

# **Police Officer Application Borough of Upland Police Department**

## **General Instructions**

Every one of these sections must be completed in order for the Upland Borough Police Department to accept the application as complete. Print (do not type) an answer to every question. If a particular question does not apply to you, so state with N/A. If space available is insufficient, use reverse side and proceed with the number of the referenced block.

Do not misstate or omit material fact since the statements made herein are subject to verification to determine your qualifications for employment. Any false, misleading, or incomplete information will result in your application being rejected.

Once submitted, this application becomes the property of The Upland Borough Police Department.

This application consists of several sections:

- Questionnaire.
- Verification.
- Notification Procedure Release.
- Waiver and Release for Background Investigation.

**Completed and Notarized** applications must be returned to the attention of: Chief of Police,  
The Upland Borough Police Department, 222 Castle Avenue Upland, PA 19015



## **MINIMUM QUALIFICATIONS**

1. An applicant shall be no less than twenty-one (21) years of age by the application deadline.
2. An applicant shall have no record of conviction of any felony or violent crime.
3. Must submit to an oral board examination.
4. Must pass a background investigation which includes a check of references, credit history, inquiry as to character and reputation, health history, and a fingerprint-based criminal records check.
5. An applicant shall be physically, medically and psychologically fit to perform the essential functions of the job classification, with or without reasonable accommodations. To comply with ADA requirements the medical and psychological examinations will not be completed until a conditional offer of employment is made to the applicant.
6. Must have a valid driver's license at the time of hire.
7. An applicant shall have satisfactorily completed a certified police academy and be eligible for ACT 120 certification based upon the standards as set forth by MPOTEC at the time of application.

## **Questionnaire**

1. Last Name First Name Middle Name 2. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Social Security Number

3. Alias(es), Nickname(s) Maiden Name, Other Changes in Name 3A. \_\_\_\_\_  
Telephone Number

4. Present Residence Address, Street/City/State/Zip 4A. Email

U.S. Citizen: Native (Yes/No) Naturalization No. Date Place Court

5 A. Date of Birth

**5. Residences:** List all for past ten years beginning with current.

Month and Year From	To	Address	With whom did you live and where are they now?

**7. Family**

Are you ? \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed

List all children related to you or your spouse:

Name	Relation	Date of Birth	Address	Supported by Whom

**8. Vehicle Operator's License**

Give the following information concerning any vehicle operator's license you have held or now hold:

Type of License	Number	Issuing Authority	Expiration

Have you ever had a license suspended or revoked? Yes No

**9. Conviction of Crime**

Have you ever been convicted of a misdemeanor or felony ? Yes No

If yes, state violation, court of jurisdiction, and date of conviction.

**10. Past and Present Membership in Organizations**

Name	Address	Zip	Type	Office Held	Membership

					<b>Dates</b>

**11. Education**

**A. List all high schools attended. Attach transcript from last high school attended.**

<b>Name</b>	<b>City</b>	<b>Zip</b>	<b>Graduated Yes/No</b>

**B. Higher Education. List all colleges or universities attended. Attach transcript from last institution.**

<b>Name</b>	<b>City</b>	<b>Zip</b>	<b>Dates Attended</b>	<b>Credit Hours Semester/Quarter</b>	<b>Degree Rec'd Year</b>

**12. Special Qualifications and Skills**

Indicate Police Certification or any other type of special license such as pilot, radio operator, etc., showing licensing authority, where the license was first issued and date current license expires.

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**13. THIS SECTION LEFT BLANK INTENTIONALLY**

**14. Hobbies and Sports**

<b>Name</b>	<b>Length of Participation</b>	<b>Level of Proficiency</b>

**15. Employment**

Are you now or have you been a law Enforcement Officer?  Yes  No

Begin with your most recent job and list your work history for the past ten years, including part-time, temporary or seasonal employment, and all periods of unemployment.

<b>Date</b>		<b>Name, Address, Phone Number of Employer</b>	
<b>From</b>	<b>To</b>		
<b>Salary</b>		<b>Description of Duties</b>	
<b>Job Title</b>			
<b>Why did you leave?</b>			
<b>Name of Supervisor:</b>		<b>Phone Number</b>	
<b>Name of Co-Worker:</b>		<b>Phone Number</b>	

<b>Date</b>		<b>Name, Address, Phone Number of Employer</b>	
<b>From</b>	<b>To</b>		
<b>Salary</b>		<b>Description of Duties</b>	
<b>Job Title</b>			
<b>Why did you leave?</b>			
<b>Name of Supervisor:</b>		<b>Phone Number</b>	
<b>Name of Co-Worker:</b>		<b>Phone Number</b>	

<b>Date</b>		<b>Name, Address, Phone Number of Employer</b>	
<b>From</b>	<b>To</b>		
<b>Salary</b>		<b>Description of Duties</b>	
<b>Job Title</b>			
<b>Why did you leave?</b>			
<b>Name of Supervisor:</b>		<b>Phone Number</b>	
<b>Name of Co-Worker:</b>		<b>Phone Number</b>	

*If additional employer blocks are needed, please attach requested information on separate sheet.*

Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)? If yes, state reason: \_\_\_\_\_

**16. Military Status**

Have you ever served in the U.S. Armed Forces? Yes No  
 Do you claim veteran's preference? Yes No  
 Are you presently a member of a U.S. Reserve or State Guard organization? Yes No

**17. Financial Status**

Give names and addresses of the individuals, companies or others to whom you are indebted, and the extent of your debt. Include rent, mortgages, vehicle payments, charge accounts, credit cards, loans, child support payments and any other debts and payments. Include account number where applicable.

Type	Name and Address of Creditors	Reason for Debt or Item Purchased	Account Number	Total Balance	Monthly Payments

**18. Character References**

List only character references who have definite knowledge of your qualifications for the position of application. List five character references. (Do not list relatives or persons living outside the United States.)

#	Name	Address	Phone	Email
1 .				
2 .				
3 .				
4 .				
5 .				

19. Have you ever applied for a position with any other governmental agencies? If yes, give details.

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**20. Remarks**

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me above are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

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Date

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Signature of Applicant

**Verification**

The information I have provided in the foregoing Application is true and correct to the best of my knowledge belief and understanding. I understand that any false statement contained therein is subject to the penalties prescribed by Pennsylvania Crimes Code, relating to unsworn falsification to authorities.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Applicant

**Notification Procedure Release**

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event they are being given further consideration for the position of police officer with the *Upland Borough Police Department*.

If conventional methods fail in attempting to contact the applicant, a certified-registered letter will be sent to the applicant's address listed on the application. Should the registered letter be returned indicating that it was unclaimed or undeliverable; the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the *Upland Borough Police Department*, in writing, of the address change. By affixing your signature to this form, the applicant acknowledges that you have read and understood the contents of this procedure.

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Date

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Signature of Applicant

**Waiver and Release  
for The Upland Borough Police Department Background Investigation**

I, \_\_\_\_\_, am presently applying for employment as a police officer with the *Upland Borough Police Department*, which I acknowledge and understand, must thoroughly investigate my employment background, criminal history, personal background, education and references in order to evaluate my qualifications for a position as a police officer. I understand that it is in the public's interest that all relevant information in this regard, including my personal and employment history with my current and former employers, be disclosed to the *Upland Borough Police Department* and/or their designee.

By this release, I hereby authorize any representative of all of my former employers, which have been fully disclosed and identified in my employment application, to divulge any information in its files pertaining to my employment records and history, and I further authorize the release of such information upon request to any representative of the *Upland Borough Police Department*. I also authorize all former employers identified in my employment application to permit a review and full disclosure of all records, or any part thereof, concerning myself and my employment with those former employers, by and to any duly authorized agent of the Upland Borough Police Department, whether said records are of public, private, or of a confidential nature.

The intent of this authorization is to permit all former employers identified in my employment application to provide, and for the *Upland Borough Police Department* to obtain, full and free access to the background and history of my personal life and my employment history and performance, for the specific purpose of permitting the *Upland Borough Police Department* to conduct a thorough background investigation regarding me that will provide pertinent data for consideration by the *Upland Borough Police Department* in determining my suitability for employment as a police officer. It is my specific intent to provide the *Upland Borough Police Department* with access to personnel information, however personal or confidential it may appear to be.

I authorize all former employers, which have been fully disclosed and identified in my employment application, to release any and all public and private information that it may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history record, including my arrest record(s) and records compiled during or as the result of a criminal investigation(s) of me, efficiency ratings, complaints or grievances filed by or against me, the records or 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, attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed.

I hereby release all former employers identified in my employment application, and, if applicable, their elected and appointed officials, employees and agents and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release all former employers identified in my employment application, and, if applicable, its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct all former employers identified in my employment application to release such information upon request of the duly accredited representative of the *Upland Borough Police Department*, regardless of any agreement, written or oral, I may have made with the former employer to the contrary.

In addition, I also give the *Upland Borough Police Department* the right to thoroughly investigate my background, previous employment, education and references in order to ascertain my suitability for service as an *Upland Borough* employee. I release and hold harmless the *Upland Borough Police Department*, *Upland Borough*, its elected and<sup>9</sup> appointed officials, agents and employees from

and against any and all liability which might result from conducting such an investigation, including any damages of whatever kind which may at any time result to me, my heirs, family or associates because of such investigation.

I recognize and understand my rights with regard to access and disclosure of records, and I waive those rights with the understanding that information furnished by any former employer will be used by the *Upland Borough Police Department* in conjunction with employment procedures.

I understand that if a former employer refused to cooperate with this investigation by failing to provide full disclosure of any and all relevant information about me, then the *Upland Borough Police Department* may disqualify me from further consideration for employment as a police officer.

A photocopy or facsimile of this release form will be valid as an original thereof, even though the said photocopy or facsimile does not contain an original writing of my signature. This waiver is valid for a period of one year from the date of my signature. Should there be any questions as to the validity of this release, you may contact me at the address listed on my employment application.

I agree to indemnify and hold harmless the person, to whom this request is presented, as well as his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

NOTORIZATION:

State of \_\_\_\_\_ County of \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by  
\_\_\_\_\_

Notary Public \_\_\_\_\_

Seal \_\_\_\_\_