ Yes ☐ No

Have you ever committed a crime involving violence? ☐ Yes ☐ No

Have you ever been incarcerated in a jail, detention center or prison? ☐ Yes ☐ No
If yes, what was the criminal offense you were confined for? _____

Were you ever confined for a period of more than one week? ☐ Yes ☐ No ☐ N/A
If yes, what was the criminal offense you were confined for? _____

Herington Police Department

Application and Personal History Statement

Have you ever been arrested for Driving Under the Influence (DUI) or Driving While Intoxicated (DWI)? ☐ Yes ☐ No If yes, explain:

Date: _____ Disposition: ☐ Convicted ☐ Diversion ☐ Not Guilty

Date: _____ Disposition: ☐ Convicted ☐ Diversion ☐ Not Guilty

Have you ever driven a vehicle after you consumed alcohol? ☐ Yes ☐ No

Has your driver's license ever been suspended or revoked? ☐ Yes ☐ No

Have you ever shoplifted merchandise? ☐ Yes ☐ No ☐ N/A

Have you ever struck (assault / battery) another person for any reason at any time?
☐ Yes ☐ No

Have you ever lost your temper and "struck the first blow" in any dispute with an adult, including domestic situations? ☐ Yes ☐ No

Have you ever struck an adult member of the opposite sex? ☐ Yes ☐ No

Have you ever caused injuries to another person that required medical attention?
☐ Yes ☐ No

Have you ever associated with any organized group or gang that advocated committing any kind of illegal act? ☐ Yes ☐ No

Have you ever been accused of a violation of public trust? ☐ Yes ☐ No

Have you ever been disciplined at work pertaining to any issue with your credibility?
☐ Yes ☐ No

Have you ever used marijuana? ☐ Yes ☐ No

Have you used marijuana or any substance containing THC (tetrahydrocannabinol) within the last two years? ☐ Yes ☐ No ☐ N/A

Herington Police Department

Application and Personal History Statement

Have you ever used any of the following controlled substances?

	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Number of Times Used	Last Time Used
Anabolic Steroids	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Cocaine	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Crack	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Ecstasy	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Hashish	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
LSD / Acid	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Methamphetamine	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Heroin	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Mushrooms	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Opium	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
PCP	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Peyote	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Quaaludes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Speed	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Ice	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Ritalin / Adderol	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Tranquilizers	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Triple C's	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Rohypnol	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
GHB	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Prescription Painkillers	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____
Other Illegal Drugs	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	_____	_____

Herington Police Department

Application and Personal History Statement

Have you ever failed to pay court ordered child support? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Have you ever FAILED a Polygraph? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever FAILED a Computerized Voice Stress Analysis (CVSA)? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been accused of contributing to a hostile workplace environment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has use of alcohol ever affected your employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has use of illegal or prescription drugs ever affected your employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever failed to pay local, state or federal taxes? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been asked to resign from any place of employment in lieu of termination? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been terminated from any place of employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been sued civilly for non-payment of debt? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had any debts turned over to a collections agency? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been found unsuitable for employment for any reason? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever quit or been asked to resign from any job for alleged dishonesty? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been "talked to" by an employer for being late for work? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever quit a job without giving at least two weeks notice? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever called in sick to work when you weren't really sick? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever stolen any money from an employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Herington Police Department

Application and Personal History Statement

Would your previous supervisor(s) say you are consistently on time? ☐ Yes ☐ No

How would your previous employer(s) rate your attendance?

☐ Excellent ☐ Good ☐ Fair ☐ Poor

Would your past supervisor(s) say you get angry:

☐ Never ☐ Rarely ☐ Sometimes ☐ Often

Would your previous employer(s) say you are good at following instructions?

☐ Yes ☐ No

Have you ever associated with any militant or organized group or gang which advocates the overthrow of any government? ☐ Yes ☐ No

Rate yourself on the following character qualities 1 - 10

(10 being very strong, 1 being very weak)

___ Contentment	___ Diligence	___ Dependability	___ Attentiveness
___ Enthusiasm	___ Loyalty	___ Meekness	___ Decisiveness
___ Forgiveness	___ Orderliness	___ Punctuality	___ Patience
___ Truthfulness	___ Obedience	___ Self-Control	___ Tolerance

Have you or your spouse ever filed bankruptcy? ☐ Yes ☐ No

Have you ever been arrested, charged or convicted of any criminal offense?

☐ Yes ☐ No If yes, explain below.

_____ Primary Offense	_____ City, State	_____ Arresting Agency
_____ Primary Offense	_____ City, State	_____ Arresting Agency
_____ Primary Offense	_____ City, State	_____ Arresting Agency
_____ Primary Offense	_____ City, State	_____ Arresting Agency

Herington Police Department

Application and Personal History Statement

Has any member of your immediate family ever been convicted of a Felony criminal offense?

☐ Yes ☐ No If yes, explain below.

Name Relationship to Applicant

Offense City, State

Name Relationship to Applicant

Offense City, State

List all traffic violations that you have been issued a ticket, summons or citation for:

Month / Year Violation City, State

Month / Year Violation City, State

Month / Year Violation City, State

Month / Year Violation City, State

Month / Year Violation City, State

☐ I have never been issued a ticket, summons or citation related to a traffic violation.

List all motor vehicle accidents you have been involved in as a driver:

Month / Year City, State Where you at fault? ☐ Yes ☐ No

Month / Year City, State Where you at fault? ☐ Yes ☐ No

Month / Year City, State Where you at fault? ☐ Yes ☐ No

☐ I have never been involved in a motor vehicle accident as a driver.

Have you omitted or falsified any information in this document? ☐ Yes ☐ No