

Employment Application for the Juno Beach Police Department

The Juno Beach Police Department is an equal opportunity employer (EOE), drug, tobacco and smoke free workplace and will select qualified candidates for appointment. No applicant and or employee will be discriminated against because of race, color, age, sex, religion, national origin, marital status, political affiliation, familial status, sexual orientation, citizenship, genetic information or disability.

POLICE OFFICER PART-TIME POLICE OFFICER CIVILIAN EMPLOYEE
 VOLUNTEER RESERVE OFFICER CIVILIAN VOLUNTEER OTHER _____

Last Name	First Name	Middle Name
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Nickname(s), maiden name, or other names by which you have been known: _____

Street Address _____

City	County	State	Zip Code
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(____) _____

Cellular Number	Email Address
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Driver's License Number and State _____

Date of Birth	(M-D-Y)	Place of Birth
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Emergency Notification Contact (other than spouse): _____

Relationship: _____ Telephone Numbers: _____

Police Officer: Certified? ____ Yes ____ No, if yes in what state? _____

Currently in Police Academy? ____ Yes ____ No Citizenship: ____ USA ____ Other

For Office Use Only

Date Received: _____	Date Removed: _____
First Interview Results: ____ P ____ F	One-on-One Interview w/Chief Date: _____
Oral Board Results: ____ P ____ F	Conditional Letter Date: _____
Two Ride-Along Visit Dates: ____ / ____	Notes: _____

INSTRUCTIONS

PLEASE READ THESE INSTRUCTIONS CAREFULLY BEFORE PROCEEDING

- Fill out this application completely and accurately, as all statements in this application are subject to verification. When the employment application is submitted, it will be reviewed for completeness and accuracy. Errors, omissions, and deficiencies not corrected before any oral review may disqualify the applicant from the selection process.
- Any applicant intentionally giving false information will be subject to disqualification.
- All dates and addresses **MUST** be complete, including zip codes.
- If there is insufficient space on the form for you to include all information required, attach extra sheets. Be sure to reference the question number and the extra page number indicating the total number of pages. Sign and date the bottom of each extra page.
- If a question is not applicable to you, enter N/A in the space provided.
- **THIS APPLICATION MUST BE NOTARIZED ON THE LAST PAGE.**

GENERAL REQUIREMENTS

- Be a high school graduate or equivalent. A General Education Diploma (GED) and/or graduation from the United States Armed Forces Institute (USAFI) are acceptable when accompanied by a certified or official transcript of grades. An out-of-state General Education Diploma (GED) or the USAFI equivalency must be acceptable by the State of Florida Police Standards Council (sworn positions only).
- Be a **NON-SMOKER** for the past one (1) year, this includes use of any tobacco products – on or off-duty, and be willing to continue to not use tobacco products on or off duty.
- Possess a valid Florida Driver's License and possess a good driving record prior to appointment.
- Never been convicted of any felony.
- Never arrested for ANY Domestic Violence related misdemeanor.
- Never convicted of any "moral turpitude" misdemeanor.
- Never have received a dishonorable discharge from any of the Armed Forces of the United States.
- Have a positive work history, being free from frequent disciplinary actions, suspensions, terminations or asked to resign.

POLICE OFFICER REQUIREMENTS

- Be at least 19 years of age (minimum age of twenty-one (21) preferred) and a citizen of the United States.
- Maintain the highest moral character, as specified under the provision of Florida State Statutes 943.13(7) and Rule 11B-27.002 of the Florida Administrative Code, by never having been convicted of any felony or of a misdemeanor involving perjury or false statement. Any person who, after July 1, 1981, pleads guilty or nolo contendere to, or is found guilty of a felony, or of a misdemeanor involving perjury or a false statement, shall not be eligible for employment or appointment as an officer, notwithstanding suspension of sentence or withholding of adjudication.

CIVILIAN REQUIREMENTS

Be at least eighteen (18) years of age (age twenty-one (21) preferred) and a citizen of the United States.

