

Memphis Police Department



Revised August 2008 am/5575

Police Officer and Police Service Technician Application Packet

Willie W. Herenton
Mayor of Memphis

Larry A. Godwin
Director of Police



**Memphis Police Department
Police Officer and Police Service Technician
Application Packet**



This packet contains the following information

**High School transcript request form
College transcript request form
Personal History Statement
Application for Employment Form**

Read all information carefully and fill out all forms completely.

CONSEQUENCES OF FALSIFICATION

ANY willful misrepresentation or falsification given on ANY FORM herein is just cause for rejecting your application. It will also disqualify you from making application in the future for positions with the City of Memphis, or cause any future employment with the City to be terminated.

For information contact a member of the Memphis Police Department Employment Team.

**Memphis Police Department
Employment Team
4371 O. K. Robertson Road
Memphis, TN 38127
(901) 357-1700
Recruiting: 1-800-318-4164 Background Investigations: 1-877-242-4325
FAX: 354-1772 or 354-1773**

HIGH SCHOOL TRANSCRIPT FORM

INSTRUCTIONS TO APPLICANT:

1. Please read carefully and completely. Fill out the following requested information.

2. Take or mail this form to the High School from which you graduated. If you received a G.E.D., you may want to call first to see where your G.E.D. records are located. If the High School/Board of Education charges a fee for mailing your transcript to us, **YOU ARE RESPONSIBLE FOR PAYING THE FEE.**

3. Please have the High School/Board of Education mail your transcript or G.E.D. scores directly to the Memphis Police Department at the address listed below.

4. When the Memphis Police Department receives your transcript, it becomes the property of the City of Memphis and cannot be released to any other person or agency. It is your responsibility to contact the Employment Team to make sure it has received your transcript(s) by the stated deadline.

NOTE: ALL TRANSCRIPTS/G.E.D. SCORES MUST BE RECEIVED AT THE MEMPHIS POLICE EMPLOYMENT TEAM OFFICE BY MAIL FROM YOUR HIGH SCHOOL/BOARD OF EDUCATION. TRANSCRIPTS DELIVERED IN PERSON OR MAILED BY YOU WILL NOT BE ACCEPTED.

Detach the form provided below and mail to the High School that maintains your permanent transcript.

NAME OF HIGH SCHOOL:

TO WHOM IT MAY CONCERN: I have applied for a position with the Memphis Police Department. I am requesting that you mail, along with this form, a copy of my official high school transcript (showing my graduation date) or my G.E.D. scores to the Memphis Police Department at the following address:

**Memphis Police Department
Employment Team
4371 O.K. Robertson Road
Memphis, TN 38127**

My name is (Last, First, Middle):

My name at the time I attended your school was (Last, First, Middle):

My complete mailing address is (include city, state and zip code):

My home phone number: _____ My work phone# _____ My

date of birth: _____ My Social Security #

I graduated on: _____ Class of _____ I received my G.E.D. on

I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR ANY FEE INCURRED AS PART OF THIS REQUEST. Signature: _____ Date: _____

*****PLEASE RETURN THIS FORM WITH TRANSCRIPT*****

COLLEGE TRANSCRIPT REQUEST FORM

INSTRUCTIONS TO APPLICANT:

1. Please read carefully and completely fill out the following requested information.
2. Take or mail this form to ALL Colleges/Universities you have attended. A transcript must be received from each college attended. If the College/University charges a fee for mailing your transcript to us, YOU ARE RESPONSIBLE FOR PAYING THE FEE.
3. Have each College/University mail your transcript directly to the Memphis Police Department at the address listed below. It is your responsibility to contact the Employment Team to make sure it has received your transcript(s) by the stated deadline.
4. When the Memphis Police Department receives your transcript, it becomes the property of the City of Memphis and cannot be released to any other person or agency.

NOTE: ALL TRANSCRIPTS MUST BE RECEIVED AT THE MEMPHIS POLICE EMPLOYMENT TEAM OFFICE BY MAIL FROM THE COLLEGE/UNIVERSITY. TRANSCRIPTS DELIVERED IN PERSON OR MAILED BY YOU WILL NOT BE ACCEPTED.

Detach the form provided below and mail to the College or University that maintains your permanent transcript.

