

ROSSVILLE POLICE DEPARTMENT  
ROSSVILLE, TN 38066

**POLICE OFFICER APPLICATION PACKET**

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This packet contains the following information:

High School transcript request form  
College transcript form  
Personal History Statement  
Application for Employment

Read all information carefully and fill out all forms completely.

**CONSEQUENCES OF FALSIFICATION**

**ANY** willful misrepresentation or falsification given on **ANY FORM** herein is just cause for rejecting your application. It may also disqualify you from making application in the future for positions within the Town of Rossville, or cause any future employment with the Town to be terminated.

## HIGH SCHOOL TRANSCRIPT FORM

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**INSTRUCTIONS TO APPLICANT:**

1. Please read carefully and complete. Fill out the following requested information.
2. Take or mail this form to the High School from which you graduated. If you received a G.E.D., you may want to call first to determine where your G.E.D. records are located. If the High School/Board of Education charges a fee for mailing your transcripts to you, **YOU ARE RESPONSIBLE FOR PAYING THE FEE.**
3. Please have the High School/Board of Education mail your transcript or G.E.D. scores directly to the Town of Rossville Police Department at the address below.
4. When the Rossville Police Department receives your transcript, it becomes the property of the Town of Rossville and cannot be released to any other person or agency.

**NOTE: ALL TRANSCRIPTS/G.E.D. SCORES MUST BE RECEIVED AT THE ROSSVILLE POLICE DEPARTMENT OFFICE BY MAIL FROM YOUR HIGH SCHOOL/BOARD OF EDUCATION. TRANSCRIPTS DELIVERED IN PERSON OR MAILED BY YOU WILL NOT BE ACCEPTED.**

Detach the form below and mail to the High School that maintains your permanent transcript.

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**NAME OF HIGH SCHOOL:** \_\_\_\_\_

\_\_\_\_\_  
(Address)

**TO WHOM IT MAY CONCERN:** I have applied for a position with the Rossville Police Department. I am requesting that you mail, along with this form, a copy of my official high school transcript (showing my graduation date) or my G.E.D. scores to the **Rossville Police Department** at the following address:

**Rossville Police Department  
360 Morrison Road  
P. O. Box 27  
Rossville, TN 38066**

My name is (Last, First, Middle) \_\_\_\_\_

My name at the time I attended your school was (Last, First, Middle) \_\_\_\_\_

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My complete mailing address is (include city, state and ZIP Code):

Phone Number (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

I graduated on: \_\_\_\_\_ Class of \_\_\_\_\_ I received my G.E.D. on \_\_\_\_\_

I understand that I will be responsible for any fee incurred as part of this request.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\* PLEASE RETURN THIS FORM WITH TRANSCRIPT\*\*\***

## COLLEGE TRANSCRIPT REQUEST FORM

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**INSTRUCTIONS TO APPLICANT:**

1. Please read carefully and complete. Fill out the following requested information.
2. Take or mail this form to ALL Colleges/Universities you have attended. A transcript must be received from each college attended. If the College/University charges a fee for mailing your transcripts to you, **YOU ARE RESPONSIBLE FOR PAYING THE FEE.**
3. Please have each college/university mail your transcript directly to the Town of Rossville Police Department at the address below.
4. When the Rossville Police Department receives your transcript, it becomes the property of the Town of Rossville and cannot be released to any other person or agency.

**NOTE: ALL TRANSCRIPTS MUST BE RECEIVED AT THE ROSSVILLE POLICE DEPARTMENT OFFICE BY MAIL FROM YOUR HIGH SCHOOL/BOARD OF EDUCATION. TRANSCRIPTS DELIVERED IN PERSON OR MAILED BY YOU WILL NOT BE ACCEPTED.**

Detach the form below and mail to the College or University that maintains your permanent transcript.

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**NAME OF COLLEGE OR UNIVERSITY:** \_\_\_\_\_

(Address)

**TO WHOM IT MAY CONCERN:** I have applied for a position with the Rossville Police Department. I am requesting that you mail, along with this form, a copy of my official school transcript (showing my graduation date) to the **Rossville Police Department** at the following address:

**Rossville Police Department  
360 Morrison Road  
P. O. Box 27  
Rossville, TN 38066**

**My name is (Last, First, Middle)** \_\_\_\_\_

**My name at the time I attended your school was (Last, First, Middle)** \_\_\_\_\_

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**My complete mailing address is (include city, state and ZIP Code):**

