



OCOEE POLICE DEPARTMENT

APPLICATION

**CHARLES BROWN
CHIEF OF POLICE**

EQUAL OPPORTUNITY EMPLOYER

The Ocoee Police Department does not discriminate on the basis of race, religion, color, sex, age, national origin, or disability.

Name: _____	Email Address: _____		
Phone #: (____) _____	Alternate Phone #: (____) _____		
Address: _____			
Street	City	State	Zip Code
Date of Birth: _____	Sex: _____	Race: _____	(For Statistical & Criminal History Purposes Only.)
Driver's License Number: _____			
Position Sought: _____			
<i>(You must have completed a Florida Law Enforcement Academy)</i>			

INSTRUCTIONS

The purpose of this pre-screener application is to obtain truthful answers. Please complete all portions fully and accurately – incomplete forms will be returned. Only send the application if there are open Police Officer positions. DO NOT INCLUDE ANY DOCUMENTS *unless* they are meant to explain any pre-screener questions.

**Return completed application package to the City of Ocoee Human Resources Office, at
City of Ocoee Human Resources Department
150 N. Lakeshore Drive
Ocoee, FL 34761**

CRITERIA –

1. Yes No Have you ever used marijuana?
 - a. If yes, how many times? _____
 - b. If yes, when was the last time? _____

2. Yes No Have you ever used any other illegal drug (including anabolic steroids or a prescription not prescribed to you)?
 - a. If yes, how many times? _____
 - b. If yes, when was the last time? _____
 - c. If yes, what types? _____

3. Yes No Have you ever been involved in the sale of any illegal drug?

4. Yes No Have you ever used an illegal drug (no matter how many times or how long ago), while in a law enforcement or prosecutorial position, or in a position which carries with it a high level of responsibility or public trust?

5. Yes No Do you currently use tobacco products?

6. Yes No If you currently use tobacco products are you willing to discontinue use?***

***As a condition of employment under the Collective Bargaining Agreement all employees must be free of tobacco use and must remain continually free of any tobacco use as a requirement for continued employment with the City of Ocoee Police Department.

ACADEMY RECORD: *(This Section to be completed by those seeking a Certified Position of Police Officer.)*

1. Yes No Have you attended a Florida LEO academy? If Yes, provide the name of the academy and your scheduled date of graduation.
2. Yes No Is your Florida Certificate in “active” status? If not, please explain why.
3. Yes No Have you received your Florida Law Enforcement certification? If Yes, provide type of academy and your date of graduation. (For example: basic, proficiency training, crossover.)
4. Yes No Have you passed the State of Florida Examination? If Yes, provide the date.
5. Yes No Have you completed the Level 1 and 2 Screening Process with the Ocoee Police Testing Center? If Yes, when?
6. Yes No Has a background investigation been conducted on you, either currently or previously? If Yes, when? And through what Agency?

You must be able to answer “yes” to questions 7-9 in order to be considered:

7. Yes No Are you at least 19 years of age?
8. Yes No Are you a United States Citizen?
9. Yes No Do you possess a High School Diploma or GED?

You must be able to answer “no” to questions 10 - 24 in order to be considered:

10. Yes No Has your driver’s license been suspended within the past year?
11. Yes No Have you received 3 or more moving traffic violations in the past year?
12. Yes No Have you used, possessed, or cultivated any illegal controlled substance within the past 3 years?
13. Yes No Have you ever been convicted of a felony?
14. Yes No Have you ever been adjudged or found to be in contempt of court?
15. Yes No Have you ever been convicted of a misdemeanor involving moral turpitude, false statements, perjury or domestic violence?
16. Yes No If employed by a law enforcement or corrections agency, are you now under internal investigation?
17. Yes No Have you ever resigned as a law enforcement officer while being investigated criminally or administratively?
18. Yes No Have you ever resigned from any position after being informed that you were going to be disciplined or terminated?
19. Yes No Have you had more than 3 traffic tickets within the last 3 years? (Not including parking tickets.)
20. Yes No Have you had more than 10 traffic tickets in the last 10 years? (Not including parking tickets.)
21. Yes No Have you ever been charged with DUI within the last 10 years?
22. Yes No Has your driver’s license ever been suspended or revoked?
23. Yes No Have you ever been arrested, charged, or convicted of a felony or misdemeanor?
24. Yes No Have you ever been involved in the sale of any illegal drug?

