



Williamsville Police Department

Police Officer Employment Application

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

Last Name	First Name	Middle Name		
<hr/>				
Address	Street	City	State	Zip Code
<hr/>				
Home Telephone Number	Work Telephone Number	Cellphone Number		

Date Of Birth	Social Security Nr	Drivers License Number			
<hr/>					
FOID Card Number	Expiration date	Height	Weight	Eyes	Hair

Education

Are you a high school graduate or have obtained your GED?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Name of high school and year of graduation?	<hr/>	
Have to attended college or technical school?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, name of institution and number of years attended:	<hr/>	
Have you received an undergraduate degree, and if so, in what field of study:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Military Experience

Have you ever served in the US military forces?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, branch of service: _____	Dates of service: _____ to _____		
Discharge date: _____	Type of discharge	<input type="checkbox"/> Honorable	<input type="checkbox"/> Other
If discharge was other than Honorable, explain: _____			
Are you currently serving in the Reserves or National Guard?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If so, branch and current unit assigned to: _____			

Work Experience

Employer (current/last)	Address	Telephone Number
Supervisor	Job Title/Description	
Dates Employed:	From: _____	To: _____
Reason for leaving: _____		

Employer	Address	Telephone Number
Supervisor	Job Title/Description	
Dates Employed:	From: _____	To: _____
Reason for leaving: _____		

Employer	Address	Telephone Number
Supervisor	Job Title/Description	
Dates Employed:	From: _____	To: _____
Reason for leaving: _____		

Describe any specialized training, apprenticeships or skills:

Describe any specialized military training you have received:

Have you ever been the subject of a criminal investigation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been detained by law enforcement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been arrested:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(If yes, explain giving dates, location and charges: _____)		

Have you ever been convicted of a felony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(If yes, explain giving dates, location and charges: _____)		

Have you ever been convicted of a misdemeanor (excluding minor traffic offenses)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(If yes, explain giving dates, location and charges: _____)		

Do you have any previous law enforcement experience?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(If yes, explain in detail: _____)		

Do you have any physical conditions which may limit your ability to perform this particular job or certain tasks within this job?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(If yes, explain in detail: _____)		

Are you a citizen of the United States?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been treated for habitual use of alcohol or drugs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been treated for a mental illness?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been denied a Firearm Owner's ID Card by the state?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a current and valid driver's license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you speak any languages other than English fluently?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(If so, what language: _____)		

References

Name	Address	Phone
_____	_____	_____
Name	Address	Phone
_____	_____	_____
Name	Address	Phone
_____	_____	_____

I hereby certify that I have answered all the questions and information requested in this application completely and truthfully. I authorize investigation of all statements and information contained in this application for employment. I further understand that if any information or statements I have provided in this application are found to be false, misleading or fraudulent, my application will be immediately denied. I also understand that I will be required to submit to fingerprinting, a background check and drug testing by the Village prior to my appointment.

Applicant Signature

Date

Waiver and Release of Liability

In consideration of the granting of my request to be permitted to take the Williamsville Police Department examinations and particularly that portion thereof known as the Physical Agility Test, I hereby waive any claim for injuries to my person that may arise out of my taking and participating in the Physical Agility Tests as administered by the Williamsville Police Department's sworn personnel. As such an applicant, I undertake to assume the risk of all dangerous conditions which may exist on the premises where the tests are administered or in the existence of such conditions and rely on my inspection of the same.

In further consideration of my being permitted to take the Physical Agility Tests, I hereby release the Village of Williamsville, Illinois, all its employees and agents, and the institution where the tests are given, its officers and employees from any claim which I may have of any nature whatsoever and for any injuries to my person or damage to my property while taking said Physical Agility Tests.

I understand that any misrepresentations, omissions, false statements, or failure to entirely complete the application will immediately deny me from further consideration for any position with the Williamsville Police Department.

I understand that applicants being considered for employment will be required to undergo an extensive background investigation, drug testing, and psychological testing as part of the pre-employment screening process. Copies of this application, background investigation, or psychological screening shall not be circulated to a candidate or employee, nor will they be released unless required pursuant to court action.

I authorize a review of and consent to full and complete disclosure of all records of educational institutions; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings); and other financial statements and records wherever filed; efficiency ratings, complaints or grievances filed by or against me and the records and recollections of attorneys at law or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest. concerning myself to any duly authorized personnel of the Williamsville Police Department whether the said records are of a public, private or confidential nature.

I understand that the Williamsville Police Department will be seeking records from my past employers and any other person or entity that might have information relating to my application. I hereby authorize any representative of the Williamsville Police Department bearing this release to obtain any information in your files pertaining to my employment records. The intent of this authorization is to give my consent for full and complete disclosure.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment with the Williamsville Police Department. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said -

person(s) from any and all liability which may be incurred as a result of furnishing such information. I further release the Williamsville Police Department from any and all liability which may be incurred as a result of collecting such information.

I have read the foregoing and understand every word of this Waiver and Release.

Agreed To and Accepted this _____ Day of _____, 20 _____.

Signature

Address

Witness Signature

Address

After completing this application, attached any resumes or additional sheets. This application may be mailed to or presented in person at:

Village of Williamsville
141 W. Main Street
Williamsville, Illinois 62693

Or Fax To:

Village of Williamsville
(217) 566-2105

Qualifications and Requirements

Pursuant to the Rules and Regulations of the Williamsville Police Department for Patrol Officers, applications for employment with the Williamsville Police Department will be accepted from persons meeting the following qualifications:

Must be a citizen of the United States

Must have attained the age of 21 years at the time of application.

Must have an associates degree or an equivalent number of credits.

OR Must be a State of Illinois Certified Police Officer or have 2 years of military experience

Must submit to all written, oral and physical examinations as deemed necessary by the Williamsville Police Department. (Lateral candidates may be exempt to some/all exams)

Must submit to fingerprinting and a complete background investigation check.

Must not be a conscientious objector from military service of the United States.

Must not be dishonorably discharged from the military service of the United States.

Must not be a habitual user of alcohol or drugs or be a habitual gambler.

Must not have been convicted of any felony or serious misdemeanor crimes.

I certify that I have read the above qualifications and requirements and that I meet said requirements.

Printed Name

Signature

Date