SECTION A – APPLICATION INFORMATION

- 1. Referral Source: _____ Advertisement - Where _____
____ Friend / Relative _____ Walk-In _____ Other: _____
- 2. Have you filed a previous application here? ___ No ___ Yes - If yes, Date _____ Position _____
- 3. Are you currently employed? ___ No ___ Yes - May we contact your present employer? ___ No ___ Yes
- 4. Does your citizenship allow you employment in this country? ___ No ___ Yes
- 5. On what date would you be available for work? _____
- 6. Are you available to work? (Check all that apply) _____ Part-Time _____ Full Time _____ Shift Work
- 7. Can you travel out of the local area if an assignment requires it? ___ No ___ Yes
- 8. Are you available to work occasional overtime? ___ No ___ Yes
- 9. What salary range are you willing to accept? _____ to _____
- 10. Are you currently or have you in the past year used any tobacco products? ___ No ___ Yes - If yes, when was the last time you used a tobacco product? _____

SECTION B – RESIDENCY

11. List ALL addresses where you have lived during the past TEN (10) years, beginning with your present address. List all dates by month and year. Attach extra pages if necessary.

From	To	Complete Address – Number, Street, Apt #, City, State, Zip Code and Country:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SECTION C – EMPLOYMENT

12. Beginning with your present employer or most recent job, list ALL employment held for the past ten years, including part-time, temporary or seasonal employment. Attach extra pages if necessary.

Company Name _____ Supervisor Name/Title _____
(____) _____ (____) _____ (____) _____
Home # _____ Business # _____ Cellular # _____
Address: _____ City _____ St _____ Zip Code _____
Position/Title _____ Start Date _____ End Date _____
Reason for Leaving: ___ Laid Off ___ Voluntarily Resigned ___ Retired ___ Transfer ___ Fired or Discharged
Other _____
Duties/Responsibilities _____

Company Name _____ Supervisor Name/Title _____
() () ()
Home # _____ Business # _____ Cellular # _____
Address: _____ City _____ St. _____ Zip Code _____
Position/Title _____ Start Date _____ End Date _____
Reason for Leaving: _____ Laid Off _____ Voluntarily Resigned _____ Retired _____ Transfer _____ Fired or Discharged
Other _____
Duties/Responsibilities _____

Company Name _____ Supervisor Name/Title _____
() () ()
Home # _____ Business # _____ Cellular # _____
Address: _____ City _____ St. _____ Zip Code _____
Position/Title _____ Start Date _____ End Date _____
Reason for Leaving: _____ Laid Off _____ Voluntarily Resigned _____ Retired _____ Transfer _____ Fired or Discharged
Other _____
Duties/Responsibilities _____

Company Name _____ Supervisor Name/Title _____
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Position/Title _____ Start Date _____ End Date _____
Reason for Leaving: _____ Laid Off _____ Voluntarily Resigned _____ Retired _____ Transfer _____ Fired or Discharged
Other _____
Duties/Responsibilities _____

Company Name _____ Supervisor Name/Title _____
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Home # _____ Business # _____ Cellular # _____
Address: _____ City _____ St. _____ Zip Code _____

Position / Title _____ Start Date _____ End Date _____
Reason for Leaving: _____ Laid Off _____ Voluntarily Resigned _____ Retired _____ Transfer _____ Fired or Discharged
Other _____
Duties / Responsibilities _____

Company Name _____ Supervisor Name / Title _____
(_____) _____ (_____) _____ (_____) _____
Home # _____ Business # _____ Cellular # _____
Address: _____ City _____ St _____ Zip Code _____
Position / Title _____ Start Date _____ End Date _____
Reason for Leaving: _____ Laid Off _____ Voluntarily Resigned _____ Retired _____ Transfer _____ Fired or Discharged
Other _____
Duties / Responsibilities _____

Company Name _____ Supervisor Name / Title _____
(_____) _____ (_____) _____ (_____) _____
Home # _____ Business # _____ Cellular # _____
Address: _____ City _____ St _____ Zip Code _____
Position / Title _____ Start Date _____ End Date _____
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Other _____
Duties / Responsibilities _____

Company Name _____ Supervisor Name / Title _____
(_____) _____ (_____) _____ (_____) _____
Home # _____ Business # _____ Cellular # _____
Address: _____ City _____ St _____ Zip Code _____
Position / Title _____ Start Date _____ End Date _____
Reason for Leaving: _____ Laid Off _____ Voluntarily Resigned _____ Retired _____ Transfer _____ Fired or Discharged
Other _____
Duties / Responsibilities _____

13. In the past three years, how many times were you absent from your workplace or job assignment (during normal working hours) without your supervisor's approval? _____

14. List professional, trade, business, or civic organizations and activities you participate in, including any offices you hold (you may exclude memberships which would reveal sex, race, age, or other protected status).