EMPLOYMENT HISTORY –

If you answer “yes” to any of the following, you must attach a full explanation before your application will be considered.

- 25. Yes No Have you ever been disciplined by any current or past employer(s)? (List each discipline, employer, and dates.)
- 26. Yes No Have you ever been terminated or asked to resign from any job? (List each employer, reason and dates.)

CRIMINAL HISTORY –

If you answer “yes” to any of the following, you must attach a full explanation before your application will be considered.

- 27. Yes No Have you ever been arrested, received a notice to appear, charged, convicted, pled nolo contendere or pled guilty to any criminal violation, regardless if the record was sealed or expunged?
- 28. Yes No Have you ever taken anything from an employer without proper permission?
- 29. Yes No Have you ever been documented as being affiliated with a gang or militant group that would bring discredit to the Ocoee Police Department? If yes, please explain, and include details of how long you were involved: _____

(Individuals that have been documented as being affiliated with a gang or militant group will be considered on a case by case basis).

- 30. Yes No Do you have an account on any social networking site (i.e. Myspace, Facebook, etc.), or any website that you frequent or blog? If so, please provide the account name, screen name, and all permissions to view: _____

If you answered Yes to any question 25 – 30 inclusive, please give complete details relating to the incident(s). Failure to do so may exclude you from further consideration: _____

I CONFIRM THAT ALL THE INFORMATION ABOVE IS TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE OR DECEPTIVE INFORMATION, OR INFORMATION INTENTIONALLY OMITTED ABOUT MY SUITABILITY WILL BE CONSIDERED SUFFICIENT CAUSE FOR THE CITY OF OCOEE TO WITHDRAW MY APPLICATION FROM THE PROCESS.

Signature: _____

Date: _____

Frequently Asked Questions:

Q: How long does it take for my application to be screened?

A: Approximately 60 days.

Q: Can I call and find out the status of my application or processing?

A: No.

Q: How long does it take to complete the testing/processing?

A: The amount of time varies. For Police Officer Candidate – 60 days.

Q: Will I be notified if I am not selected for the position?

A: Yes, you will receive a letter.

Q: When can I apply again?

A: During the next hiring cycle, if you have not received a disqualification letter.

APPLICANT CONFIDENTIALITY REQUEST

ONLY INDIVIDUALS WHO HAVE PREVIOUSLY BEEN EMPLOYED IN A LAW ENFORCEMENT CAPACITY OR ARE CURRENTLY EMPLOYED AS A LAW ENFORCEMENT OFFICER ARE REQUIRED TO COMPLETE THIS FORM

Please initial the paragraph(s) that express your preference regarding the public inspection requirements of the Florida Public Records Law.

_____ Please maintain the confidentiality of my home address, any photographs attached hereto, telephone numbers, and social security number provided on this application for employment

_____ Also, if applicable, please maintain the confidentiality of my spouse and child(ren)'s home address, photographs, telephone numbers and social security numbers and place of employment; also, the names and locations of schools, and/or daycare facilities attended by my child(ren).

_____ All information contained within this application for employment, as well as any document attached hereto, including photographs, may be provided for review to any individual or agency requesting to examine the same.

Signature: _____ **Date:** _____

THIS FORM IS PROVIDED IN COMPLIANCE WITH FLORIDA PUBLIC RECORDS LAW, SECTION 119.07(3)(i), FLORIDA STATUTES (2003).

PLEASE RETURN THIS APPLICATION TO:
OCOEE HUMAN RESOURCES DEPARTMENT
150 N. Lakeshore Drive
Ocoee, FL 34761
407-905-3154



OCOEE POLICE DEPARTMENT

REQUIREMENTS:

- U. S. Citizen (born or naturalized)
- High school graduate, or equivalent
- No felony convictions
- No misdemeanor convictions or involving moral turpitude
- Pass the following –
 - Written Examination
 - Background Investigation
 - Oral Interview
 - Psychological Examination
 - Medical Examination
 - Drug Screen
 - Polygraph/Computer Voice Stress Analysis Examination
- Florida driver's license by time of employment

BENEFITS:

- Salary: Police Officer
- Starting Pay: See Ocoee Police CBA (<http://occoee.org/Departments/HR/CollectiveBargaining.htm>)
 - Education Incentive Pay:
 - Associate Degree \$30.00 per month
 - Bachelor Degree \$80.00 per month
- Excellent pension plan(3% multiplier per year)
- Overtime
- 11 paid vacation days
- Medical plan
- Uniforms and equipment are provided
- Promotional opportunities
- Opportunities for specialization:
 - Detective
 - School Resource Officer
 - Motorcycle/Traffic
 - K-9
 - Community Relations Vice/Narcotics Unit
- Tuition reimbursement program

