



# RIVERDALE PARK POLICE DEPARTMENT

5004 Queensbury Road

Riverdale Park, MD 20737

Phone: (301) 927-4343 FAX: (301) 927-0705

## EMPLOYMENT APPLICATION

Print in ink or use a typewriter. Improperly completed applications may be returned for corrections or rejected. Upon completion, this application should be returned to the above address.

DATE \_\_\_\_\_ POSITION \_\_\_\_\_

1. NAME \_\_\_\_\_  
(First) (Middle) (Last)

Present address (List house number and street)

\_\_\_\_\_  
(Number) (Street) (Apt. No.)  
\_\_\_\_\_  
(City) (State) (ZIP Code)

3. How long at this address?: \_\_\_\_\_ Home Phone: \_\_\_\_\_

4. List ALL addresses for the past five years:

| Address | FROM: | TO: |
|---------|-------|-----|
|         |       |     |
|         |       |     |
|         |       |     |
|         |       |     |
|         |       |     |

5. Date and Place of Birth: \_\_\_\_\_

6. Are you a United States Citizen?: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

7. If naturalized: Place naturalized: \_\_\_\_\_

Date naturalized: \_\_\_\_\_

8. Age: \_\_\_\_\_ Height : \_\_\_\_\_ Weight: \_\_\_\_\_



21. Do you have a valid driver's license? \_\_\_\_\_ State issued: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_

22. Can you operate a computer? \_\_\_\_\_ Years Experience: \_\_\_\_\_ WPM: \_\_\_\_\_  
Program experience: \_\_\_\_\_  
List any other special skills, licenses and/or technological experience:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

23. What experience have you had with firearms? (**Police officer applicants only**)  
Experience: \_\_\_\_\_

24. Give a detailed statement of your educational background, including all schools and dates

a. **Grade School:** Name/Dates: \_\_\_\_\_  
Location: \_\_\_\_\_

b. **Junior High:** Name/Dates: \_\_\_\_\_  
Location: \_\_\_\_\_

c. **High School:** Name/Dates: \_\_\_\_\_  
Location: \_\_\_\_\_

Did you graduate? **YES** **NO** Date: \_\_\_\_\_

Major Courses: \_\_\_\_\_  
(General, Academic, Commercial, Business, etc.)

d. Have you ever taken a High School Equivalency Test? \_\_\_\_\_  
Date: \_\_\_\_\_ Certificate #: \_\_\_\_\_ State: \_\_\_\_\_

e. **College:** Name / Location: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Degree: \_\_\_\_\_

f. List any other special training, apprenticeships, correspondence courses, etc., not listed:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

25. Have you ever served in the U.S. Armed Forces?                    **YES**                    **NO**

Branch: \_\_\_\_\_

Date of enlistment: \_\_\_\_\_                    Date of Discharge: \_\_\_\_\_

Rank(s) attained: \_\_\_\_\_                    Active Service: \_\_\_\_\_

Condition of Discharge: \_\_\_\_\_                    Service Number: \_\_\_\_\_

26. If currently employed, do you have any objections to us contacting your present employer for a reference? If yes, Explain: \_\_\_\_\_

27. PERSONAL REFERENCES: List names and addresses of four people (other than relatives or employers) who know you well enough to provide us with information relating to your character, etc.

| Name | Address | Occupation | Phone Number |
|------|---------|------------|--------------|
|      |         |            |              |
|      |         |            |              |
|      |         |            |              |
|      |         |            |              |

28. Have you ever applied for a position within a law enforcement agency?                    **YES**                    **NO**  
If yes, which one? \_\_\_\_\_

29. Have you ever held a position (volunteer or paid) within a law enforcement agency?                    **.....YES**                    **NO**