NAME OF COLLEGE OR UNIVERSITY:

TO WHOM IT MAY CONCERN: I have applied for a position with the Memphis Police Department. I am requesting that you mail a copy of my official school transcript to the Memphis Police Department at the following address:

**Memphis Police Department
Employment Team
4371 O.K. Robertson Road
Memphis, TN 38127**

My name is: (Last, First, Middle):

My name at the time I attended your school was (Last, First, Middle):

My complete mailing address is (include city, state, and zip code):

My home phone # _____ My work phone # _____

My date of birth: _____ My Social Security # _____

I attended from: _____ To: _____

Degree obtained: _____ Date: _____

I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR ANY FEE INCURRED AS PART OF MAKING THIS REQUEST. Signature: _____ Date: _____

*****PLEASE RETURN THIS FORM WITH TRANSCRIPT*****

**MEMPHIS POLICE DEPARTMENT
PERSONAL HISTORY STATEMENT**

PLEASE READ: Answer each question on this form. Information must be HANDWRITTEN AND PRINTED IN BLACK INK (DO NOT TYPE). If additional information must be submitted in response to a specific question, please submit this information on additional sheets of 8 1/2" x 11" paper (NO SCRAP SHEETS) and attach them to this form. Precede each answer with the number and letter of the referenced section. DO NOT MISSTATE OR OMIT ANY FACTS, as all information is verified. ACCURACY IS ESSENTIAL. ANY FALSE STATEMENTS OR INFORMATION KNOWINGLY OMITTED IN THIS QUESTIONNAIRE IS JUST CAUSE FOR DENYING OR TERMINATING YOUR APPLICATION. There are to be no UNKNOWN or UNANSWERED questions when this form is completed and turned in. If a question or the information requested does not apply, indicate this by using the symbol N/A (not applicable). Should this questionnaire be UNSATISFACTORILY FILLED OUT, you will be rejected from further consideration.

When the Personal History Statement is turned in, the following support documents MUST ALSO BE TURNED IN:

- 1. A certified copy of your Birth Certificate for us to witness, and photo copy for us to retain**
- 2. Your original Driver's License for us to witness and photo copy for us to retain**
- 3. Your original Military DD214 Member 2 (including character of discharge section), and any other discharge document(s), if applicable, for us to witness and a copy for us to retain.**
- 4. Active Reserves who currently attend Military Drills must submit a Military Letter of Good Standing. This letter can be obtained from a staff member upon receipt of your Application Packet. The applicant must also submit all original DD214 discharge documents as soon as they become available to the applicant.**
- 5. Applicants who have previously served in the Active Reserves MUST submit copy of their discharge papers, showing character of discharge from the Reserve Unit.**
- 6. All PST applicants must submit transcripts from ALL colleges attended.**

FAILURE TO TURN IN THESE DOCUMENTS WILL RESULT IN YOUR APPLICATION BEING REJECTED BY THE MEMPHIS POLICE DEPARTMENT.

I hereby certify that I have read and understand all of the above stated information.
Signature _____ Date _____

This packet must be HANDWRITTEN IN BLACK INK (DO NOT TYPE).

****Please Print** If this application packet is NOT LEGIBLE, it WILL NOT be accepted.**

1. PERSONAL HISTORY

Date: _____ Position Applied For: _____

A. Full Name (Last) (First) (Middle) Sex/Race Date of Birth

B. Current Street Address Apt# City State Zip Code

C. _____
Home Phone Work Phone Cell Phone Pager Number Work Hours Days Off

D. Name and phone number of a neighbor or relative with whom you are in regular contact, where a message can be left for you.

E. Are you a United States Citizen? ___ Yes ___ No

Social Security Number Birthplace City State Country

F. List any maiden name or any other names that you have ever used, including all married names or nicknames, etc.

Have you ever had your name changed? _____ Yes _____ No If yes, provide court documentation. Please provide copies of marriage licenses and/or divorce decrees.

G. Marital Status ___ Single ___ Married ___ Divorced ___ Separated ___ Widowed

H. Driver's License _____
State Number Type or Classification

Expiration Date Conditions (Corrective Lens, etc.)

2. FAMILY HISTORY

A. Full Name of Present Spouse Maiden Name Age Date of Birth

B. Present Employment of Spouse Address (City/State) Phone No.

C.