Pick up an application at: City of Ocoee Human Resources
150 N. Lakeshore Drive
Ocoee, FL 34761

THE CITY OF OCOEE IS AN EQUAL OPPORTUNITY EMPLOYER

"The Center Of Good Living"

OCOOE POLICE DEPARTMENT APPLICATION

ALL APPLICANTS PLEASE NOTE THE FOLLOWING

1. Please make sure that **all** requested copies are made and are included with your application. Make sure that the application is filled out completely when turned into the Human Resources Office.
2. Please make sure that **all** required forms are notarized.
3. Return completed application package to the City of Ocoee Human Resources Office, at
City of Ocoee Human Resources Department
150 N. Lakeshore Drive
Ocoee, FL 34761
4. Please **do not** contact the Background Investigations Unit or the Human Resources office to obtain the status of your application or the test date and time you will be contacted if you are selected to test.

OCOEE POLICE DEPARTMENT

Comprehensive Personal History Questionnaire

Applicant's Name: _____ Date: _____

Position Sought: _____

Referred By: _____

Social Security Number: _____ DOB: _____

(Note: The Age Discrimination Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are 40 (forty) years of age or more.)

You MUST include copies of the following documents with this application in order for your application to be considered:

1. Social Security Card
2. Florida Drivers License
3. Birth Certificate
4. All DD-214 Forms
5. Any name changes (marriage, divorce, etc.)
6. High school diploma/GED
7. Any college degrees
8. Florida Certifiable: If you are currently enrolled in a Law Enforcement Academy, please state when you are scheduled to graduate. _____.

When are you scheduled to take the Florida Certification Test? _____.

If you have already taken the Florida Certification Test, list the date you took the test. _____ . If you have received your test results, please attach a copy of your results.

When completed, return to: City of Ocoee Human Resources
150 N. Lakeshore Drive
Ocoee, FL 34761

All Ocoee Police Department applicants receive a consideration for employment without regard to race, age, ancestry, color, marital status, religion, national origin, medical condition, or handicap.

**PLEASE READ THIS APPLICATION CAREFULLY
BEFORE COMPLETING THE APPLICATION**

This application must be either typed or printed in legible form. Applications that are not legible will be returned to the applicant.

You must complete and return your Personal History Questionnaire with your application. The background check includes contact with prior employers, personal references, your neighbors, criminal history, driver's license check, and verification of education, military service and nationality (if a naturalized U. S. citizen). You must include complete addresses and phone numbers for all employers for the past ten years and complete names, addresses and phone numbers for each personal reference and each neighborhood reference.

The submission of this application carries the understanding that you are authorizing the Ocoee Police Department to contact any and all available sources for the purpose of obtaining information as to your qualifications. You are hereby informed that a thorough background investigation, including information as to your character, general reputation, personal characteristics and mode of living will be part of your processing which will be used for the sole purpose of evaluating your qualifications for employment with this agency.

Pursuant to F.S. 119 and F.S. 286.001, the public records law and the Sunshine Law, all documents made or received by the Ocoee Police Department in the course of processing your application are public records and shall be at all times open for inspection by the public.

Criminal records ordered sealed under Section 943-0585, Florida Statutes, are available from the FCIC System for inspection by a criminal justice agency for the purpose of criminal justice employment. The applicant is to be advised that he/she may not lawfully deny arrest or convictions, notwithstanding adjudication being withheld or the sealing or expungement of arrest/conviction records. The applicant is also to be advised that a misdemeanor arrest or conviction may not necessarily disqualify him/her for employment.

Signatures, which are to be notarized, **MUST** be notarized prior to the submission of the completed application. If the application is not notarized, it will be returned to the applicant.

You must answer all questions truthfully. In general no individual answer will automatically disqualify you from consideration for employment with the City. Instead, the department will consider all circumstances surrounding your answers.

<p>The facts set forth in my comprehensive personal history questionnaire are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this questionnaire shall be considered sufficient cause for dismissal. Further, the City of Ocoee is hereby authorized to make any investigation deemed by them to be necessary.</p>

OCOOE POLICE DEPARTMENT

Employment Application Personal History Form

THIS FORM WILL BE USED TO CONDUCT A BACKGROUND INVESTIGATION
AS REQUIRED BY FLORIDA STATUTE 943.13

INSTRUCTIONS

Read the previous instructions carefully before filling out your Personal History Form. All requested information must be furnished. The information you give will be used to determine your qualifications for employment. It is important that you answer all the questions completely and accurately; failure to do so may delay the processing of your application and mean the loss of employment opportunities. If an item does not apply to you or if there is no information to be given, write the letters "N/A" (Not Applicable) in the appropriate space. Use abbreviations such as "NMN" ("No Middle Name") and "UNK" ("Unknown"). Whenever an address is required, you must provide a zip code. Add additional pages if necessary or use back of page.

Application Date: _____, 20____.

Name: _____ S.S. Number: _____

Date of Birth _____ Height _____ Weight _____ Eye Color _____

Hair Color _____ Scars, Marks, Tattoos (Give description and location) _____

Street Number Street Name Apt Number (If Applicable)

City State Zip

Apartment Complex Name (If Applicable): _____

Primary Phone: (____) ____ - _____ Alternate Phone: (____) ____ - _____

Present Employer: _____ May we contact ____ Yes ____ No

Business Address: _____ Phone#: (____) ____ - _____

OCOEE POLICE DEPARTMENT

Employment Application Personal History Form

GENERAL

- 1a. Are you a U.S. Citizen? YES NO
- 1b. Naturalized: YES NO
If yes, please provide the certificate number of your naturalization papers: _____
2. Do you possess a Social Security Card? YES NO
3. Do you possess a valid Florida Drivers License? YES NO
4. Do you have a copy of your Birth Certificate? YES NO
5. Do you have any name changes (marriage, divorce) YES NO
6. Do you have a High School Diploma/GED? YES NO
7. Do you have any College Degrees? YES NO
- 8a. Do you speak a language other than English? YES NO
- 8b. List additional language(s) and skill level (poor, fair, good or excellent): _____
-
9. To your knowledge, do you have any relatives working for the City of Ocoee? YES NO
If yes, list name and relationship: _____
10. List any other name you have used (to included married, maiden, nicknames, etc.)

MILITARY

1. Have you ever served in the U.S. Armed Forces? YES NO
Type of Discharge: _____ Branch: _____ Service#: _____
2. Dates of active Military Service: Entry: _____ Separation: _____
-
3. Are you presently a member of a U.S. Military Reserve or National Guard Organization:
 YES NO If yes, are you Active Inactive
Grade: _____ Service#: _____
Component: _____ Unit of Location: _____
4. Have you ever been denied or had a security clearance revoked? YES NO
If yes, explain: _____
-
5. Have you ever been court-martialed, tried on charges or were you the subject of a summary court, deck court, Captain's Mast, company punishment, or any other type of disciplinary action while a member of the armed forces?
 YES NO If yes, explain: _____
-

DRIVING RECORD

1a. List all traffic summons (“tickets”) received in the past (not parking tickets):

1b. Do you have any unpaid or unanswered traffic tickets (including parking) or summonses.

YES NO If yes, list details: _____

2. List any traffic accidents (include brief account detailing, your involvement, who was at fault, injuries, charges, and final disposition): _____

3. Has your driver’s license ever been suspended or revoked: YES NO

If yes, explain: _____

4. What states, other than Florida have you ever had a driver’s license in? (List all states and include temporary and learning permits). _____

5. Has your auto insurance ever lapsed? YES NO

If yes, explain: _____

6. How many times have you driven a vehicle while under the influence of alcohol, where if stopped, you could have been arrested? _____ When was the last time? _____

7. Have you been involved in any other acts, involving alcohol, that could be considered criminal?

YES NO If yes, explain: _____

DRUG USAGE

1. Do you drink alcoholic beverages? YES NO If yes, what kind, how much and how often? _____

2. Have you ever possessed, sold or used drugs? (This includes experimentation)
 YES NO If yes, explain: _____

3. When was the last time that you used marijuana? _____
4. If your answer to question 3 is within the last 5 years, please indicate how many times you used marijuana in the last 5 years? (Please include approximate dates and how many times weekly, monthly):

5. How many times in your life? _____
6. Have you used any of the following? (If yes, include total number of times and the date last used):

