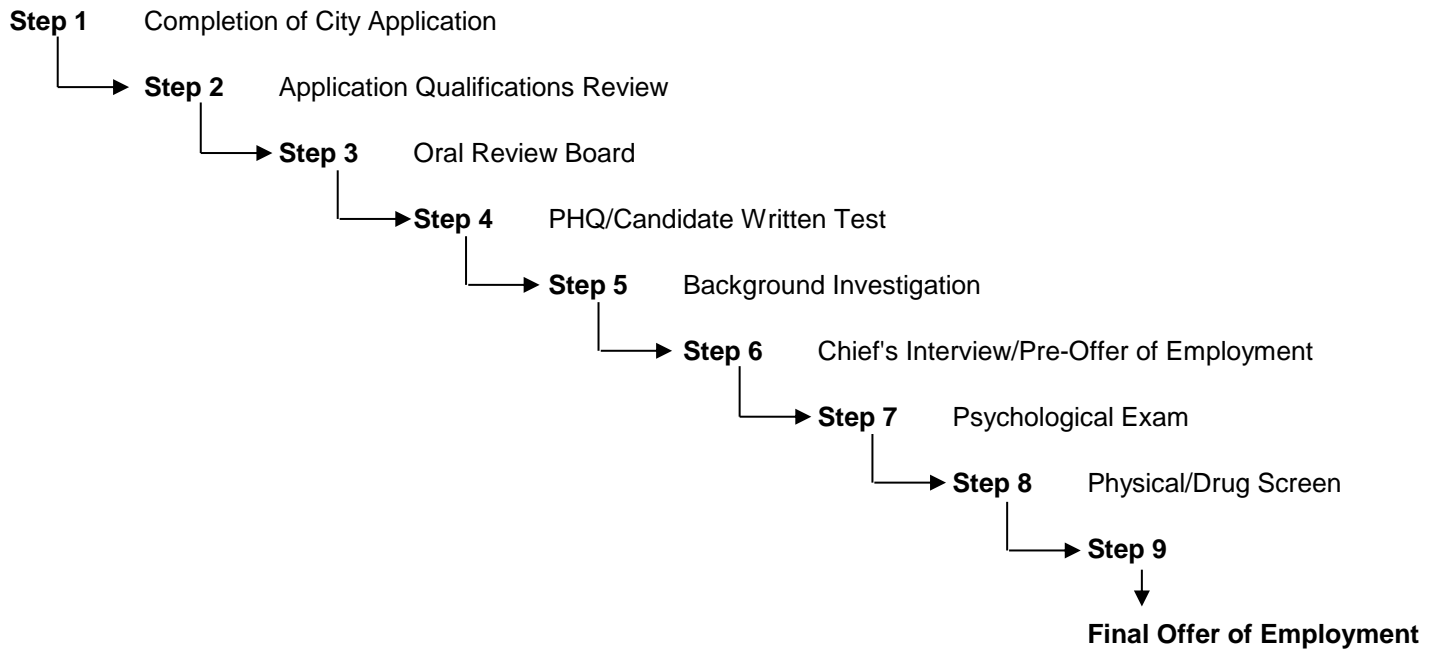




# Shelby Police Department Application Process--Communications



## FAQ's

### ***How long does a typical process take?***

A typical hiring process takes 60-90 days to complete.

### ***What is your policy on re-applying?***

If you were not selected for a position you applied for with our agency, you can re-apply at any time.

### ***Who can I contact if I have additional questions?***

If you have additional questions about our hiring process, you contact a representative of our Human Resources Department at (704) 484-6807.

You can also visit us online at [www.cityofshelby.com](http://www.cityofshelby.com)

The City of Shelby is an Equal Opportunity Employer.

The Shelby Police Department is an Internationally Accredited Law Enforcement Agency (CALEA)



# CITY OF SHELBY



## APPLICATION FOR EMPLOYMENT

### Current Information

Position applied for				Date
When will you be available for employment?				
Are you seeking:	Full-time	Part-time	Summer Work	
NAME	Last	First	Middle	
ADDRESS	Street & No. or P.O. Box	City	State	Zip
PHONE	Home	Secondary Phone	E-mail Address	

### General Information

- |  |     |    |
|--|-----|----|
| a. Have you ever been employed with the City of Shelby?<br>If yes, what department and when                      | Yes | No |
| b. Are you related by blood or marriage to any City employee?<br>If yes, give name, relationship, and department | Yes | No |
| c. Were/Are you a member of the U. S. Armed Forces?<br>If yes, give the branch and dates of service              | Yes | No |
| d. Have you ever been convicted of or plead guilty to a crime?   | Yes | No |

If yes, please explain each conviction, nature of offense, date(s) of conviction, sentence, and type(s) of rehabilitation, if any. Please include any major traffic violations.