Full Name of former Spouse(s)	Maiden Name	Age	Date of Birth
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Address(City/State) of **former** Spouse(s)

D. List **ALL** Children and Step-Children:

	Full Name	Address	Phone Number	Age	Date of Birth
1.					
2.					
3.					
4.					
5.					

E. List separately, Mother, Father, Step-Mother, and Step-Father:

1.	Full Name of Father		Age	Date of Birth
	Home Address (City/State/Zip)		Phone Number	
2.	Full Name of Mother		Age	Date of Birth
	Home Address (City/State/Zip)		Phone Number	
3.	Full Name of Step-Mother		Age	Date of Birth
	Home Address (City/State/Zip)		Phone Number	
4.	Full Name of Step-Father		Age	Date of Birth
	Home Address (City/State/Zip)		Phone Number	

4. EDUCATION

SCHOOL NAME	LOCATION (City/State)	Attended: FROM – TO	Year of Graduation	CREDIT Hrs. or Degree
HIGH SCHOOL				
G.E.D.				
COLLEGE/ UNIV.				
GRADUATE SCHOOL				
TRADE/ BUSINESS/ OTHER SCHOOLS				

5. EMPLOYMENT

On the following pages you will find employment reference sheets. It is very important that employment information be accurate.

- Please list your **ENTIRE** employment history.
- Include **ALL PART-TIME, TEMPORARY, and SEASONAL EMPLOYMENT**, regardless of time employed.
- **IF UNEMPLOYED FOR ANY LENGTH OF TIME, LIST DATES OF UNEMPLOYMENT.**
- **BEGIN WITH YOUR CURRENT EMPLOYMENT, OR MOST RECENT JOB, AND WORK BACKWARDS.**
- Employment history must cover from **HIGH SCHOOL GRADUATION TO PRESENT.**
- **LIST ALL AREA CODES AND ZIP CODES.**
- **MAKE SURE THAT ALL ADDRESSES AND PHONE NUMBERS ARE COMPLETE AND ACCURATE.**

If additional employment reference sheets are needed, please make photocopies prior to filling out any forms. If additional copies are needed contact:

**MEMPHIS POLICE TRAINING ACADEMY
BACKGROUND INVESTIGATION UNIT
4371 O.K. ROBERTSON ROAD, MEMPHIS, TN 38127
(901)-357-1700 OR 1-877-242-4325
FAX (901) 354-1772 OR FAX (901) 354-1773**

6. EMPLOYMENT TERMINATION

A. Have you ever been dismissed, fired, or asked to resign from any employment or position you have held, knowing that you would be fired if you did not resign?

_____ YES _____ NO **If yes, explain below:**

TERMINATIONS:

1. COMPANY NAME

STREET ADDRESS

DATES OF EMPLOYMENT: FROM _____ TO

POSITION _____ SUPERVISOR

PHONE NUMBER ()

Termination # 1

EXPLAIN IN DETAIL CIRCUMSTANCES OF TERMINATION

TERMINATIONS:

2. COMPANY NAME

STREET ADDRESS

DATES OF EMPLOYMENT: FROM _____ TO

POSITION _____ SUPERVISOR

PHONE NUMBER ()

Termination # 2

EXPLAIN IN DETAIL CIRCUMSTANCES OF TERMINATION

***ANY ADDITIONAL TERMINATIONS PLEASE USE A SEPARATE SHEET AND ATTACH.**

Employment Reference Sheet

MAY WE CONTACT YOUR CURRENT EMPLOYER?

_____ YES _____ NO

- If the response is “NO” you will be required to provide proof of employment and dates of employment.
- You may also be required to provide proof and dates of any previous employment, including any periods of self-employment and unemployment

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip:

Date of Employment: From: _____ to

Phone Number: (____) _____ Supervisor:

Position: _____ Work Duties:

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE _____ NEGATIVE _____ VERIFIED ONLY _____ NOT VERIFIED _____

PERSON INTERVIEWED: _____ TITLE _____

EXACT DATES OF EMPLOYMENT: FROM: ____/____/____ TO: ____/____/____

POSITION HELD: _____ ELIGIBLE FOR REHIRE: YES ___ NO _____

ADDITIONAL COMMENTS: _____

INVESTIGATOR: _____ DATE: _____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip:

Date of Employment: From: _____ to

Phone Number: (____) _____ Supervisor:

