

Social Status

Are you single?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you married?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you separated?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you widowed?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you divorced?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Are you living with your spouse?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

If no, explain:

Provide the following information regarding your marriage or marriages:

Date:

Place of Marriage:

Wife's Maiden Name:

If a marriage to which you were a party was ever dissolved, provide the following information:

If you were separated, explain the separation and to whom was action granted?

If you were divorced, explain the divorce and to whom was action granted?

If your marriage was annulled, explain the annulment and to whom was action granted?

Are you paying alimony? YES NO

If yes, explain:

If divorced, list the name(s) of your previous spouse(s) & where they reside:

Social Status (Continued)

List below every child born to you, adopted by you & any stepchildren you have:

Name: **Date of Birth:** **Place of Birth:** **To Whom Does The Child Live & Whom:**

Are you now supporting all children born to you, adopted by you and/or stepchildren? YES NO

If no, explain fully:

Have you ever been named as the natural father in a paternity proceeding? YES NO

If yes, explain:

Are you paying child support? YES NO

If yes, explain:

Education

High School: Address:
From: To: Did you graduate? YES NO Degree:

College: Address:
From: To: Did you graduate? YES NO Degree:

Other: Address:
From: To: Did you graduate? YES NO Degree:

Other: Address:
From: To: Did you graduate? YES NO Degree:

Other: Address:
From: To: Did you graduate? YES NO Degree:

Other: Address:
From: To: Did you graduate? YES NO Degree:

List any special training courses you have completed that would be beneficial for this position.

List any professional licenses or certificates you hold or have held.

List any additional work skills that you believe may be beneficial to police work (i.e. computer training, typing, etc.)

Driving History

Can you operate an automobile? YES NO

Do you possess a valid driver's license? YES NO

Have you ever been refused a driver's license by any state? YES NO

If yes, explain:

Have you ever had a driver's license in any state other than Illinois? YES NO

If yes, explain:

Was your driver's license ever suspended or revoked? YES NO

If yes, explain:

Residences

List your addresses for the last ten years starting with your present address:

From (Month/Year): To (Month/Year): Addresses of Residence: City, State & Zip Code

Do you own or are you buying your own home? YES NO

Do you own or are you buying other real estate? YES NO

If yes, give location(s):

Military Service

Have you ever served in any U.S. military organization including the U.S. Reserve Forces and National Guard?

YES

NO

If yes, Branch:

From:

To:

What is your service serial number?

Highest rank held:

Rank at Discharge:

Type of Discharge (Be exact):

If other than honorable, explain:

Give date and location of entrance to active duty (city & state):

Give date and location of discharge (city & state):

List the periods of active service time below:

From (Date):

To (Date):

List all draft classifications you have had:

If you are a non-veteran, provide the local board number and address:

Were you ever convicted at a court-martial?

YES

NO

If yes, explain:

Criminal History

Have you ever been convicted of a crime other than traffic offenses?

YES

NO

If yes explain in detail below:

Date Charged:

By Whom (Police Agency):

Crime Charged:

Disposition of Case:

Have you ever been placed on probation?

YES

NO

If yes, explain:

Have you ever used any illegal drugs?

YES

NO

If yes, explain:

Have you ever been reported as a missing person or as a runaway?

YES

NO

If yes, explain details including the jurisdiction, dates and outcome:

Have you ever been the victim of a crime?

YES

NO

If yes, explain:

Was this crime reported to the police?

YES

NO

If no, explain why:

Criminal History

Have you ever been fingerprinted by a police agency other than for an arrest?

YES

NO

If yes explain in detail below:

Date:

Agency:

Purpose:

List all traffic citations you have received:

Location (City):

Approximate Date:

Nature of Violation:

Disposition of Case:

Are there any traffic warrants or other warrants now pending against you?

YES

NO

If yes, explain:

Employment History

Have you ever taken a civil service exam?

YES

NO

If yes explain in detail below:

Agency:

Approximate Exam Date:

Position on List:

Status:

Are you now on any eligibility list?

YES

NO

If yes, explain:

Were you ever placed on a civil service list and not hired?

YES

NO

If yes, explain:

Were you ever rejected for any civil service position?

YES

NO

If yes, explain:

Have you ever submitted an application for appointment to another police department?

YES

NO

If yes, provide the date:

Employment History (Continued)

Have you ever been a law enforcement officer or held a similar position?

YES

NO

If yes explain in detail below:

Position:

Date (From):

Date (To):

Location / Agency:

Were you ever sued as a result of your duties as a police officer?

YES

NO

If yes, explain and provide the disposition:

Were you ever discharged or forced to resign because of misconduct or unsatisfactory service or while under investigation?

YES

NO

If yes, explain and include name(s) and addresses of employees:

Are you now or have you ever been engaged in any business as an owner, partner or corporate member?

YES

NO

If yes, explain and include name(s) and addresses of employees:

Credit History

List three commercial or business credit references (Include bank, charge accounts or firms you have borrowed money for any purpose):

Name & Address of Firm: Type of Business: Amount: Approximate Date Opened & Closed:

Have you ever been sued?

YES

NO

If yes, explain:

Have you ever filed for bankruptcy?

YES

NO

If yes, explain:

List any outstanding debts and list amount(s) and whether in arrears:

Amount of
original debt:

Amount now
owed:

Past due
(Yes or No):

Name of creditor:

Address of creditor:

Acquaintances

Fill in below the names of three adults, **not related to you and not former employees or references**, who are friends, fellow students or fellow workers. The acquaintances listed should be those persons who have seen you frequently during the past year.

Name:

Address:

Home Phone: ()

Business Address:

Business Phone: ()

Business, occupation or profession:

What capacity do you know this person?

Name:

Address:

Home Phone: ()

Business Address:

Business Phone: ()

Business, occupation or profession:

What capacity do you know this person?

Name:

Address:

Home Phone: ()

Business Address:

Business Phone: ()

Business, occupation or profession:

What capacity do you know this person?

References

Fill in below the names of five adults not related to you and **not former employers** who have known you for a period preferably more than five years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality and other qualities.

Name: _____ Address: _____
Home Phone: () _____
Business Address: _____ Business Phone: () _____
Business, occupation or profession: _____ Years known? _____

Name: _____ Address: _____
Home Phone: () _____
Business Address: _____ Business Phone: () _____
Business, occupation or profession: _____ Years known? _____

Name: _____ Address: _____
Home Phone: () _____
Business Address: _____ Business Phone: () _____
Business, occupation or profession: _____ Years known? _____

Name: _____ Address: _____
Home Phone: () _____
Business Address: _____ Business Phone: () _____
Business, occupation or profession: _____ Years known? _____

Name: _____ Address: _____
Home Phone: () _____
Business Address: _____ Business Phone: () _____
Business, occupation or profession: _____ Years known? _____

Contact Information:

List person(s) to contact in case of emergency:

Name:

Address:

Home Phone:

Relationship:

Disclaimer and Signature

I hereby certify there are no willful misrepresentations or falsifications in this application and all my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____