Name	Address	Office Held

SECTION D – EDUCATION, TRAINING AND SKILLS

For Police Applicants complete questions 15 thru 19

15. Florida Law Enforcement Certified? _____ No _____ Yes: Date Issued: _____

16. Other Law Enforcement Certification: State _____ Exp. Date _____

17. If you have an out-of-state Law Enforcement Certification, have you completed the Florida Department of Law Enforcement (FDLE) Comparative Compliance Course? _____ No _____ Yes

18. Are you currently enrolled in a Florida Police Academy? _____ No _____ Yes _____ N/A

19. Police Applicant Only: Can you swim? _____ No _____ Yes

20. Circle the highest level of formal education that you have completed.

Grade School GED High School College Bachelor's Master's Doctorate
 12345678 1 2 3 4 1 2 3 +

List schools attended below, if required use a separate sheet of paper to list ALL schools

High School	Name	Address		
College	Name	Address	Major	Degree
Graduate School	Name	Address	Major	Degree
Vocational School	Name	Address	Major	Degree

21. Special Skills and Qualifications – list any special skills, licenses and/or certifications acquired by prior employment or training experience.

22. Second Language – Note the second language or place an X in the box for your capacity to read, write and speak the language. You may exclude language information which would reveal ethnicity, race, or other protected status.

	FLUENT	GOOD	FAIR
Speak			
Read			
Write			

American Sign Language			
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SECTION E – MILITARY HISTORY

23. Have you ever served in the United States Armed Forces, including Reserves and National Guard?

_____ No _____ Yes

24. Have you ever served in ANY foreign country Armed Forces, including Reserves and National Guard or equivalent? _____ No _____ Yes

25. If you answered “No” to both #23 and #24, are you willing to sign an affidavit stating you have NOT served in any Armed Forces? _____ No _____ Yes, then proceed to question # 29.

26. Dates of Service:

From _____ to _____ Branch of Service _____

Serial Number: _____ Rank _____

Type of Discharge _____ Reason Discharge _____

From _____ to _____ Branch of Service _____

Serial Number: _____ Rank _____

Type of Discharge _____ Reason Discharge _____

27. Were you ever tried, punished, reprimanded, or reduced in rank for any infraction of military rules and regulations? _____ No _____ Yes - If yes, indicate on a separate sheet of paper: **1) Dates, 2) Charges** against you, **3) Type of court martial or other disciplinary proceeding, and 4) the disposition of the charges.**

28. Has your discharge or separation ever been corrected or changed? _____ No _____ Yes - If yes, indicate details below:

Change from _____ to _____

Authority: _____

SECTION F – FAMILY STATUS

29. Do you currently have any relatives working for the Town of Juno Beach? _____ No _____ Yes - If yes, note name and what Department they work in _____

30. Have you ever had your name legally changed? _____ No _____ Yes - If you answered yes, provide:

a) Previous Name _____

b) Date and Location of Change _____

c) Reason for Change _____

31. Current Spouse's Full Name _____

32. Current Spouse's Maiden Name _____

33. Is your current spouse in favor of you becoming a Juno Beach Police Employee? _____ No _____ Yes

34. Have you ever been married to anybody before the above listed spouse? _____ No _____ Yes - If you have answered yes, provide the following on a separate sheet of paper for each former spouse: **1)** Full name of former spouse, **2)** If you are responsible for making any child support or alimony payments, and how much a month for each, **3)** Has any legal action ever been taken against you for failed or delayed payments to your former spouse, if so explain.