A. <input type="checkbox"/> Speed	L. <input type="checkbox"/> Steroids
B. <input type="checkbox"/> Barbiturates (downers)	M. <input type="checkbox"/> PCP (angel dust)
C. <input type="checkbox"/> Amphetamines (uppers)	N. <input type="checkbox"/> Crack
D. <input type="checkbox"/> Rush	O. <input type="checkbox"/> Cocaine
E. <input type="checkbox"/> Quaaludes	P. <input type="checkbox"/> Heroin
F. <input type="checkbox"/> LSD	Q. <input type="checkbox"/> Ecstasy/MDMA
G. <input type="checkbox"/> Hash	R. <input type="checkbox"/> Amilnitrates
H. <input type="checkbox"/> Ice or methamphetamine	S. <input type="checkbox"/> Designer drugs
I. <input type="checkbox"/> Mushrooms	T. <input type="checkbox"/> Peyote
J. <input type="checkbox"/> Another person's prescription	U. <input type="checkbox"/> ROHYPNOL/GHB
K. <input type="checkbox"/> Mescaline	
7. Any other illegal substance not listed: _____

8. Have you ever used inhalants, or any other legal substance, to get high? (Paint thinner, aerosol, glue)?
 YES NO If yes, explain details: _____

9. Have you ever been involved in the purchase of any illegal drug? (Any amount from a joint to a kilo)
____ YES ____ NO (If yes, include type of drug, the amount, the circumstances, and the last time):

10. Have you ever been involved in the sale of illegal drugs, either directly or indirectly:
____ YES ____ NO If yes, explain details: _____

11. Have you ever set up a drug deal? ____ YES ____ NO
If yes, explain details: _____
12. Have you ever been in the company of people using illegal drugs?
____ YES ____ NO If yes, explain details and the last time: _____

13. What is the total amount of money you have spent on illegal drugs in your life? _____

14. Have you ever stolen money or drugs from another drug dealer?
____ YES ____ NO If yes, explain: _____

15. Have you ever driven a motor vehicle under the influence of illegal drugs?
____ YES ____ NO If yes, explain: _____

16. Have you ever used medication from another person's prescription to get high?
____ YES ____ NO If yes, explain: _____

17. Have you ever tried to grow or cultivate any illegal drugs? (Include any amount from one seed and up)
____ YES ____ NO If yes, explain: _____

18. Explain, in detail, any other information related to illegal drug use or involvement which has not been covered, to include transportation, manufacturing, etc.: _____

ARREST RECORD

1. Have you ever been arrested, charged, or detained by a law enforcement agency? (Include any arrests in which the charges were dropped, reduced, found not guilty, or in which the records were sealed or expunged. Failure to do so could result in termination of the application process. A Notice To Appear is considered an arrest and must also be listed). YES NO If yes, list nature of incident, jurisdiction, dates, and any applicable case numbers: _____

2. Have you ever served probation, parole, community control, or community service?
 YES NO If yes, explain: _____

UNDETECTED CRIMES

1. Have you ever committed an act that you were not caught doing, but if caught, you would have been arrested, (regardless of how minor you feel the offense is or your rationale of the situation)? If yes, explain details: _____

2. Have you ever filed an insurance claim that was not accurate (overestimating losses)?
 YES NO If yes, explain details: _____

3. Has a law enforcement agency ever been called because of something that you were involved in?
 YES NO If yes, explain details: _____

4. Have you ever intentionally or unintentionally viewed and/or downloaded child pornography?
 YES NO If yes, explain details, including, but not limited to the number of times and when: _____

5a. When did you last write a check that bounced or have you ever written a check that there were no funds to cover the value of the check? _____

5b. How many in lifetime? Have you ever written a check from a closed account?
 YES NO If yes, explain: _____

6. Have you ever used a fraudulent document to obtain money?
_____ YES _____ NO If yes, explain: _____

7. Were you ever in a fight in which a weapon was used? _____ YES _____ NO
If yes, explain details: _____

8. Have you ever injured or caused the death of another person?
_____ YES _____ NO If yes, explain details: _____

9. Have you ever physically abused a spouse, girlfriend, boyfriend, or child?
_____ YES _____ NO If yes, explain details: _____

10. Have you ever intentionally damaged property belonging to another person?
_____ YES _____ NO If yes, explain details: _____

11. Have you ever filed a false police report? _____ YES _____ NO
If yes, explain details: _____

12. Have you ever participated in a riot or disturbance? _____ YES _____ NO
If yes, explain details: _____

13. Since you have been an adult (18 years old), have you ever had any sexual involvement with someone under 18 years old? _____ YES _____ NO
If yes, how old were they? _____ How old were you? _____ How long ago? _____
Explain details: _____

14. Have you ever sexually assaulted anyone? _____ YES _____ NO If yes, explain details:

15. Have you ever engaged in prostitution or used the services of a prostitute?
_____ YES _____ NO If yes, explain details: _____

16. Have you ever been questioned by a law enforcement agency as a suspect in an investigation? (Do not include situations in which you were a victim or witness to a crime.) YES NO

If yes, explain details: _____

17. Other than what has already been covered, have you been involved in anything that you could have been arrested for? YES NO

If yes, explain details: _____

18. Have you ever belonged to, or associated with anyone belonging to any organization, past or present, that would place the integrity of the Ocoee Police Department in question (e.g., KKK, Nazi organization, gang member, organized crime)? YES NO

If yes, explain details: _____

19. Do you now or have you ever had regular associations with persons whom you knew, or should have known, were under criminal investigation, or who had a reputation in the community or with law enforcement agencies for involvement in criminal behavior? YES NO

If yes, explain details: _____

20. Have you ever taken anything from an employer for personal use with or without permission?

YES NO If yes, explain details: _____

21. Have you ever been fingerprinted before for any reason? YES NO

If yes, list agencies fingerprinting, dates fingerprinted and purpose: _____

FINANCIAL HISTORY

1. Has a judgment ever been issued against you? ___ YES ___ NO
If yes, explain: _____

2. Have you ever declared Bankruptcy? ___ YES ___ NO
If yes, explain: _____

3. Have you ever been refused a surety bond, or been turned down for employment that required a surety bond? ___ YES ___ NO If yes, explain: _____

4. Have you ever had anything repossessed? ___ YES ___ NO
If yes, explain: _____

5. Have you, or your current spouse, ever been involved in any civil actions (past or present to include divorce, or child custody)? ___ YES ___ NO If yes, explain: _____

6. Are you, or your spouse, ordered to pay or paying any of the following; Child support; alimony; palimony; or any other court ordered payments or judgments? ___ YES ___ NO
If yes, explain (list nature, jurisdiction, monthly payment, total obligation, and expiration date):

7. Are your financial obligations paid up to date? ___ YES ___ NO
If not, explain: _____

8. Do you have any bad debts on you record besides Bankruptcy? ___ YES ___ NO
If yes, explain (include dates and details): _____

EDUCATION

1. Do you have a high school diploma? _____ YES _____ NO
2. An equivalent education (G.E.D.) recognized by the State of Florida? _____ YES _____ NO
3. Year graduated from high school or earned G.E.D.: _____

NOTE: Name in which diploma or certificate was issued: _____

Middle/Jr. High School:

Name of School: _____

Address: _____

Number & Street City State Zip

High School:

Name of School: _____

Address: _____

Number & Street City State Zip

G.E.D.:

Name of School: _____

Address: _____

Number & Street City State Zip

College/University:

Name of School: _____

Address: _____

Number & Street City State Zip

Degree/Credits:

4. List any additional education and training you have obtained: _____
-

5. Have you had any Law Enforcement training by any Local, State, or Federal Agency?
_____ YES _____ NO If yes, did you receive a Certificate of Training? _____ YES _____ NO

If yes, on what date? _____, in what state? _____ What type of certificate? _____

EMPLOYMENT

1. Have you ever worked for or applied for employment with the Ocoee Police Department before?
____ YES ____ NO If yes, state the year and position held: _____

2. Have you ever applied to any other Law Enforcement Agency? ____ YES ____ NO
If yes, name of agency and dates of application: _____

3. Are you currently on any eligibility list? ____ YES ____ NO
If yes, explain: _____

4. Have you ever been involuntarily terminated from employment or asked to resign from a job?
____ YES ____ NO If yes, explain: _____

5. Have you ever been disciplined by your current or previous employers? (If discipline was by a law enforcement agency, refer to law enforcement experience questions.) ____ YES ____ NO
If yes, explain: _____

6. Have you ever resigned or been given the opportunity to resign from a job in which you were under investigation for policy violation or misconduct? ____ YES ____ NO
If yes, explain: _____

7. Did you ever attend a Police Academy that you did not graduate from or receive a certificate of completion? ____ YES ____ NO If so, list names and address of academies, dates, and explain circumstances: _____

8. Have you ever falsified employment applications, work records, time sheets, any reports, tax returns, or any other official or government report or records? ____ YES ____ NO
If so, give dates and nature of incidents: _____

9. Have you ever had any professional or required certification or license suspended, revoked, decertified, or been reviewed for any of the above actions for any reason? If so, list type of certification, dates, and circumstances: _____

NOTE: If while participating in the Ocoee Police Department's selection process you become involved with a law enforcement or security agency for any reason, you are required to immediately notify the department of this involvement at the beginning of the next working day.

QUESTIONS FOR CURRENT OR FORMER LAW ENFORCEMENT OFFICERS

If you answer “Yes” to any of the following questions, please explain and provide details to include where you were employed at the time and the date of occurrence. Use additional paper or the back of this questionnaire if necessary.

1. Have you ever accepted a bribe? _____

2. Have you ever been accused of using excessive force? _____

3. Have you ever witnessed an excessive force situation? _____

4. Have you ever been the subject of an Internal Investigation? If yes, list in chronological order, short synopsis and outcome to include discipline received: _____

5. Do you have any active or pending Internal Investigations or discipline? _____

6. Have you ever been disciplined as a Law Enforcement Officer? Please include oral & written reprimands, suspensions, and anything that was purged from your file? _____

7. Have you ever lied under oath? _____

8. As a Law Enforcement Officer, have you ever engaged in any sexual act while on duty? If so, explain?

9. Have you ever been involved in any shooting incident? _____

10. Have you ever been the subject of a Grand Jury Investigation? _____

11. Have you ever been involved in any on-duty motor vehicle accident? Please list each one and who was at fault: _____

12. Have you ever removed, destroyed, or altered police records or files? _____

13. Have you ever had any sexual involvement with a juvenile? _____

14. Since becoming a Law Enforcement Officer, have you used any illegal drugs? _____

15. Have you ever falsified any type of official report? _____

16. Have you ever taken anything from a place that had already been burglarized? Please give dollar amount and list items: _____

17. Have you ever taken any item from an investigative scene? _____

18. Has your police certification ever been suspended, revoked, decertified, or been reviewed for any of the above actions, for any reason? (This means any police certification you have ever held, in any state.) If so, list dates, jurisdiction occurred, type of action, and disposition: _____

19. Have you ever had any other professional or required certification or license suspended, revoked, decertified, or been reviewed for any of the above actions for any reason? If so, list type of certification, dates, and circumstances. _____

Employment Application Personal History Form

RESIDENCES

List the name and age of any adults currently residing with you. (Include spouse, relatives, anyone over 18 years of age) _____

List chronologically your residences since you were 18 years old, beginning with your current address. Should you need further space, use the back of the page.

PRESENT ADDRESS: _____

Street City State Zip
RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO
FROM: _____ TO: **Present**

FORMER ADDRESS: _____

Street City State Zip
RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO
FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip
RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO
FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip
RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO
FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip
RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO
FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip
RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO
FROM: _____ TO: _____

Employment Application Personal History Form

FORMER ADDRESS: _____

Street City State Zip

RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO

FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip

RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO

FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip

RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO

FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip

RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO

FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip

RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO

FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip

RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO

FROM: _____ TO: _____

FORMER ADDRESS: _____

Street City State Zip

RENT: _____ OWN: _____ PARENTS RESIDENCE _____ YES _____ NO

FROM: _____ TO: _____

Employment Application Personal History Form

EMPLOYMENT

(For Past 18 Years)

(Include Military Service, Part-Time Work, Self Employment, and periods of Unemployment. **Account for all time.**)

