

City of Bath
Police Department
250 Water Street
Bath, Maine 04530



Michael W. Field, Chief of Police

Application for Employment
(An Equal Opportunity Employer)

Have you ever been employed by the City of Bath? Yes ____ No ____

If yes, give the department and dates: _____ From: _____ To: _____

Are you prevented from lawfully becoming employed in this country because of VISA or Immigration status? Yes ____ No ____

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: Full Time: ____ Part Time: ____ Shift work: ____ Temporary: ____

Can you travel if a job requires it? Yes ____ No ____

Have you been convicted of a felony within the last 7 years? Yes ____ No ____

Conviction will not necessarily disqualify an applicant from employment.

If yes, explain: _____

Do you know of any reason that might disqualify you for appointment to the Police Department or prevent your full discharge of the duties of a position within this department.

Yes ____ No ____

If yes, explain: _____

Education

	<u>Name and Address</u>	Course of Study	Years Completed	Diploma/Degree
High School:	_____	_____	_____	_____

Undergraduate College:	_____	_____	_____	_____

Graduate School:	_____	_____	_____	_____

Other (Specify)	_____	_____	_____	_____

Indicate any foreign language you can speak, read and or write. *Check appropriate line.*

Language: _____	Speak:	Fluent ___	Good ___	Fair ___	Poor ___
	Read:	Fluent ___	Good ___	Fair ___	Poor ___
	Write:	Fluent ___	Good ___	Fair ___	Poor ___
Language: _____	Speak:	Fluent ___	Good ___	Fair ___	Poor ___
	Read:	Fluent ___	Good ___	Fair ___	Poor ___
	Write:	Fluent ___	Good ___	Fair ___	Poor ___

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Military Service Record

Were you in the Armed Forces? Yes ____ No ____

If yes, what branch? _____

Dates of Enlistments: _____ to _____

Describe any job related training received in the United States Military.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, age, disabilities or other protected status.

1. Employer: _____ Address: _____

City: _____ State: _____ Telephone#: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: From: _____ To: _____

Hourly Rate: Starting: _____ Final: _____

Work Performed: _____

2. Employer: _____ Address: _____

City: _____ State: _____ Telephone#: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: From: _____ To: _____

Hourly Rate: Starting: _____ Final: _____

Work Performed: _____

3. Employer: _____ Address: _____

City: _____ State: _____ Telephone#: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: From: _____ To: _____

Hourly Rate: Starting: _____ Final: _____

Work Performed: _____

4. Employer: _____ Address: _____

City: _____ State: _____ Telephone#: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: From: _____ To: _____

Hourly Rate/ Salary: Starting: _____ Final: _____

Work Performed: _____

List professional, trade, business, or civic activities and offices held. _____

Additional Information

Please list any specialized equipment you have been trained on.

1. _____
2. _____
3. _____
4. _____

State any additional information you feel may be helpful to us in considering you application.

Note to applicants:

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

Yes _____ No _____

References

1. Name: _____

Address: _____

City: _____ State: _____

Telephone#: _____

2. Name: _____

Address: _____

City: _____ State: _____

Telephone#: _____

3. Name: _____

Address: _____

City: _____ State: _____

Telephone#: _____

**BATH POLICE DEPARTMENT
BACKGROUND CHECK AUTHORIZATION**

I do understand that before concluding the assessment of my qualifications for the position of Traffic Safety Officer with the Bath Police Department a background investigation will become necessary. I therefore authorize the City of Bath or it's agents to conduct such an investigation for this use involving such things but not limited to, driving history checks, criminal record checks, contacting agencies where I have been employed pertaining to performance, contacting personal references, and verifying educational attainment.

I hereby authorize all my present and previous employers or their successors and/or references to release and furnish information concerning my personal character, habits, or employment performances. I also authorize schools that I have attended to release and provide such records and information as may pertain to my attendance and performance.

Applicants Signature – Date