NOTE: A conviction will not automatically bar you from employment.

**Education**

(GIVE COMPLETE EDUCATIONAL HISTORY BELOW)

High School: Name \_\_\_\_\_ Location \_\_\_\_\_

Select highest school year completed:     1    2    3    4    5    6    7    8    9    10   11   12

If you did not graduate, do you have a High School Equivalency (GED)?     Yes                      No

Education beyond High school	Name and Location	Select No. Years Completed	Degree Certificate	Major Subject
College or University		1   2   3   4		
Graduate or Professional		1   2   3   4		
Other Education		1   2   3   4		

**Skills and Certifications**

Professional License and/or <u>Certifications Special Training</u>	Equipment <u>Skills</u>	Computer or <u>Other Skills</u>

## Employment

Record your complete work history in the spaces below. Begin with your current or most recent employer first. Attach as many sheets as is necessary to account for your full record. Be sure to account for gaps in your employment history. Please complete the employment history information even if a resume is attached. Related volunteer experience should also be listed.

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### A. CURRENT OR MOST RECENT EMPLOYMENT

Job title Starting Salary Last Salary  
Name and title of supervisor No. of employees you supervise  
Employer or company  
Address  
Date Employed Date Separated Telephone  
Main Duties  
  
Full-time Years Months Part-time Years Months  
Reason for leaving  
If part-time, number of hours worked per week  
If currently employed, may we inquire of this employer about your qualifications and character? Yes No

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### B. NEXT MOST RECENT EMPLOYMENT

Job title Starting Salary Last Salary  
Name and title of supervisor No. of employees you supervise  
Employer or company  
Address  
Date Employed Date Separated Telephone  
Main Duties  
  
Full-time Years Months Part-time Years Months  
Reason for leaving  
If part-time, number of hours worked per week

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### C. NEXT RECENT EMPLOYMENT

Job title Starting Salary Last Salary  
Name and title of supervisor No. of employees you supervise  
Employer or company  
Address  
Date Employed Date Separated Telephone  
Main Duties  
  
Full-time Years Months Part-time Years Months  
Reason for leaving  
If part-time, number of hours worked per week

## References

List three (3) persons who are **not related to you and who have a definite knowledge** of your ability to perform the job for which you are applying. **DO NOT REPEAT NAMES OF SUPERVISORS.**

(1) Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_

(2) Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_

(3) Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_

## Read Carefully before submitting

I certify that all answers and statements on this application are true and complete. I understand that any falsification, omission, or misrepresentation of facts in this application, in connection with my pre-employment physical examination or in connection with any aspect of the hiring process, will be cause for either the rejection of this application or for my discharge if I have been hired.

I understand that my employment will be contingent upon my passing a physical examination. I also understand that future examinations may be required by the City of Shelby. I am aware that the City of Shelby requires screening for drugs and alcohol as part of its pre-employment testing and that I may be required to take future examinations.

I authorize the City of Shelby to make any inquiry or investigation deemed necessary to consider my employment application. This may include contacting former employers and criminal records check. I understand that conviction of a crime will not automatically bar my employment. I may still be eligible for employment if the City of Shelby determines my conviction could have no bearing to the job for which I am applying.

I authorize former employers and schools to release all information the City of Shelby requests from them concerning my academic records, job performance, attendance, personal evaluation, or other related information. I release from liability and /or damages all parties which may give information regarding my application.

If my employment with the City of Shelby terminates for any reason, I authorize the City of Shelby to release all information and to answer any inquiries regarding my employment, performance, and the reasons for my termination.

I understand that if I am employed my employment will be on a trial basis for 6 months. Before and after the probationary period my employment is "at will;" It can be terminated at anytime by me or the City of Shelby. I also understand that the terms, policies, procedures, and rules of employment are not guaranteed. They are subject to change at any time by the City of Shelby.

Although I may be employed for a specific work schedule, I understand the City of Shelby does not guarantee my work schedule and may alter it as necessary.

I understand this application is current for only the specified job I am applying for. I will complete a new application should I not be hired for the applied for position if future job opportunities become available that I may be interested in.

Signature \_\_\_\_\_ Date \_\_\_\_\_