Position: _____ Work Duties:

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE _____ NEGATIVE _____ VERIFIED ONLY _____ NOT VERIFIED _____

PERSON INTERVIEWED: _____ TITLE _____

EXACT DATES OF EMPLOYMENT: FROM: ____/____/____ TO: ____/____/____

POSITION HELD: _____ ELIGIBLE FOR REHIRE: YES _____ NO _____

ADDITIONAL COMMENTS: _____

INVESTIGATOR: _____ DATE: _____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip: _____

Date of Employment: From: _____ to _____

Phone Number: (____) _____ Supervisor: _____

Position: _____ Work Duties: _____

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE _____ NEGATIVE _____ VERIFIED ONLY _____ NOT VERIFIED _____

PERSON INTERVIEWED: _____ TITLE _____

EXACT DATES OF EMPLOYMENT: FROM: ____/____/____ TO: ____/____/____

POSITION HELD: _____ ELIGIBLE FOR REHIRE: YES ___ NO ___

ADDITIONAL COMMENTS: _____

INVESTIGATOR: _____ DATE: _____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip: _____

Date of Employment: From: _____ to _____

Phone Number: (____) _____ Supervisor:

Position: _____ Work Duties:

Reason for Leaving (explain in detail) :

-

FOR INVESTIGATIVE USE ONLY

POSTIVE _____ NEGATIVE _____ VERIFIED ONLY _____ NOT VERIFIED _____

PERSON INTERVIEWED: _____ TITLE _____

EXACT DATES OF EMPLOYMENT: FROM: ____/____/____ TO: ____/____/____

POSITION HELD: _____ ELIGIBLE FOR REHIRE: YES ___ NO ___

ADDITIONAL COMMENTS: _____

INVESTIGATOR: _____ DATE: _____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip: _____

Date of Employment: From: _____ to _____

Phone Number: (____) _____ Supervisor:

Position: _____ Work Duties:

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE _____ NEGATIVE _____ VERIFIED ONLY _____ NOT VERIFIED _____

PERSON INTERVIEWED: _____ TITLE _____

EXACT DATES OF EMPLOYMENT: FROM: ____/____/____ TO: ____/____/____

POSITION HELD: _____ ELIGIBLE FOR REHIRE: YES _____ NO _____

ADDITIONAL COMMENTS: _____

INVESTIGATOR: _____ DATE: _____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip: _____

Date of Employment: From: _____ to _____

Phone Number: (____) _____ Supervisor: _____

Position: _____ Work Duties: _____

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE____NEGATIVE____VERIFIED ONLY____NOT VERIFIED____

PERSON INTERVIEWED:_____TITLE_____

EXACT DATES OF EMPLOYMENT: FROM:____/____/____TO:____/____/____

POSITION HELD:_____ ELIGIBLE FOR REHIRE: YES__NO__

ADDITIONAL COMMENTS:_____

INVESTIGATOR:_____ DATE:_____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip:

Date of Employment: From: _____ to

Phone Number: (____) _____ Supervisor:

Position: _____ Work Duties:

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE____NEGATIVE____VERIFIED ONLY____NOT VERIFIED____

PERSON INTERVIEWED:_____TITLE_____

EXACT DATES OF EMPLOYMENT: FROM:____/____/____TO:____/____/____

POSITION HELD:_____ ELIGIBLE FOR REHIRE: YES____NO____

ADDITIONAL COMMENTS:_____

INVESTIGATOR:_____ DATE:_____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip: _____

Date of Employment: From: _____ to _____

Phone Number: (____) _____ Supervisor:

Position: _____ Work Duties:

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE____NEGATIVE____VERIFIED ONLY____NOT VERIFIED____

PERSON INTERVIEWED:_____TITLE_____

EXACT DATES OF EMPLOYMENT: FROM:____/____/____TO:____/____/____

POSITION HELD:_____ ELIGIBLE FOR REHIRE: YES____NO____

ADDITIONAL COMMENTS:_____

INVESTIGATOR:_____ DATE:_____

Employment Reference Sheet

Name of Employer or Business:

Street Address:

City: _____ State: _____ Zip:

Date of Employment: From: _____ to

Phone Number: (____) _____ Supervisor:

Position: _____ Work Duties:

Reason for Leaving (explain in detail) :

