

City of Cloverport

Application for Law Enforcement Employment

The City of Cloverport is and *equal opportunity employer*. Applicants will receive consideration without regard to race, color, national origin, sex, religion, age, veteran's status or disability.

Personal Information

Name:

Phone number:

Current Address:

City:

State:

Zip Code:

Email address:

SS#:

Driver's License#:

Are you legally eligible for employment in the United States? Yes No

Have you ever been convicted of a crime that has not been annulled, expunged, or sealed by the court?

Yes No If yes, please explain:

Educational Background

High school:

Diploma or GED:

College Attended:

Degree Earned:

Are you currently employed?

May we contact your current employer?

Date Available for work:

Salary Desired:

Have you ever been employed with The City of Cloverport before? If so, when?

Have you ever been terminated? Yes No

Have you ever been asked to resign? Yes No

If so, why?

Are you a Certified Officer through the Kentucky Law Enforcement Council? Yes No

If not, are you POPS (Peace Officer Professional Standards) certified? Yes No

Previous Employment History

List three most current employers

Employers Name:

Address:

Phone #:

Dates:

Salary:

Reason for Leaving:

Employers Name:

Address:

Phone #:

Dates:

Salary:

Reason for Leaving:

Employers Name:

Address:

Phone #:

Dates:

Salary:

Reason for Leaving:

May we contact your current employer?

References:

Phone number:

Personal or Professional?

1.

2.

3.

I give the employer the right to contact and obtain information from all references, employers, educational institutions, and to otherwise verify the accuracy of the information contained in this application. I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.

Signature:

Date:

Printed Name:

Please submit application either via email to cloverportky@bbtel.com or by faxing completed application to 270-788-8707. No phone calls please.