



# LATHRUP VILLAGE POLICE DEPARTMENT

27400 Southfield Road  
Lathrup Village, MI 48076  
248.557.3600  
www.lathrupvillage.org

## APPLICATION FOR EMPLOYMENT

READ THIS FORM CAREFULLY AND FOLLOW ALL INSTRUCTIONS

Read every question carefully and ANSWER EACH QUESTION ACCURATELY. An applicant may be disqualified from further processing if he/she intentionally makes a false statement of a material fact, practices, or attempts to practice, any deception or fraud in his/her application, his/her examination, or in his/her appointment.

PERSONAL DATA				
DATE			SOC. SEC. NO.	
LAST NAME			FIRST NAME	
ADDRESS				
CITY		STATE		ZIP CODE
EMAIL				
POSITION BEING APPLIED FOR				
PHONE 1		MCOLLES #		
CITIZENSHIP				
Are you a U.S. Citizen or an alien authorized to work in the U.S.?			Yes ( )	No ( )
Are you 18 years of age or Older?			Yes ( )	No ( )
Have you been previously employed by the City of Lathrup Village?			Yes ( )	No ( ) When:
Do you have any relatives who are employees of the City of Lathrup Village?			Yes ( )	No ( )
If yes, indicate name(s) and relationship(s) to you:				
MILITARY				
Are you a veteran of the Armed Forces of the United States?			Yes ( )	No ( )
Branch of Service			Dates of Duty: TO	
Date of Discharge			Type of Discharge	
Have you ever been the subject of any judicial or non-judicial disciplinary action while in the military, National Guard or military reserves:			Yes ( )	No ( )
Have you been convicted of a misdemeanor or felony in the last 5 years? Convictions will not preclude an applicant for consideration of employment.			Yes ( )	No ( )
Date	Offense	Place	Disposition (e.g. probation, jailed, etc.)	
DRIVER'S LICENSE				
Driver's License No:				
Expiration Date:		State Issued:		
License Type:		Operator	Chauffeur	Commercial Driver's License
EDUCATION				
	NAME OF SCHOOL	CITY / STATE	DEGREE EARNED / YEAR RECEIVED	MAJOR
High School				
College (Undergraduate)				
College (Graduate)				
Other				
APPLICANT NAME				

## EMPLOYMENT HISTORY

*This section must be completed fully, even if a resume is attached. List present position and most recent place of employment first (include full-time, part-time, and volunteer work). List every promotion as a new job. Photocopy this page if additional space will be necessary or use a blank sheet.*

Company Name	Supervisor	Telephone
Address	City/State	Zip Code
Employed (List Month & Year) From: _____ To: _____ Number of Hours per Week:		
List your Job Title & Responsibilities		Starting Salary      Ending
Name you were employed under if different from name shown on City of Lathrup Village application.		Reason for Leaving

Company Name	Supervisor	Telephone
Address	City/State	Zip Code
Employed (List Month & Year) From: _____ To: _____ Number of Hours per Week:		
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# LATHRUP VILLAGE POLICE DEPARTMENT

## AUTHORITY TO RELEASE INFORMATION

### TO WHOM IT MAY CONCERN:

I hereby authorize any duly empowered representative of the Lathrup Village Police Department bearing this release, or copy thereof, within one year of its date, to obtain any information in your files or other sources pertaining to my employment, military, credit or educational records and personal background including, but not limited to, academic, achievement, attendance, driver's license records, athletic, personal history, disciplinary actions and records, medical records, and credit reports or any other records you may have regarding me.

I understand that my Rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and to disclosure of records, and I waive those Rights with the understanding that information furnished will be used by the City of Lathrup Village in conjunction with employment procedures.

I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Lathrup Village Police Department. Consent is for the Lathrup Village Police Department to furnish such information as described above, to third parties in the course of fulfilling its official responsibilities.

I hereby indemnify and hold harmless you, as the custodian of such records, and any agency, institution or establishment which you represent including its officers, employees and related personnel, or business, both collectively or individually, 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.

A photocopy or FAX copy of this release form will be valid as an original thereof, even though the said photocopy or FAX copy does not contain any original writing of my signature. This waiver is valid for a period of 180 days from the date of my signature. Should there be any question as to the validity of this release, you may contact me as indicated below on this form.

I have carefully read this authorization and consent form and affirm that I fully understand its contents. I also affirm that I voluntarily consent to any background check the Lathrup Village Police Department may wish to conduct in connection with my application for employment. I also acknowledge that I have received a copy of the Summary of Rights under the Fair Credit Reporting Act.

PRINTED NAME	
SOCIAL SECURITY NUMBER	
DRIVER'S LICENSE & EXP. DATE	
ADDRESS	
CITY, STATE ZIP	
TELEPHONE	

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

## **SUPPLEMENTAL QUESTIONS**

1. List any prior training which you have completed which would be relevant to the position which you are seeking (Firefighter 1 or II, Basic Police Academy, Medical First Responder, C.P.R., etc)  
\_\_\_\_\_  
\_\_\_\_\_
2. List all traffic citations which you were convicted of, or pled guilty to, within the last 5 years.  
\_\_\_\_\_  
\_\_\_\_\_
3. List complete information on all traffic accidents which you were involved in (whether or not you were at fault) within the last 5 years.  
\_\_\_\_\_  
\_\_\_\_\_
4. **Law Enforcement Applicants Only:** Have you ever been arrested? If so, list dates, locations, and all factors relevant to the incident (s). Include any juvenile arrests and MCMJ military arrests.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Have you ever been convicted of a crime (excluding minor traffic violations)? If so, list dates of conviction, locations of conviction, and all details of the conviction (s). Include any juvenile convictions and MCMJ military convictions.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. **Fire Department Applications Only:** Which hours of the day and days of the week are you available to work?  
\_\_\_\_\_

### **PROFESSIONAL LICENSES/CERTIFICATIONS/TRAINING:**

Type: \_\_\_\_\_ Number: \_\_\_\_\_

Type: \_\_\_\_\_ Number: \_\_\_\_\_

Type: \_\_\_\_\_ Number: \_\_\_\_\_

List professional trade, business or civic activities and offices held excluding groups that name or character of which indicate race, color, religion, sex, national origin, handicap, marital or veteran status, height, weight or age.

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