



CARLISLE POLICE DEPARTMENT

Employment Interest Form

Instructions: Please PRINT neatly or type

- The Employment Interest Form will be used until necessary to submit a full application. The police department does not use the standard city employment application.
- Provide all information requested. An incomplete form will be rejected.
- Be honest and truthful in responding to all items and questions.
- This form may be mailed or submitted in person. **Do not** fax it.

FULL NAME (FIRST, MIDDLE, LAST, SUFFIX)		MAIDEN NAME/OTHER NAME(S) USED	
CURRENT STREET ADDRESS (NUMBER, STREET, CITY, STATE, ZIP)			
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)			
HOME PHONE ()	WORK PHONE ()	CELL PHONE ()	E-MAIL ADDRESS
DATE OF BIRTH	DRIVER'S LICENSE NUMBER & STATE	U.S. CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO	
HIGH SCHOOL <input type="checkbox"/> DIPLOMA <input type="checkbox"/> GED	COLLEGE <input type="checkbox"/> SOME COLLEGE <input type="checkbox"/> ASSOCIATE'S <input type="checkbox"/> BACHELOR'S <input type="checkbox"/> MASTER'S <input type="checkbox"/> DOCTORATE		
MILITARY EXPERIENCE (YEARS/MONTHS)	BRANCH		
PLACE OF EMPLOYMENT			
EMPLOYMENT ADDRESS (NUMBER, STREET, CITY, STATE, ZIP)			
HAVE YOU EVER BEEN ARRESTED FOR ANYTHING OTHER THAN A TRAFFIC TICKET? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU EVER PREVIOUSLY APPLIED FOR A POSITION WITH THIS DEPARTMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
POLICE OFFICER APPLICANTS ONLY			
DO YOU HAVE POLICE EXPERIENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHAT AGENCY/AGENCIES?		
BASIC TRAINING COMPLETED AT:		WHEN (MONTH/YEAR)	
CERTIFICATION <input type="checkbox"/> BASIC <input type="checkbox"/> GENERAL <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED <input type="checkbox"/> SENIOR			TOTAL YEARS EXPERIENCE

It is the policy of the City of Carlisle to provide employment, compensation, promotion and other conditions of employment without regard to race, color, religion, sex, marital status, ancestry, national origin, disability, sexual orientation, or matriculation, in accordance with the law.

Conditions of Consideration for Employment

I understand that the Employment Interest Form is not intended to create any contractual or other legal rights. If I am hired, it will not alter my status as an at-will employee, nor will it create an employment contract for any specific period of time.

All information contained on this and any subsequent application forms is subject to verification. The City of Carlisle will conduct background checks including, but not limited to, work references, driving records, criminal background records and educational attainment.

I understand an employment offer is contingent upon successful completion of a pre-employment alcohol/drug test, review of work references, and the results of background check.

I understand that specific positions at the City of Carlisle may require me to provide evidence of an acceptable driving record.

If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States.

If employed, I agree to abide by all policies, regulations and guidelines established by the City of Carlisle.

When advised, reasonable accommodations will be made in order for an "otherwise qualified applicant" with a disability to participate in any phase of the recruitment process. (Americans with Disabilities Act of 1991)

I certify that all the information provided herein is true and complete to the best of my knowledge. I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with the City of Carlisle and may be cause for rejection of this and any subsequent application forms, removal of my name from eligibility lists, or discharge from City service.

In addition, I give the City of Carlisle the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency or individual assisting the City of Carlisle in providing relevant, job related information that will assist in this process. A photocopy of this authorization shall be as valid as the original.

I understand that this appointment will be at the discretion of the department head concerned, subject to the approval of the chief administrative officer, and that this and all other forms generated as part of the application process are the property of the City of Carlisle and will become part of my personnel file if I am accepted for employment.

I have read and understand the "Conditions of Consideration for Employment".

Yes No

Signature

Date

EQUAL OPPORTUNITY EMPLOYMENT INFORMATION

The City of Carlisle is an Equal Opportunity Employer. We request that you voluntarily provide the following information, which will be used to study recruitment and employment patterns, and to provide statistical data to certain federal compliance agencies. This information WILL NOT be used in the employment process; and failure to provide information WILL NOT jeopardize your opportunity for employment with the City of Carlisle.

Name	Position for which you have applied
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A. Ethnic Origin <i>For the purpose of Equal Opportunity Employment, race/ethnic categories are identified as follows. Please check <u>one</u> category which identifies your race/ethnic background.</i>	
<input type="checkbox"/> White Includes persons having origins in any of the original peoples of Europe, North Africa, the Middle East, or the East Indian Subcontinents.	<input type="checkbox"/> Asian or Pacific Islander Includes persons having origins in any of the original peoples of the Far East, Southeast Asia or the Pacific Islands (China, Japan, Korea, Samoa, etc.).
<input type="checkbox"/> Black Includes persons having origins in any of the Black racial groups.	<input type="checkbox"/> American Indian or Alaskan Native Includes persons having origins in any of the original peoples of North America.
<input type="checkbox"/> Hispanic Includes persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.	
B. Sex	
<input type="checkbox"/> Male	<input type="checkbox"/> Female
C. Age Group	
<input type="checkbox"/> Under 18	<input type="checkbox"/> 40 and over

How did you learn of this position?	
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Job Bulletin
<input type="checkbox"/> Job Fair	<input type="checkbox"/> Referral Agency
<input type="checkbox"/> City of Carlisle Web Site	<input type="checkbox"/> City of Carlisle Employee
<input type="checkbox"/> Other	

I understand that I am protected by various laws prohibiting discrimination on the basis of race, color, national origin, religion, age (if over the age of 40) and, in some circumstances, disability or veteran status. I further understand that the information contained in this form is used solely in equal employment record-keeping, reporting and other legal requirements. I also understand that this information will be kept in the strictest of confidence and will not be disclosed to others except for the above-stated purposes and then only if necessary.

Signature	Date
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