



WATHENA POLICE DEPARTMENT

Application packet

INSTRUCTIONS TO APPLICANT

You are being considered for employment with the Wathena Police Department. As part of the process, it will be necessary for you to complete this questionnaire. The contents of this booklet are "CONFIDENTIAL." The information will not be disseminated except as necessary to process your application. It is imperative that you complete this questionnaire completely. All questions must be answered with full explanations when necessary.

It is important that you understand that intentional misrepresentation, omissions or falsification of any material fact may be just cause for dismissal from the application process. Polygraph examinations are administered to all applicants offered employment. It is in your best interest to be as truthful, thorough, and detailed in your answers as possible.

Law enforcement employees, regardless of rank, are placed in a position of trust and responsibility. Because of this trust, we must expect candor from all employees. You should also be aware that some of these same questions will be asked again if you are scheduled for a polygraph examination.

During the interview you will be asked to discuss many aspects of your background. You may be concerned that some aspects may disqualify you from the job. That is usually not the case. What will certainly disqualify you is your failure to provide truthful, accurate and complete information.

Some of the information requested may be impossible to obtain due to circumstances beyond your control. In this case please give a brief description. However, this may affect the ability to judge you suitable for hire.

When answering questions be as thorough as possible providing in depth detailed answers. Please complete the entire application and waivers legibly. This document may be completed using Adobe fill and sign and emailed back. Other documents such as the Authorization to Release Personal Information, will be provided at time of initial interview.

In regard to the Authorization (For Release of School Records), please keep this and use it to contact your educational facilities. Have your transcripts mailed directly to me, Chief Jared Ratzlaff 206 St Joseph St Wathena, KS 66090. (Make as many copies of the authorization as you need.)

Please return completed packet to: **Chief Jared Ratzlaff**
Wathena Police Department
206 St Joseph St
Wathena, KS 66090
Jmr601@rainbowtel.net

WATHENA POLICE DEPARTMENT

Required Documents

Attach copies, unless the original is requested, of the following documents to this questionnaire. Failure to submit these documents in a timely manner will delay your consideration for employment. Some of these documents may not be applicable to you. Please indicate those that are attached with a check mark in the space provided.

- _____ 1. Signed and notarized release waivers
- _____ 2. High School Diploma or GED certificate. (Original or transcripts MUST be received by us in an officially sealed envelope.
- _____ 3. Transcripts from colleges or universities. (Original or transcripts MUST be received by us in an officially sealed envelope.
- _____ 4. Military discharge papers. (Must include DD214-long form)
- _____ 5. Citizenship or naturalization papers.
- _____ 6. Certified copy of your birth certificate (No photo copies)
- _____ 7. All marriage licenses and divorce decrees.
- _____ 8. Name change documents
- _____ 9. Peace Officer Standards Training Certificate of graduation from a police academy.

Photograph

Please attach a full-face photograph of yourself. The photo should be no smaller than 2.5" x 2.5". This photo must have been taken within the last three months. This photograph is not required, but will aid the background investigator(s) to identify you to people they are conducting interviews with. The photograph will also be used to identify you during various stages of the hiring process.

_____ *Attach photo* _____

FCRA NOTICE AND ACKNOWLEDGMENT

IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT NOTICE REGARDING BACKGROUND INVESTIGATION

Wathena Police Department (“the Company”) may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include, but is not limited to: employment and education verifications; social security number verification; criminal and civil court records; personal interviews; driving records; and/or any other public records or any other information bearing on my character, general reputation, personal characteristics and trustworthiness. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report.

The report will be generated by Universal Background Screening (4000 North Central Avenue, Suite 1000, Phoenix, AZ 85012, 1-877-263-8033) or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing Employer to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION (above) and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT (separate document) and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Universal Background Screening, another outside organization acting on behalf of Employer, and/or Employer itself. I agree that a facsimile (“fax”) or photographic copy of this Authorization shall be as valid as the original.