FOR INVESTIGATIVE USE ONLY

POSTIVE _____ NEGATIVE _____ VERIFIED ONLY _____ NOT VERIFIED _____

PERSON INTERVIEWED: _____ TITLE _____

EXACT DATES OF EMPLOYMENT: FROM: ____/____/____ TO: ____/____/____

POSITION HELD: _____ ELIGIBLE FOR REHIRE: YES _____ NO _____

ADDITIONAL COMMENTS: _____

INVESTIGATOR: _____ DATE: _____

7. VEHICLE INFORMATION

A. List all vehicles that you own and/or drive for personal use. (Include vehicle belonging to parents or others with whom you reside).

YEAR	MAKE	MODEL	COLOR	AUTO TAG #	STATE	OWN/ BUYING

8. DRUG HISTORY

A. Are you currently using any kinds of drugs or controlled substances not prescribed by a physician?
 _____ YES _____ NO **If yes, explain:**

B. Drug/Narcotic Information (Explain any “YES” answer in “Comments” section)

- | | | |
|-------|-------|---|
| Yes | NO | |
| _____ | _____ | 1. Have you ever tried, used, puffed, experimented, taken orally or injected any drug or narcotic ? |
| _____ | _____ | 2. Have you ever tried or used marijuana? _____ If yes, how many times have you tried _____ ,puffed _____ ,or used marijuana _____? |
| _____ | _____ | 3. Have you ever tried or used hashish? |
| _____ | _____ | 4. Have you ever tried or used heroin? |
| _____ | _____ | 5. Have you ever tried or used cocaine? |
| _____ | _____ | 6. Have you ever tried or used LSD or any other hallucinogen? |
| _____ | _____ | 7. Have you ever tried or used speed, amphetamine, ecstasy, or methphetamines? |
| _____ | _____ | 8. Have you ever tried or used downers, barbiturates or mandrax? |
| _____ | _____ | 9. Have you ever used any prescription drugs not intended for you? |
| _____ | _____ | 10. Have you ever used anabolic steroids? |
| _____ | _____ | 11. Have you ever tried or used any other illegal drug or narcotic? |
| _____ | _____ | 12. Have you ever sold marijuana? |
| _____ | _____ | 13. Have you ever sold any illegal drugs or narcotics? |

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14. Have you ever been present when others were using marijuana?
 15. Have you ever been present when others were using illegal drugs or narcotics ?
 16. Have you ever altered a prescription given to you by a doctor?
 17. Have you ever taken a substance not knowing what it was?
 18. Have you ever inhaled paint, gases, glues, or other abusable chemicals?
 19. Have you ever obtained a drug from an altered prescription?

Comments _____

9. MILITARY RECORD

- A. Have you ever been on active duty in the Armed Forces of the United States?
 YES NO **If yes:**
- B. Branch of Military Service
- C. Type of Discharge _____ **If other than Honorable, explain:**
- D. Dates of Active Duty (Month, Day, and Year) FROM _____ TO
- E. Have you ever been, or are you currently, a member of a **Reserve Unit** YES NO
 or **National Guard Unit?** YES NO
 If yes, Branch _____ Ready _____ Standby/RR
 Date of Discharge: _____ Type of Discharge: _____
- F. Are you currently active in the military? YES NO
 If yes, what is your anticipated release date
- G. If you were in the military, were you ever court-martialed?
 YES NO

If yes, explain:

Did you ever have **ANY** type of disciplinary action taken against you while in the military (this includes Article 15, Captain's Mast, etc)? _____ YES _____ NO

If yes, explain:

10. COURT RECORD

A. Have you ever been **arrested** as an adult or a juvenile (arrest is defined as being taken into custody and transported to a jail/detention facility) or **charged** with a crime as an **adult or a juvenile** (charged with a crime means issued a misdemeanor citation, a juvenile summons, an adult summons, arrested on a warrant, or indicted by a grand jury)?