SECTION G – DRIVING RECORD

35. Can you operate a motor vehicle? _____ No _____ Yes

36. Do you possess a valid Florida Driver's License? _____ No _____ Yes

37. List any State, Province or Foreign Country in which you were issued a driver's license or driving permit.

38. Has your Driver's License ever been suspended or revoked? _____ No _____ Yes
If yes, indicate on separate sheet: 1) state of issue; 2) the date; 3) ALL details.

39. Have you ever been involved in a motor vehicle accident? _____ No _____ Yes - If yes, indicate on a separate sheet for each accident: **1)** Date; **2)** Location; **3)** Any charges and **4)** Final disposition of any police charges or civil liability.

40. Have you ever received a traffic citation (non-parking)? _____ No _____ Yes - If yes, indicate on a separate sheet for each citation: **1)** Date, **2)** Issuing authority, **3)** city, county and state, **4)** charges, and **5)** final disposition.

41. Do you have any unpaid summonses outstanding against you for any parking violations? _____ No _____ Yes - If yes, where and how many _____

SECTION H – FINANCIAL HISTORY

If you answer **YES** to any of the **FINANCIAL HISTORY** questions, provide an explanation on a separate sheet of paper.

42. Have you, your spouse, or former spouse(s) ever had your wages attached/garnished? _____ No _____ Yes

43. Have you, your spouse, or former spouse(s) ever been a party to small claim actions? _____ No _____ Yes

44. Do you, your spouse, or former spouse(s) have any civil actions pending against you? _____ No _____ Yes

45. Have you, your spouse, or former spouse(s) ever had a judgment rendered against you? _____ No _____ Yes

46. Have you, your spouse, or former spouse(s) ever filed for bankruptcy or been declared bankrupt?
 _____ No _____ Yes
47. Have you, your spouse, or former spouse(s) ever had any property repossessed? _____ No _____ Yes
48. Have you ever been bonded? _____ No _____ Yes
49. Have you ever been refused a bond? _____ No _____ Yes
50. If employed by the Juno Beach Police Department, do you anticipate any income other than your Juno Beach salary? _____ No _____ Yes

SECTION I – CRIMINAL HISTORY

51. Have you ever been arrested, or detained by any law enforcement officer? This question also includes any instance involved as a juvenile. _____ No _____ Yes. If yes, provide on a separate sheet: 1) The police agency, 2) The charge, 3) The final disposition, 4) The date, 5) ALL details of the incident and case.
52. Have you ever committed a felony or misdemeanor in which you were NOT ARRESTED? _____ No _____ Yes - If yes, provide on a separate sheet ALL details.

SECTION J – REFERENCES

53. List the name of three (3) persons not related to you and not former employers, who have known you for at least five (5) years. All persons whom you refer will be asked to appraise your character, ability, experience, personality and other qualities.

Name _____

Home Address _____

Business, Occupation or Profession _____ Years Known _____

Name of Business _____

Business Address _____

(____) (____) (____)

Home # Business # Cellular #

Name _____

Home Address _____

Business, Occupation or Profession _____ Years Known _____

Name of Business _____

Business Address _____

(____) (____) (____)

Home # Business # Cellular #

Name _____

Home Address _____

Business, Occupation or Profession _____ Years Known _____

Name of Business _____

Business Address _____

(____) (____) (____)

Home # Business # Cellular #

SECTION K – LOYALTY

The term “subversive organization” as defined by Florida Statutes Section 876.22 means “any organization which engages in or advocates, abets, advises, or teaches, or a purpose of which is to engage in or advocate, abet, advise, or teach activities intended to overthrow, destroy, or to assist in the overthrow or destruction of the constitutional form of the Government of the United States, the constitution or government of the state, or of any political subdivision of either of them, by revolution, force, violence, or other unlawful means.” Answer only “yes” or “no” to each question. If yes, provide details on a separate sheet.

54. Are you now or have you ever been a member of a subversive organization? _____ No _____ Yes

55. Have you ever, by word of mouth or in writing, advocated, advised or taught the doctrine that the government of the United States of America, any state, or any political subdivision thereof should be overthrown by force, violence or any unlawful means? _____ No _____ Yes

56. Have you ever paid, contributed, collected or solicited any money or dues, to, for, or on behalf of any subversive organization? _____ No _____ Yes

57. Have you ever been connected or affiliated with, in any manner, or ever attended any meeting of any subversive organization? _____ No _____ Yes

Police Applicant Only answer question # 58

58. Do you belong to a religious sect or hold any belief which would prevent you from:

Pledging allegiance to the flag of the United States of America? _____ No _____ Yes

Enforcing the Constitution of the United States of America and the State of Florida? _____ No _____ Yes

Enforcing the laws of the United States of America and the State of Florida? _____ No _____ Yes

Taking a human life while carrying out your duties when such action is lawful and necessary? ___ No ___ Yes

SECTION L – TRUTH VERIFICATION EXAMINATION

59. Are you willing to take a truth-verification examination(s) - Computerized Voice Stress Analyzer (CVSA) and/or Polygraph to verify all information supplied in this application and all other information supplied by you to this department? _____ No _____ Yes, - If No, state your reason(s) on a separate sheet of paper.

SECTION M – DRUG USE

60. Do you now, or have you ever used, purchased, possessed, supplied or sold marijuana? _____ No _____ Yes - If yes, answer a thru d – use extra pages if necessary.

- a. Circumstances? _____
- b. Number of times used, purchased, possessed, supplied and/or sold? _____
- c. First time, used, purchased, possessed, supplied and/or sold? _____
- d. Last time, used, purchased, possessed, supplied and/or sold? _____

61. Do you now, or have you ever used, purchased, possessed, supplied or sold any narcotics or controlled substances such as, but not limited to; hashish, cocaine, LSD, amphetamines, heroin, steroids or any drug of similar nature (excluding lawfully prescribed drugs)? _____ No _____ Yes - If yes, answer a thru e – use extra pages if necessary.

- a. Drug? _____
- b. Circumstances? _____
- c. Number of times used, purchased, possessed, supplied, and/or sold? _____
- d. First time, used, purchased, possessed, supplied and/or sold? _____
- e. Last time, used, purchased, possessed, supplied and/or sold? _____

SECTION N – OTHER

62. Do you have any tattoos, body art or piercings, which may be observed in whole or part, if you are dressed in a short-sleeved uniform shirt, shorts or skirt? _____ No _____ Yes
If yes, provide: 1) Location on body; 2) Detailed description.

63. List all social networking sites that you currently subscribe to and have subscribed to in the past.

SECTION O – TYPED ESSAY

Instructions – Attach a typed essay describing your autobiographical information, explain why you want to start or continue a career in law enforcement and why you would be a good fit for the Juno Beach Police Department.

SECTION P – EMPLOYMENT APPLICATIONS TO OTHER POLICE AGENCIES

64. Have you submitted any employment applications to other law enforcement agencies in the past two (2) years? _____ No _____ Yes - If yes, please provide below:

1) Date of application, 2) Name and address of agency, 3) Position applied for, 4) Disposition of application:

SECTION Q – AFFIDAVIT (MUST BE NOTARIZED)

65. I affirm that this application contains no misrepresentations or falsifications, omissions, or concealment of material fact and that information given by me is true and complete to the best of my knowledge and belief. Should any investigation disclose any misrepresentations or falsifications, omissions, or concealment of material fact, I am aware that my application may be rejected and my name removed from any eligibility list. If already appointed, I may be dismissed.

I understand that if and when my social security number is requested it will be used by the Town for the purposes of verifying payroll eligibility, processing employment benefits, conducting applicant and employee background checks, and reporting income and will be used solely for these purposes.

Signature of Applicant

Date

State of _____

County of _____

The foregoing instrument was acknowledged before me on this ____ day, of _____, 20 ____ by the above, __ who is personally known to me or __ has produced _____ (Type of ID), who __ did / __ did not take an oath, and who said that he/she executed the above instrument of his/her own free will and accord, with full knowledge of the purpose therefore.

Notary Public's Signature

SEAL

Thank you for your interest in the Juno Beach Police Department.



**Town of Juno Beach
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Juno Beach, FL 33408
561-626-2100**

www.juno-beach.fl.us