**Phone Number (Home)** \_\_\_\_\_ **(Work)** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_

**I graduated on:** \_\_\_\_\_ **Class of** \_\_\_\_\_ **I received my G.E.D. on** \_\_\_\_\_

I understand that I will be responsible for any fee incurred as part of this request.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*\*\* PLEASE RETURN THIS FORM WITH TRANSCRIPT\*\*\***

**ROSSVILLE POLICE DEPARTMENT  
PERSONAL HISTORY STATEMENT**

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**PLEASE READ:**

- Answer each question on this form.
  - Information must be HANDWRITTEN AND PRINTED IN BLACK INK (DO NOT TYPE).
  - If additional information must be submitted in response to a specific question, please submit this information on additional sheets of 8.5" X 11" paper (NO SCRAP SHEETS) and attach them to this form. Precede each answer with the number and letter of the referenced section.
  - **DO NOT MISSTATE OR OMIT ANY FACTS, AS ALL INFORMATION IS VERIFIED. ACCURACY IS ESSENTIAL.**
  - **ANY FALSE STATEMENTS OR INFORMATION KNOWINGLY OMITTED IN THIS QUESTIONNAIRE IS JUST CAUSE FOR DENYING OR TERMINATING YOUR APPLICATION.**
  - There are to be no **UNKNOWN OR UNANSWERED** questions when this form is completed and turned in. If a question or the information requested does not apply, indicate this by using the symbol N/A (Not available). Should this question be **UNSATISFACTORILY FILLED OUT**, you will be rejected from further consideration.
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When the Personal History Statement is turned in, the following documents **MUST ALSO BE TURNED IN:**

- A certified copy of your Birth Certificate for us to witness, and photocopy for us to retain.
- Your original driver's license for us to witness and copy for us to retain.
- Your original Military DD214, DD215 or DD873 (including character of discharge section), and any other discharge document(s), if applicable, for us to witness and a copy for us to retain.
- Active Reserves who currently attend Military Drills must submit a Military Letter of Good Standing. This letter can be obtained from a staff member upon receipt of your Application Packet. The applicant must also submit all original DD214 discharge documents as soon as they become available by the applicant.

**FAILURE TO TURN IN THESE DOCUMENTS WILL RESULT IN YOUR APPLICATION BEING REJECTED BY  
THE ROSSVILLE POLICE DEPARTMENT.**

I hereby certify that I have read and understand all of the above stated information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**THIS PACKET MUST BE HANDWRITTEN IN BLACK INK (DO NOT TYPE).**

**\*\* PLEASE PRINT\*\***

**If this application is not legible, it WILL NOT be accepted.**

**PERSONAL HISTORY:**

Date: \_\_\_\_\_ Position Applied For: \_\_\_\_\_

Full Name (Last) (First) (Middle) Sex/Race Date of Birth

Current Street Address/Apt. # City State ZIP

Home Phone Work Phone Work Hours Days Off

Name and phone number of neighbor or relative with whom you are in regular contact, where a message can be left for you.

Are you a United States Citizen? \_\_\_\_\_ Yes \_\_\_\_\_ No

Social Security Number Birthplace City State County

List any maiden name or any other names that you have ever used, including all married names or nicknames, etc.:

Driver's License No. \_\_\_\_\_ State: \_\_\_\_\_ Type of Certification \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Conditions (Corrective Lens, Glasses, etc.) \_\_\_\_\_

**CHILD SUPPORT DELIQUENT:** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

**STUDY LOANS DELIQUENT:** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

**FAMILY HISTORY:**

Full Name of Present Spouse Maiden Name Age Date of Birth

Present Employment of Present Spouse Address (City/State) Phone Number

Full Name of Former Spouse Maiden Name Age Date of Birth

Address of Former Spouse Address (City/State) Phone Number

**List ALL Children and Step-Children:**

	<b>Full Name</b>	<b>Address</b>	<b>Phone No.</b>	<b>Date of Birth</b>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

**List separately Mother, Father, Stepmother, and Stepfather:**

1.	_____	_____	_____	_____
	<b>Father's Full Name</b>		<b>Age</b>	<b>Date of Birth</b>
	Home Address (City/State/ZIP)		Phone No.	
2.	_____	_____	_____	_____
	<b>Mother's Full Name</b>		<b>Age</b>	<b>Date of Birth</b>
	Home Address (City/State/ZIP)		Phone No.	
3.	_____	_____	_____	_____
	<b>Stepfather's Full Name</b>		<b>Age</b>	<b>Date of Birth</b>
	Home Address (City/State/ZIP)		Phone No.	
4.	_____	_____	_____	_____
	<b>Stepmother's Full Name</b>		<b>Age</b>	<b>Date of Birth</b>
	Home Address (City/State/ZIP)		Phone No.	

**LIST ALL PERSONS WHO RESIDE AT YOUR PRESENT RESIDENCE:**

_____	_____	_____
Full Name	Age	Date of Birth
_____	_____	_____
Full Name	Age	Date of Birth
_____	_____	_____
Full Name	Age	Date of Birth
_____	_____	_____
Full Name	Age	Date of Birth
_____	_____	_____
Full Name	Age	Date of Birth
_____	_____	_____
Full Name	Age	Date of Birth
_____	_____	_____
Full Name	Age	Date of Birth
_____	_____	_____
Full Name	Age	Date of Birth



**EMPLOYMENT TERMINATION:**

Have you ever been dismissed, fired, or asked to resign from any employment or position you have held, knowing that you would be fired or terminated if you did not resign?

\_\_\_\_\_ Yes (If yes, explain below.) \_\_\_\_\_ No

**Terminations:**

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone No. \_\_\_\_\_

Explain in detail the circumstances of termination: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Terminations:**

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone No. \_\_\_\_\_

Explain in detail the circumstances of termination: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Terminations:**

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Phone No. \_\_\_\_\_

Explain in detail the circumstances of termination: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

(USE THE FOLLOWING SECTIONS IF ADDITIONAL SPACE IS NEEDED)



**NOTE: USE SPACE BELOW TO PROVIDE ADDITIONAL INFORMATION ON TERMINATIONS.**

**TERMINATION #1**

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**TERMINATION #2**

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**TERMINATION #3**

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## **EMPLOYMENT:**

On the following pages, you will find employment reference sheets. **Please ensure this employment information is accurate and complete.**

- Please list your ENTIRE employment history.
- Include All PART-TIME, TEMPORARY AND SEASONAL EMPLOYMENT, regardless of time employed.
- If unemployed for any length of time, list dates of unemployment.
- Begin with your current employment, or most recent job, and work backwards.
- Employment history must cover from High School Graduation to Present.
- List all area codes and ZIP codes.
- Ensure that all addresses and phone numbers are complete and accurate.

**If additional employment reference sheets are needed, please make a photocopy prior to filling out any forms.**

# EMPLOYMENT REFERENCE SHEET

May we contact your current employer?

\_\_\_\_ Yes \_\_\_\_ No

## EMPLOYMENT REFERENCE

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### FOR INVESTIGATIVE USE ONLY

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Verified Only \_\_\_\_\_ Not Verified \_\_\_\_\_

Person Interviewed: \_\_\_\_\_ Title: \_\_\_\_\_

Exact Dates of Employment: From: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_

Position Held: \_\_\_\_\_ Eligible for Rehire: Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

## EMPLOYMENT REFERENCE

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

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<b>FOR INVESTIGATIVE USE ONLY</b>			
Positive_____	Negative_____	Verified Only_____	Not Verified_____
Person Interviewed:_____		Title:_____	
Exact Dates of Employment: From: ___/___/___		TO: ___/___/___	
Position Held: _____		Eligible for Rehire: Yes_____ No_____	
Additional Comments:_____			
Investigator:_____		Date:_____	

**EMPLOYMENT REFERENCE**

Name of Employer or Business:\_\_\_\_\_

Address:\_\_\_\_\_

City:\_\_\_\_\_ State:\_\_\_\_\_ ZIP:\_\_\_\_\_

Dates of Employment: From:\_\_\_\_\_ To:\_\_\_\_\_

Phone No.: (\_\_\_\_) \_\_\_\_\_ Supervisor:\_\_\_\_\_

Position:\_\_\_\_\_ Work Duties:\_\_\_\_\_

Reason for Leaving (Explain in Detail):\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>FOR INVESTIGATIVE USE ONLY</b>			
Positive_____	Negative_____	Verified Only_____	Not Verified_____
Person Interviewed:_____		Title:_____	
Exact Dates of Employment: From: ___/___/___		TO: ___/___/___	
Position Held: _____		Eligible for Rehire: Yes_____ No_____	
Additional Comments:_____			
Investigator:_____		Date:_____	

**EMPLOYMENT REFERENCE**

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FOR INVESTIGATIVE USE ONLY**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Verified Only \_\_\_\_\_ Not Verified \_\_\_\_\_

Person Interviewed: \_\_\_\_\_ Title: \_\_\_\_\_

Exact Dates of Employment: From: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_

Position Held: \_\_\_\_\_ Eligible for Rehire: Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

**EMPLOYMENT REFERENCE**

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>FOR INVESTIGATIVE USE ONLY</b>			
Positive _____	Negative _____	Verified Only _____	Not Verified _____
Person Interviewed: _____		Title: _____	
Exact Dates of Employment: From: ___/___/___		TO: ___/___/___	
Position Held: _____		Eligible for Rehire: Yes _____ No _____	
Additional Comments: _____			
_____			
_____			
Investigator: _____		Date: _____	

**EMPLOYMENT REFERENCE**

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>FOR INVESTIGATIVE USE ONLY</b>			
Positive _____	Negative _____	Verified Only _____	Not Verified _____
Person Interviewed: _____		Title: _____	
Exact Dates of Employment: From: ___/___/___		TO: ___/___/___	
Position Held: _____		Eligible for Rehire: Yes _____ No _____	
Additional Comments: _____			
_____			
_____			
Investigator: _____		Date: _____	

**EMPLOYMENT REFERENCE**

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR INVESTIGATIVE USE ONLY**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Verified Only \_\_\_\_\_ Not Verified \_\_\_\_\_

Person Interviewed: \_\_\_\_\_ Title: \_\_\_\_\_

Exact Dates of Employment: From: \_\_\_/\_\_\_/\_\_\_ TO: \_\_\_/\_\_\_/\_\_\_

Position Held: \_\_\_\_\_ Eligible for Rehire: Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

**EMPLOYMENT REFERENCE**

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR INVESTIGATIVE USE ONLY**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Verified Only \_\_\_\_\_ Not Verified \_\_\_\_\_

Person Interviewed: \_\_\_\_\_ Title: \_\_\_\_\_

Exact Dates of Employment: From: \_\_\_/\_\_\_/\_\_\_ TO: \_\_\_/\_\_\_/\_\_\_

Position Held: \_\_\_\_\_ Eligible for Rehire: Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

**EMPLOYMENT REFERENCE**

Name of Employer or Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Phone No.: ( \_\_\_\_ ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_ Work Duties: \_\_\_\_\_

Reason for Leaving (Explain in Detail): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR INVESTIGATIVE USE ONLY**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Verified Only \_\_\_\_\_ Not Verified \_\_\_\_\_

Person Interviewed: \_\_\_\_\_ Title: \_\_\_\_\_

Exact Dates of Employment: From: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_

Position Held: \_\_\_\_\_ Eligible for Rehire: Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

**MILITARY RECORD:**

Have you ever been on active duty in the Armed Forces for the United States:

\_\_\_\_\_ NO \_\_\_\_\_ YES (If yes, please complete following: )

Branch of Military Service \_\_\_\_\_

Type of Discharge: \_\_\_\_\_ If other than Honorable, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Dates of Active Duty (Month, Day and Year) From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you ever been, or are you currently, a member of a Reserve Unit or National Guard Unit? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, Branch \_\_\_\_\_ Ready \_\_\_\_\_ Stand/PR \_\_\_\_\_



Are you currently active in the military? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If Yes, what is your anticipated release date? \_\_\_\_\_

If you were in the military, were you ever court-martialed? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If Yes, explain. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Did you have ANY type of disciplinary action taken against you while in the military (this includes Article 15, Captains Mast, etc.)? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If Yes, explain. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COURT RECORD:**

Have you ever been arrested as an adult or juvenile (arrest is defined as being taken into custody and transported to a jail/detention facility) or charged with a crime as an adult or a juvenile (charged with a crime means issued a misdemeanor citation, a juvenile summons, an adult summons, arrested on a warrant or indicted by a grand jury)?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

List ALL the times you have been arrested or had criminal charges placed against you, including a detailed explanation of the circumstances (attach additional sheets if necessary). You must list ALL arrests or charges even if they were dropped or did not result in a conviction and even if the public record of the arrest or charges were expunged and erased and even if you have been told that you do not have to admit arrests or charges which have been expunged or erased. An independent investigation of your criminal history will be conducted and, if arrests or charges are found which you did not report, your application can be rejected due to untruthfulness.

Date	City/State	Charges	Circumstances	Disposition of Case

Have you ever, as an adult or juvenile, been convicted of or entered a guilty plea or a plea of nolo contendere to any criminal charge? This question includes ALL criminal offenses including felonies, misdemeanors, misdemeanor citations, traffic citations, city ordinance summons and juvenile summons.  
 \_\_\_\_\_ Yes \_\_\_\_\_ No



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Full Name (Last, First Middle)

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Address (Street) (City) (State) (ZIP)

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Phone (Home) (Cell) (Business)

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Full Name (Last, First Middle)

---

Address (Street) (City) (State) (ZIP)

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Phone (Home) (Cell) (Business)