Signature

Date

Printed Name

Social Security Number (SSN)

**CITY OF WATHENA
POLICE DEPARTMENT**

**Wathena Police Dept
206 St Joseph St
Wathena, KS 66090**

**AUTHORIZATION
(For Release of School Records)**

Date

TO WHOM IT MAY CONCERN:

I hereby authorize the Wathena Police Department to secure any information they require from my records while attending _____ for the purpose of determining my eligibility for the position of Police Officer with the Wathena Police Department.

Signature

**STUDENT INFORMATION
(PLEASE PRINT)**

FULL NAME: _____
Last First Middle

SOCIAL SECURITY NUMBER: _____

DATES OF ATTENDANCE: _____

PRESENT ADDRESS OF SCHOOL: _____

YOUR PRESENT ADDRESS: _____

**Please send a certified transcript to:
Chief Jared Ratzlaff
Wathena Police Department
206 St Joseph ST
Wathena, KS 67905**

**Wathena Police Department
Personal History Statement**

1. All questions must be answered
2. Print all answers. If additional room is needed, use the back of pages.
3. The falsification of any information on this form or during the application process will automatically disqualify you from the process.
4. All addresses must be complete, including zip codes. Incomplete information will slow your application process.

Name: _____ Date of Birth: _____

Address: _____

Phone #: _____ Social Security Number: _____

Position applying for: _____

Education:

Highest level of Educations: College Degree [] High School Degree [] GED []

Are you a certified Law Enforcement Officer? [] Yes [] No

Which State: _____ Date of Certification _____

Highest level of Educations: College Degree [] High School Degree [] GED []

High School(s) attended:

Name: _____ Name: _____

Address: _____ Address: _____

City, State, Zip: _____ City, State, Zip; _____

GPA: _____ GPA: _____

Colleges, Universities, Trade Schools (Include dates attended and degrees attained)

Name: _____ Name: _____

Address: _____ Address: _____

City, State, Zip: _____ City, State, Zip; _____

Date attended: _____ Date attended: _____

Degree/Hours _____ Degree/Hours _____

Major: _____ Major: _____

Minor: _____ Minor: _____

GPA: _____ GPA: _____

GED:

Date of obtained: _____ Location obtained: _____

Military Service

Have you ever served in the Armed Forces of the United States? Yes No

Branch of Service: _____ Rank: _____

Years of Service: _____ Date of Discharge: _____

Location of Discharge: _____

Discharge Status: _____

Duties/Specialties: _____

Disciplinary Action: _____

Offense/Charges: _____

Punishment Received: _____

Are you currently a member of the Reserve or National Guard Unit? Yes No

Unit Name and base location: _____

Unit Commander: _____ Phone #: _____

While in Military Service, were you ever investigated, detained, apprehended, or did you receive any type of discipline to include "Company Punishments." Include fines, extended duty, loss of rank, ect., or did you receive any type of discipline to include "Company Punishments." Include fines, extended duty, loss of rank, ect..

Law Enforcement Experience

Have you ever been employed by a law enforcement agency? Yes No

When: _____

Agency Name: _____

Title/Duties: _____

Specialized Training: _____

Reason for leaving: _____

When: _____

Agency Name: _____

Title/Duties: _____

Specialized Training: _____

Reason for leaving: _____

Have you applied to other Law Enforcement Agencies?

Yes No

(Including City, County, State and Federal Agencies)

Where: _____ Where: _____

When: _____ When: _____

Status: _____ Status: _____

Reason not selected: _____ Reason not selected: _____

Where: _____ Where: _____

When: _____ When: _____

Status: _____ Status: _____

Reason not selected: _____ Reason not selected: _____

1) Have you ever applied to the Wathena Police Department before? Yes No

When _____ Position applied for: _____

Records Check / Criminal History

When making application to a Law Enforcement Agency it is required to report any convictions, diversion agreements or expunged conviction by the courts. Please list all arrests, charges or citations with dispositions. Disposition includes any fines, detention, probation, expungement, diversion, no contest, guilty, not-guilty. This includes any traffic charges.

Have you ever been charged with a crime involving domestic violence or domestic battery? Yes No

Have you ever be involved in the use, transport, sale or purchase of any illegal drugs? If "yes", provided a detailed explanation on back of this page. Yes No

Charge: _____

Locations: _____

Date: _____

Disposition: _____

Charge: _____

Location: _____

Date: _____

Disposition: _____

Charge: _____

Locations: _____

Date: _____

Disposition: _____

Charge: _____

Location: _____

Date: _____

Disposition: _____

Charge: _____

Locations: _____

Date: _____

Charge: _____

Location: _____

Date: _____

Disposition: _____

Disposition: _____

[] Check if additional information is on the back

Driving History Information

Current Driver's License #: _____ Class: _____ State: _____

1) Have you ever had your license suspended or revoked? Yes No

Where: _____ Where: _____

When: _____ When: _____

Reason: _____ Reason: _____

2) Have you ever been in involved in an automobile accident? Yes No

Location: _____ Location: _____

Date: _____ Date: _____

Your fault: Yes [] No []

Injury [] Non-Injury []

Your fault: Yes [] No []

Injury [] Non-Injury []

Location: _____ Location: _____

Date: _____ Date: _____

Your fault: Yes [] No []

Injury [] Non-Injury []

Your fault: Yes [] No []

Injury [] Non-Injury []

3) Do you own any automobiles? Yes No

Make: _____ Make: _____

Model: _____ Model: _____

License State: _____ License State: _____

License #: _____ License #: _____

4) Have your vehicle tags ever been suspended? Yes No

Reasons for suspension: _____

5) Please list any other state where you have been licensed to operate a motor vehicle and the name used to obtain such license: _____

Civil

1) Have you ever been sued or brought into Civil Court for any reason? Yes No

Where: _____ Where: _____

When: _____ When: _____

Disposition: _____ Disposition: _____

2) Are you currently under any court judgment resulting from civil action or have any civil action pending?

Explain: _____

List your residences for the past **ten years**, beginning with your present residence. Be as accurate as possible.

Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Date from; _____ to _____	Date from _____ to _____
Landlord's Name: _____	Landlord's Name: _____
Landlord Phone#: _____	Landlord's Phone#: _____

Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Date from; _____ to _____	Date from _____ to _____
Landlord's Name: _____	Landlord's Name: _____
Landlord Phone#: _____	Landlord's Phone#: _____

Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Date from; _____ to _____	Date from _____ to _____
Landlord's Name: _____	Landlord's Name: _____
Landlord Phone#: _____	Landlord's Phone#: _____

References

List at least three references, DO NOT list relatives, previous employers or current Wathena Police Officers

Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
State, Zip: _____	State, Zip: _____
Phone: _____	Phone: _____
Employer: _____	Employer: _____
Phone: _____	Phone: _____

Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
State, Zip: _____	State, Zip: _____
Phone: _____	Phone: _____
Employer: _____	Employer: _____
Phone: _____	Phone: _____

List the names of all current Wathena Police Department Employees you are acquainted with:

_____	_____
_____	_____
_____	_____
_____	_____

Relatives:

Father

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Mother

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Father-in law

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Mother-in law

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Spouse

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Ex-Spouse

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Siblings

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Siblings

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Siblings

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Siblings

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Step-Father

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

Step-Mother

Name: _____
Address: _____
City: _____
State, Zip: _____
Phone: _____
Employer: _____
Phone: _____

EMPLOYMENT RECORD

Beginning with your present or last employment, list in reverse order all work you have done within the past 10 years, including any time you were in business for yourself. Give complete information.

Employer: _____
Address: _____ City: _____ State: _____ Zip: _____
Type of Business: _____ Phone: _____
Your supervisor or contact person: _____
Your position: _____
Your duties: _____
Date employed: _____ Date left: _____
Reasons for leaving: _____
Notice Given: Yes/ No If (no) please provide a brief explanation.

Employer: _____
Address: _____ City: _____ State: _____ Zip: _____
Type of Business: _____ Phone: _____
Your supervisor or contact person: _____
Your position: _____
Your duties: _____
Date employed: _____ Date left: _____
Reasons for leaving: _____
Notice Given: Yes/ No If (no) please provide a brief explanation.

Employer: _____
Address: _____ City: _____ State: _____ Zip: _____
Type of Business: _____ Phone: _____
Your supervisor or contact person: _____
Your position: _____
Your duties: _____
Date employed: _____ Date left: _____
Reasons for leaving: _____
Notice Given: Yes/ No If (no) please provide a brief explanation.

Employer: _____
Address: _____ City: _____ State: _____ Zip: _____
Type of Business: _____ Phone: _____
Your supervisor or contact person: _____
Your position: _____
Your duties: _____
Date employed: _____ Date left: _____
Reasons for leaving: _____
Notice Given: Yes/ No If (no) please provide a brief explanation.

Employer: _____
Address: _____ City: _____ State: _____ Zip: _____
Type of Business: _____ Phone: _____
Your supervisor or contact person: _____
Your position: _____
Your duties: _____
Date employed: _____ Date left: _____
Reasons for leaving: _____
Notice Given: Yes/ No If (no) please provide a brief explanation.

Employer: _____
Address: _____ City: _____ State: _____ Zip: _____
Type of Business: _____ Phone: _____
Your supervisor or contact person: _____
Your position: _____
Your duties: _____
Date employed: _____ Date left: _____
Reasons for leaving: _____ Notice
Given: Yes/ No If (no) please provide a brief explanation.

Employer: _____
Address: _____ City: _____ State: _____ Zip: _____
Type of Business: _____ Phone: _____
Your supervisor or contact person: _____
Your position: _____
Your duties: _____
Date employed: _____ Date left: _____
Reasons for leaving: _____

Financial

1) Have you ever filed for or declared bankruptcy? Yes No
If "yes" please provide details to include when, where, type of bankruptcy and reason.

2) Within the last (7) years, have any of your bills ever been turned over to a collection agency?
If "yes" please give details to include when, collection agency name, and circumstances. Yes No

3) Within the last (7) years, have you ever had purchased goods repossessed? Yes No
If "yes" please give details to include when, collection agency name, and circumstances.

4) Within the last (7) years, have your wages ever been garnished? Yes No
If "yes" please give details to include when, where, and why.

5) Have you ever been delinquent on child support, income tax, or other tax payments? Yes No
If "yes" please give details to include when, where, and why.

Additional Information:

1) Are you now, or have you ever been a member of any foreign or domestic organization, association, movement, or group of persons that is, or was, totalitarian, fascist, communist, or subversive in nature, or which has adopted or expressed a policy of advocating or approving of the commission of acts of force or violence as a means to deny other persons their rights under the Constitution of the United States by unconstitutional means? Yes No
If "yes" identify the organization and explain fully.

2) Have you ever applied for a permit to carry a concealed firearm or weapon? Yes No
a) Was the permit granted? Yes No
b) Issuing Agency:_____ Date of Issue:_____

3) Are you willing to work all hours of the day, all days of the week, holidays and overtime when assigned? Yes No

4) Do you have anything in your background that you feel may disqualify you from becoming a police officer for the Wathena Police Department? Yes No

If "yes" please explain.

5) Please list any identifying marks, scars, tattoos, burns or birthmarks:

Internet Memberships:

In the space below list any Internet Social networking sites(s) to which you are a member, such as Twitter, Facebook, ect. Indicate whether or not your profile is public or private.

Internet Site	Private	Public

CERTIFICATE OF APPLICANT: I hereby certify that there are no misrepresentations or falsifications in these statements and answers. I am aware that should an investigation disclose such, my application will be rejected and I may be disqualified from applying in the future.

Applicant Signature

Date

ILLEGAL OR CRIMINAL DRUG USE QUESTIONNAIRE

Print Name: _____

	Have you ever, in your entire life, USED, TRIED, or IN ANY WAY INGESTED into your body any of the following drugs?	Yes / No Circle One	Date First Used	Date Last Used	
1.	Marijuana	Yes / No			
2.	Hashish / Hash Oil	Yes / No			
3.	Cocaine (Crack)	Yes / No			
4.	Barbiturates / Hypnotics / Any Other Downer	Yes / No			
5.	Amphetamines (Cross tops, Whites, Bennies, and/or Uppers)	Yes / No			
6.	Methamphetamine (Speed / Crank)	Yes / No			
7.	LSD or other hallucinogen including Mushrooms	Yes / No			
8.	PCP (Angel Dust)	Yes / No			
9.	Heroin or other Opiates	Yes / No			
10.	Steroids	Yes / No			
11.	Pharmaceutical drugs NOT PRESCRIBED FOR YOU	Yes / No			
12.	Is there any other illegal drug, narcotic, or controlled substance not listed above that you have ingested?				Yes / No
13.	Have you, or anyone else, ever injected an illegal drug into your body?				Yes / No
14.	Have you ever sold any illegal drug?				Yes / No
15.	Have you ever purchased any drugs, drug paraphernalia, narcotic, or controlled substance, other than a doctor's prescription?				Yes / No
16.	Have you ever participated in the manufacture, cultivation, or production of any illegal drug, narcotic, or controlled substance?				Yes / No
17.	Have you ever acted as a courier by transporting any illegal drug, narcotic, or controlled substance?				Yes / No
18.	Are any illegal drugs presently in your home or car?				Yes / No
19.	Have your ever worked under the influence of illegal drugs?				Yes / No

I certify that the above answers are correct and that I have not deliberately falsified or omitted any information from this questionnaire.

Signed: _____ Date: _____

Kansas State Statute

74-5605

Chapter 74.--STATE BOARDS, COMMISSIONS AND AUTHORITIES

Article 56.--LAW ENFORCEMENT TRAINING CENTER; COMMISSION ON PEACE OFFICERS' STANDARDS AND TRAINING

74-5605. Qualifications of applicant for certification; requirements. (a) Every applicant for certification shall be an employee of a state, county or city law enforcement agency, a municipal university police officer, a railroad policeman appointed pursuant to K.S.A. 66-524, and amendments thereto; an employee of the tribal law enforcement agency of an Indian nation that has entered into a tribal-state gaming compact with this state; or a school security officer designated as a school law enforcement officer pursuant to K.S.A. 72-8222, and amendments thereto. Prior to admission to a course conducted at the training center or at a certified state or local law enforcement agency, the applicant shall furnish to the director of police training a statement from the applicant's appointing authority or agency head certifying the applicant's fulfillment of the following requirements. The applicant:

- (1) Is a United States citizen;
- (2) has been fingerprinted and a search of local, state and national fingerprint files has been made to determine whether the applicant has a criminal record;
- (3) has not been convicted, does not have an expunged conviction, and on and after July 1, 1995, has not been placed on diversion by any state or the federal government for a crime which is a felony or its equivalent under the uniform code of military justice;
- (4) has not been convicted, does not have an expunged conviction, has not been placed on diversion by any state or the federal government for a misdemeanor crime of domestic violence or its equivalent under the uniform code of military justice, when such misdemeanor crime of domestic violence was committed on or after the effective date of this act;
- (5) is the holder of a high-school diploma or furnishes evidence of successful completion of an examination indicating an equivalent achievement;
- (6) is of good moral character;
- (7) has completed a psychological test approved by the commission;
- (8) is free of any physical or mental condition which might adversely affect the applicant's performance of a police officer's or law enforcement officer's duties; and
- (9) is at least 21 years of age.

(b) The provisions of paragraph (1) of subsection (a) shall not apply to a citizen of the United Kingdom with prior law enforcement experience who resides in Finney county. This subsection shall expire on July 1, 2007.

History: L. 1968, ch. 81, § 5; L. 1982, ch. 322, § 6; L. 1983, ch. 256, § 4; L. 1986, ch. 301, § 1; L. 1987, ch. 277, § 4; L. 1995, ch. 180, § 4; L. 1996,
