

# BROWNSTOWN POLICE DEPARTMENT

## Police Officer Application

Official Use Only Date / Time Received:
Received by:

NAME (please type or print): \_\_\_\_\_  
Last First MI Email address

Mailing Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Social Security Number \_\_\_\_\_ I am over the age of 21 I will be age 21 by \_\_\_\_\_

**RELATED EXPERIENCE:** In order to be eligible for testing you must meet one of the following:

I am currently Michigan MCOLES certified Certification # \_\_\_\_\_ (Attach copy of certification)

I am eligible for Michigan MCOLES certification (**You must meet one of the two criteria below**)

I have graduated from \_\_\_\_\_ . My test is scheduled for \_\_\_\_\_  
(Name of academy) (Date)

I am certified in another state Certification # \_\_\_\_\_ State \_\_\_\_\_ (Attach copy of certification)

I am currently enrolled in a MCOLES academy (enrolled at the time of application and will be actively attending at the time of interview).

Name of Academy \_\_\_\_\_ Anticipated Grad Date \_\_\_\_\_

Other information you feel would be helpful in considering you for employment:

**EDUCATION:** Please check highest grade completed. 12 13 14 15 16 16+

High School \_\_\_\_\_ City/State \_\_\_\_\_

GED or Diploma: Yes No

College/University \_\_\_\_\_ City/State \_\_\_\_\_

Degree & Major \_\_\_\_\_

**EMPLOYMENT HISTORY:** List your work history below. **Start with your present or most recent position and go backward through your experience. Include at least 10 years or back through age 18 (whichever is shorter).** Include military service and volunteer work in chronological order. Identify by month and year any period of unemployment of six months or more. Also, explain the circumstances for any positions from which you have been fired or terminated. **This section MUST be complete.** Attach additional sheets if necessary.

**Current or Most Recent Employer**

_____	_____	_____	Full Time	Part Time
Company Name	City/state	Phone Number of Supervisor	Volunteer	
From _____ to _____	_____	_____	_____	_____
Date Employed	Job Title	Supervisor Name		

DUTIES: \_\_\_\_\_

Salary \$ \_\_\_\_\_ per \_\_\_\_\_ (Hour, Week, Month) Reason for Leaving  
Or wanting to leave: \_\_\_\_\_

May we contact this employer? Yes No

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**Second Most Recent Employer**

_____	_____	_____	Full Time Volunteer	Part Time
Company Name	City/state	Phone Number of Supervisor		
From _____ to _____	_____	_____	_____	_____
Date Employed	Job Title	Supervisor Name		
DUTIES: _____				
_____				
Salary \$ _____ per _____ (Hour, Week, Month)	Reason for Leaving Or wanting to leave: _____			
May we contact this employer?	Yes	No		

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**Third Most Recent Employer**

_____	_____	_____	Full Time Volunteer	Part Time
Company Name	City/state	Phone Number of Supervisor		
From _____ to _____	_____	_____	_____	_____
Date Employed	Job Title	Supervisor Name		
DUTIES: _____				
_____				
Salary \$ _____ per _____ (Hour, Week, Month)	Reason for Leaving Or wanting to leave: _____			
May we contact this employer?	Yes	No		

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**Fourth Most Recent Employer**

_____	_____	_____	Full Time Volunteer	Part Time
Company Name	City/state	Phone Number of Supervisor		
From _____ to _____	_____	_____	_____	_____
Date Employed	Job Title	Supervisor Name		
DUTIES: _____				
_____				
Salary \$ _____ per _____ (Hour, Week, Month)	Reason for Leaving Or wanting to leave: _____			
May we contact this employer?	Yes	No		

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**Fifth Most Recent Employer**

_____	_____	_____	Full Time Volunteer	Part Time
Company Name	City/state	Phone Number of Supervisor		
From _____ to _____	_____	_____	_____	_____
Date Employed	Job Title	Supervisor Name		
DUTIES: _____				
_____				
Salary \$ _____ per _____ (Hour, Week, Month)	Reason for Leaving Or wanting to leave: _____			
May we contact this employer?	Yes	No		

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**Sixth Most Recent Employer**

_____	_____	_____	Full Time	Part Time
Company Name	City/state	Phone Number of Supervisor	Volunteer	
From _____ to _____	_____	_____	_____	_____
Date Employed	Job Title	Supervisor Name		
DUTIES: _____				
_____				
Salary \$ _____ per _____ (Hour, Week, Month)	Reason for Leaving			
	Or wanting to leave: _____			
May we contact this employer?	Yes	No		

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**Seventh Most Recent Employer**

_____	_____	_____	Full Time	Part Time
Company Name	City/state	Phone Number of Supervisor	Volunteer	
From _____ to _____	_____	_____	_____	_____
Date Employed	Job Title	Supervisor Name		
DUTIES: _____				
_____				
Salary \$ _____ per _____ (Hour, Week, Month)	Reason for Leaving			
	Or wanting to leave: _____			
May we contact this employer?	Yes	No		

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**ATTACH ADDITIONAL SHEETS IF NECESSARY to provide 10 years work experience**

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**MILITARY EXPERIENCE:**

Branch of Service: \_\_\_\_\_ Dates of Service: \_\_\_\_\_ Discharge Classification: \_\_\_\_\_

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**DRIVING RECORD:** You are applying for a position that will require driving. Please complete the following.

Driver's License Number: \_\_\_\_\_ Class: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Expiration date: \_\_\_\_\_ List type, date, and disposition of all traffic violations within past 5 years.

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

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**WORK REFERENCES:** Include only individuals familiar with your work ability. *Do not include relatives.*

Name	Phone #	Address, City, State, Zip
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

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