_____ YES _____ NO

B. List **ALL** times you have been arrested or had criminal charges placed against you, including a detailed explanation of the circumstances (use attached sheets). You must list **ALL** arrests or charges even if they were dropped or did not result in a conviction and even if the public records of the arrest or charges were expunged and erased and even if you have been told that you do not have to admit to arrests or charges which have been expunged or erased. An independent investigation of your criminal history will be conducted and, **if arrests or charges are found which you did not report, your application will be rejected due to untruthfulness.**

DATE	CITY/STATE	CHARGES	CIRCUMSTANCES	DISPOSITION OF CASE

C. Has your Driver's License ever been suspended, cancelled, or revoked?

_____ YES _____ NO If yes, please explain:

Have you ever had a Driver's License in any other state?

_____ YES _____ NO IF yes, which state(s), list license number if known:

TRAFFIC TICKETS:

DATE	CITY/STATE	CHARGES	DISPOSITION OF CASE

11. MISCELLANEOUS

- A. Based on your religion, are there any special considerations you might request as to the handling of a firearm or days off? _____ YES _____ NO

If yes, explain:

- B. List all relatives employed by the City of Memphis Government, including the Memphis Police Department.

FULL NAME

RELATIONSHIP

WHERE ASSIGNED

- C. Are you currently, or have you ever been, an employee of the City of Memphis or Shelby County Government? _____ YES _____ NO. If yes, list what agency, dates of employment , position, and designate whether or not you were a permanent employee, temporary employee, reserve, or volunteer.

- D. Have you previously submitted an application for employment or tested for the **Memphis Police Department or any other law enforcement agency**? _____ YES _____ NO. If yes, list what agency, dates of employment, position held, and designate whether or not you were a permanent employee, temporary employee, reserve, or volunteer.

AGENCY	DATE	POSITION	RESULT

E. Do you currently possess a Special Officer's (Security Guard) Commission?
 _____ YES _____ NO. If yes, list agency issuing commission:

Company Name	Address	Phone	Date of Commission
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F. Do you currently possess a valid gun permit? YES _____ NO _____

G. Have you ever submitted to a polygraph test? _____ YES _____ NO If yes, explain:

H. Are you presently involved or have knowledge that you might become involved in any criminal or civil lawsuits? _____ YES _____ NO. If yes, explain:

12. REFERENCES

A. **List three (3) references who are responsible adults of reputable standing in their community, who you HAVE KNOWN WELL FOR AT LEAST THREE YEARS, AND WHO KNOW YOU.**

References CANNOT be relatives, former employers, or present employers. You MUST include their full names, COMPLETE home address and business address (include city, state, zip code), and correct home or business telephone numbers (including area code) where **they may be contacted Monday through Friday during normal business hours:**

1. _____ / _____ Full N

____ Current Street Address Apt# City State Zip Code

____ Employment Address City State Zip Code

____ / _____ / _____ / _____
Home Phone Work Phone Cell Phone Pager Number

2. _____ / _____ Full N

____ Current Street Address Apt# City State Zip Code

____ Employment Address City State Zip Code

____ / _____ / _____ / _____
Home Phone Work Phone Cell Phone Pager Number

3. _____ / _____ Full N

____ Current Street Address Apt# City State Zip Code

____ Employment Address City State Zip Code

Home Phone

Work Phone

Cell Phone

Pager Number

13. APPLICATION PROCESS

- A. If you are applying for the position of Police Officer, and fail to meet the minimum requirements, of age and/or college/experience, do you want to be considered for the position of Police Service Technician (PST)? _____YES
_____NO
- B. If you are applying for the position of Police Service Technician (PST) and we discover that you currently qualify for the position of Police Officer, do you want to be considered for the position of Police Officer?
_____YES _____NO

I hereby certify that ALL statements made by me on this application are TRUE and COMPLETE to the best of my knowledge. I further certify that this application contains no willful misrepresentations or falsifications. I am aware that should any investigation at any time reveal or disclose any such misrepresentations or falsifications, my application will be rejected and my name will be removed from the employment process and I will be disqualified from applying in the future for positions with the City of Memphis, or my employment with the City of Memphis will be terminated. If any information changes on your application after submission, you MUST keep this office updated. This includes jobs, addresses, arrests, phone numbers, any contact with law enforcement officers and any other important information.

DO NOT WRITE BELOW THIS DOUBLE LINE

Signature: _____ Date: _____

Received By: _____ Date: _____

**FOR EMPLOYMENT TEAM USE ONLY
RIGHT THUMB**

Sworn to and Subscribed before me this _____ day of _____, 20____.

State of _____ County of

NOTARY

My Commission Expires: