

LEADVILLE POLICE DEPARTMENT



Please fill out this application using black ink. Do not type this application, as typed applications will not be reviewed. Pay attention to detail and do not leave any area of this application blank. Fill out **ALL** information correctly, as disparaging information does not mean you will be automatically dismissed from the hiring process. In most cases, candidates that report their information accurately have a better chance of being successful in the hiring process.

APPLICANT INFORMATION									
Last Name			First			M.I.		Date	
Street Address						Apartment/Unit #			
City				State		ZIP			
Phone			E-mail Address						
Date Available		Social Security No.			Desired Salary				
Position Applied for									
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you POST Certified?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when and where?					
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain					
EDUCATION / TRAINING									
High School			Address						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Diploma				
College			Address						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
LEA			Address						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Provide Certificate				
Other									
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
Please provide educational diplomas, degrees, and training certification that relate to law enforcement. Include Law Enforcement Academy and POST Certification.									

RETURN ALL PAGES TO:

**Leadville Police Department
 800 Harrison Avenue
 Leadville, Colorado 80461
 Fax: (719) 486-1040
 lpdadmin@leadville-co.gov**

REFERENCES – LIST 5 PROFESSIONAL REFERENCES

Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			

REFERENCES - LIST 5 PERSONAL REFERENCES

Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			
Full Name		Relationship	
Years Known		Phone	
Address			

PREVIOUS EMPLOYMENT – LAST 10 YEARS

USE A SEPARATE SHEET IF NEEDED.

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain:		
PROVIDE A COPY OF YOUR MILITARY DISCHARGE PAPERS.		

DRIVING HISTORY:

List any and all driving infractions to include DUI, DWUI, and traffic summons. Do not include parking tickets.

CURRENT AND PRIOR RESIDENCE:

List all residences in the last 10-years. Include dates, addresses, and contact information for landlords and/or property management companies:

ABOUT YOU:

Have you used cocaine, heroin, LSD, mushrooms, crack cocaine, methamphetamine, or any other illegal narcotic? Yes No
If yes, provide dates and details.

Have you used marijuana in the last 10-years? Yes No
If yes, provide dates and details.

Have you ever taken a prescription narcotic that was not prescribed to you by a doctor?

Yes No If yes, provide dates and details.

Have you ever stolen from an employer, or, another agency? Yes No

If yes, provide dates and details.

Have you ever committed an undetected crime? Yes No

If yes, provide dates and details.

Have you ever been charged with domestic violence? Yes No

If yes, provide dates and details.

Please disclose any family members or friends employed by the City of Leadville.

Please list your hobbies and interests.

What is your favorite thing to do?

What is your least favorite thing to do?

Why do you want to work for the Leadville Police Department?

Why do you want a career in law enforcement?

Please describe your view on using deadly force?

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date



RELEASE AUTHORIZATION

APPLICANT COMPLETE THE FOLLOWING

I. In connection with my employment, I understand that a criminal and civil background check, a credit report and/or an investigative consumer report may be requested that may include information from court records and references. I acknowledge that I have been provided with, have read and understand the Policy and Disclosures Regarding Authorization to Release Information appearing on pages 2-5 of this document.

II. I, acknowledge that a telephonic facsimile (FAX) or photographic copy of this Release Authorization shall be as valid as the original.

III. I, hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, consumer reporting agency or reference contacted by the City of Leadville, or its agent, to furnish the information described in Section I.

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release the employer and agents and all persons, agencies, and entities providing information or reports about me from any and all liability arising out of the requests for or release of any of the above-mentioned information or reports.

Please print your full name: _____
Last Middle First

Please print ALL other names you have used: _____

Physical Address: _____
Street Address City State Zip Code

SSN: _____ Driver's License Number: _____ State Issued: _____

Name as it appears on license: _____

* Date of Birth: _____

* Sex : Male Female

*NOTE: This information is voluntary, but it is needed for identification purposes for criminal record searches.

Signature: _____

Date: _____

Subscribed and affirmed before me in the County of _____, State of Colorado.
this _____ day of _____, 20____.

(Notary's official signature)

(Commission Expiration)

**POLICY AND DISCLOSURES REGARDING AUTHORIZATION
TO RELEASE INFORMATION**

As part of the employment process, the City of Leadville may obtain a credit report, consumer report and/or an investigative consumer report and may conduct a civil and criminal background check. The Fair Credit Reporting Act as amended by the Consumer Reporting Reform Act of 1996 requires that we advise you that for purposes of employment only, a consumer credit report may be made that may include information about your credit standing, credit capacity, character, general reputation, personal characteristics and mode of living.

During the application process and at any time during any subsequent employment, the City of Leadville may procure and is authorized to procure a consumer credit report or other types of investigative reports, which I understand may include information regarding my credit worthiness, standing and capacity, character, general reputation, personal characteristics and mode of living. This report may be compiled with information from credit bureaus, county record repositories, departments of motor vehicles, past or present employers to include personnel files, educational institutions, governmental occupational licensing or registration entities, business or personal references. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification to the extent that such investigation includes information bearing on my character, general reputation, personal characteristics or mode of living. I also authorize the City of Leadville to conduct a criminal background check and/or a civil background investigation that is not necessarily in the form of a credit report or investigative consumer report.

By my signature below, I acknowledge that I have read and understand the Release contained on page 1, as well as the FCRA Disclosures and Summary of Rights set forth below.

Please print your full name: _____
Last Middle First

Signature Date

PLEASE READ DISCLOSURE ON FOLLOWING PAGES

FAIR CREDIT REPORTING ACT (FCRA) DISCLOSURE

Be advised that certain positions with the City of Leadville require a credit history check as part of the employment background process. These checks will be performed in accordance with the Fair Credit Reporting Act (the "FCRA"). In accordance with the Act, be advised of the following:

A person who is conditionally offered employment must give voluntary written authorization in order for the credit history report to be generated.

If a decision is made to not employ because of the report, the following must occur:

The person must be provided an "Adverse Action Notice", which includes:

- A. Name, address, and phone number of the Consumer Reporting Agency (CRA) supplying the report.
- B. The following statement: "The CRA supplying the report did not make the adverse action decision, and subsequently cannot provide specific reasons for the decision."
- C. Notice that the person may dispute the accuracy or completeness of the information, and a right to an additional free credit report within sixty (60) days.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The FCRA is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA).

Most CRAs are credit bureaus that gather and sell information about you to creditors, employers, landlords, and other businesses. The information provided may include information such as if you pay your bills on time or have filed bankruptcy.

You can find the complete text of the FCRA, 15U.S.C. 1681-1681u, at the Federal Trade Commission's web site (<http://www.ftc.gov>).

The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action.

- You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs -- to which it has provided the data -- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- You can dispute inaccurate items with the source of the information. If you tell anyone --such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.