If yes, which one and what was your position? \_\_\_\_\_

30. Have you ever worked shift work? .....YES .....NO  
If yes, what kind of shift? \_\_\_\_\_

31. Have you ever been fired or asked to resign from a job? .....YES NO

32. List your complete work history, including volunteer positions, beginning with your present or most recent position. List any and all periods of employment. Use additional sheets if necessary:

|                     |             |                      |
|---------------------|-------------|----------------------|
| Date of Employment: | From: _____ | To: _____            |
| Business Name:      | _____       |                      |
| Business Address:   | _____       |                      |
| Title:              | _____       |                      |
| Duties:             | _____       |                      |
| Supervisor's Name:  | _____       | Telephone: _____     |
| Starting Salary:    | _____       | Ending Salary: _____ |
| Reason for Leaving: | _____       |                      |

|                     |             |                      |
|---------------------|-------------|----------------------|
| Date of Employment: | From: _____ | To: _____            |
| Business Name:      | _____       |                      |
| Business Address:   | _____       |                      |
| Title:              | _____       |                      |
| Duties:             | _____       |                      |
| Supervisor's Name:  | _____       | Telephone: _____     |
| Starting Salary:    | _____       | Ending Salary: _____ |
| Reason for Leaving: | _____       |                      |

Date of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

33. What clubs, societies, or organizations do you belong to and what offices do you or have you held with any of these groups?

| Organization, Club, etc. | Office |
|--------------------------|--------|
|                          |        |
|                          |        |

34. Do you now or have you ever belonged to a subversive organization? \_\_\_\_\_  
 If yes, please explain: \_\_\_\_\_

35. Indicate below (and on additional blank sheets, if necessary) any experience you have had or specialized ability which, in your opinion, will qualify you for the position for which this application is filed:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

36. Do you know of anything that would disqualify you for appointment to this department or prevent your full discharge of the official duties of such a position? If yes, explain:

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37. What prompts you to file application for appointment to this department?

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38. What interest do you have in this type of work?

Explain: \_\_\_\_\_

|   |            |           |
|---|------------|-----------|
| 39. If married, would you and your spouse agree to a joint interview? | <b>YES</b> | <b>NO</b> |
| separate interviews?  | <b>YES</b> | <b>NO</b> |

40. All applicants must sign the following certification:

I certify that there are no willful misrepresentations or falsifications of the above statements and answers to questions. I am aware that should an investigation disclose such misrepresentations or falsifications, my application will be rejected and I will be disqualified.

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

Date of Application: \_\_\_\_\_

**IMPORTANT NOTE:** Authorization for Release of Personal Information Form **must be NOTARIZED** and returned with the application.

Please write a paragraph (50 word minimum) explaining why you would like to be a Riverdale Park Police Officer. **(Police Officer applicants only)**

If applying for **Police Communications Dispatcher**, which shift would you prefer?:  
*Shift preference dependant on availability.*      **Daywork**                      **Nightwork**



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### AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, \_\_\_\_\_, do hereby authorize full and complete disclosure of all records concerning myself, whether public, private, or confidential, to any properly identified agent of the Riverdale Park Police Department.

I give my consent to complete disclosure of all records, including information of a confidential or privileged nature, or any data or material which has been sealed or agreed to be withheld pursuant to any prior agreement or court proceeding involving disciplinary matters. These records include but are not limited to records concerning my education, present and past employment, financial transactions which include records of deposits, withdrawals, loans, and balances from any type of financial or banking institution, credit history, medical history, (to include records or information concerning treatment for Chemical Dependency, including alcohol abuse treatment, in accordance with Federal and State Confidentiality Regulations), psychiatric treatment or consultation, real and personal property records, background investigation records, any and all internal affairs investigations, complaints or grievances filed by or against me, polygraph and psychological examinations, disciplinary records, internal records, military records, arrest records, civil criminal and traffic trials, convictions, polygraph results, and associated records. This also includes photocopies of the above materials. This consent is also to extent to any affiliation.

I understand that I will not receive and am not entitled to know the contents of confidential reports received and I further understand that these reports are privileged and privacy has been promised.

The intent of this authorization is to provide full and free access to my personal and professional background history pursuant to determining my suitability for employment with the Riverdale Park Police Department.

I further release and hold harmless the Town of Riverdale Park, its agents, and any individual or organization furnishing confidential information in conjunction with my background investigation.

**MUST BE NOTARIZED**

**PLEASE PRINT**

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

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

\_\_\_\_\_

S.S.N. \_\_\_\_\_

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

Witness: \_\_\_\_\_

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