PRESENT EMPLOYER

Name of Company: _____ Phone#: (_____) _____ - _____

Address: _____
Street Number City State Zip

Beginning Employment Date: _____ Ending Employment Date: _____

Supervisor: _____

Description of Duties, Responsibilities, and Accomplishments: _____

Disciplinary Action(s) Received: _____

PREVIOUS EMPLOYER

Name of Company: _____ Phone#: (_____) _____ - _____

Address: _____
Street Number City State Zip

Beginning Employment Date: _____ Ending Employment Date: _____

Supervisor: _____

Description of Duties, Responsibilities, and Accomplishments: _____

Disciplinary Action(s) Received: _____

Employment Application Personal History Form

PREVIOUS EMPLOYER

Name of Company: _____ Phone#: (_____) _____ - _____

Address: _____

Street Number

City

State

Zip

Beginning Employment Date: _____

Ending Employment Date: _____

Supervisor: _____

Description of Duties, Responsibilities, and Accomplishments: _____

Disciplinary Action(s) Received: _____

PREVIOUS EMPLOYER

Name of Company: _____ Phone#: (_____) _____ - _____

Address: _____

Street Number

City

State

Zip

Beginning Employment Date: _____

Ending Employment Date: _____

Supervisor: _____

Description of Duties, Responsibilities, and Accomplishments: _____

Disciplinary Action(s) Received: _____

Employment Application Personal History Form

EMPLOYMENT

Note: If additional pages are needed beyond what is provided, please photocopy and complete.

PREVIOUS EMPLOYER

Name of Company: _____ Phone#: (_____) _____ - _____

Address: _____

Street Number

City

State

Zip

Beginning Employment Date: _____ Ending Employment Date: _____

Supervisor: _____

Description of Duties, Responsibilities, and Accomplishments: _____

Disciplinary Action(s) Received: _____

PREVIOUS EMPLOYER

Name of Company: _____ Phone#: (_____) _____ - _____

Address: _____

Street Number

City

State

Zip

Beginning Employment Date: _____ Ending Employment Date: _____

Supervisor: _____

Description of Duties, Responsibilities, and Accomplishments: _____

Disciplinary Action(s) Received: _____

Employment Application Personal History Form

PERSONAL REFERENCE

Name: _____ Occupation: _____

Home Address: _____
Street Address City State Zip

Business Address: _____
Street Address City State Zip

Home Phone: (____) ____ - _____ Business Phone: (____) ____ - _____

How long have you known this person: ____ Former co-worker or boss? _____

PERSONAL REFERENCE

Name: _____ Occupation: _____

Home Address: _____
Street Address City State Zip

Business Address: _____
Street Address City State Zip

Home Phone: (____) ____ - _____ Business Phone: (____) ____ - _____

How long have you known this person: ____ Former co-worker or boss? _____

PERSONAL REFERENCE

Name: _____ Occupation: _____

Home Address: _____
Street Address City State Zip

Business Address: _____
Street Address City State Zip

Home Phone: (____) ____ - _____ Business Phone: (____) ____ - _____

How long have you known this person: ____ Former co-worker or boss? _____

Employment Application Personal History Form

Note: If additional pages are needed beyond what is provided, please photocopy and complete.

PERSONAL REFERENCE

Name: _____ Occupation: _____

Home Address: _____
Street Address City State Zip

Business Address: _____
Street Address City State Zip

Home Phone: (____) ____ - _____ Business Phone: (____) ____ - _____

How long have you known this person: _____ Former co-worker or boss? _____

PERSONAL REFERENCE

Name: _____ Occupation: _____

Home Address: _____
Street Address City State Zip

Business Address: _____
Street Address City State Zip

Home Phone: (____) ____ - _____ Business Phone: (____) ____ - _____

How long have you known this person: _____ Former co-worker or boss? _____

PERSONAL REFERENCE

Name: _____ Occupation: _____

Home Address: _____
Street Address City State Zip

Business Address: _____
Street Address City State Zip

Home Phone: (____) ____ - _____ Business Phone: (____) ____ - _____

How long have you known this person: _____ Former co-worker or boss? _____

OCOEE POLICE DEPARTMENT
Employment Application Personal History Form

Applicant Affidavit Personal Employment

I, _____, do swear or affirm that I am a citizen of the United States, by birth or naturalization, that I have never been convicted of a felony or a misdemeanor involving moral turpitude, that I have a valid high school diploma or it's equivalent, that my discharge (if any) from the Armed Forces was under honorable conditions, that I am of good moral character, that I have read all the information contained in this affidavit and my application for employment and that it is correct, and that all other information I furnished in conjunction with my application is true and correct.

Signature of Applicant: _____

Date of Signature: _____

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me, this _____, 20____,
by _____, who is personally known to me or who has produced (Type
of ID) _____ as identification.

Signature of Person Taking Acknowledge

Name of Acknowledger (typed, printed or stamped)

Title/Rank

I.D. Number

CVSA EXAMINATION

Are you willing to take a Computer Voice Stress Analysis Examination to verify all information supplied by you to this agency? Yes _____ No _____

If not, state your reason(s): _____
