

CITY OF BERLIN POLICE DEPARTMENT
135 Green St., Berlin, NH 03570 (603) 752-3131

APPLICATION FOR EMPLOYMENT

In compliance with Federal and State Equal Opportunity Laws, all qualified candidates will be considered for employment without regard to their race, creed, national origin, ancestry, sex, age, marital status, veteran status, or the presence of non-job-related medical conditions or handicaps.

Position Desired:

Available to Work: ☐ Full Time ☐ Part Time

On what date would you be available for work? _____

PERSONAL DATA

Social Security #: _____ Primary Phone # _____

Primary E-Mail: _____

Name: _____

Last

First

Middle

Current

Address: _____
Number Street City State Zip How Long at this Address?

Previous Addresses (prior 5 years, chronological):

Address: _____
Number Street City State Zip How Long at this Address?

Address: _____
Number Street City State Zip How Long at this Address?

Address: _____
Number Street City State Zip How Long at this Address?

Have you or one of your immediate family members ever been employed by the City of Berlin, NH?

☐ YES ☐ NO If yes, who, when, and in what capacity: _____

Have you been convicted of a crime in the past ten years? ☐ YES ☐ NO If yes, provide dates, type of offense, and result of charges: _____

EDUCATIONAL BACKGROUND (List name of school and diploma, degree, or credits earned)

Post Graduate: _____

College: _____

High School: _____

Trade School: _____

Other: _____

EMPLOYMENT (Include your current and previous ten years of employment. Use extra paper, if necessary. If you have never been employed, write-in the names of non-relatives who may be contacted as references.)

1. Employer & Address: _____

Position & Duties: _____

Employed from (dates): _____

Supervisor's Name & Title: _____

Reason for Leaving: _____

2. Employer & Address: _____

Position & Duties: _____

Employed from (dates): _____

Supervisor's Name & Title: _____

Reason for Leaving: _____

3. Employer & Address: _____

Position & Duties: _____

Employed from (dates): _____

Supervisor's Name & Title: _____

Reason for Leaving: _____

Are you involved in any clubs, professional organizations, community or school activities which you consider relevant to or which may restrict your ability to perform the job for which you have applied? (Do not list organizations which reveal your race, sex, age, religion, or national origin.):

For Probationary Police Officer Applicants Only:

The following questions pertain to potential disqualifiers with New Hampshire Police Standards Regulations.

Are you a U.S. Citizen: ☐ Yes ☐ No

Any marijuana usage within 12 months : ☐ Yes ☐ No

Any other unprescribed controlled drug usage within 36 months ☐ Yes ☐ No

Ever sold controlled drugs for profit: ☐ Yes ☐ No

APPLICANT'S CERTIFICATIONS AND AGREEMENTS

The distribution or receiving of this application by the City of Berlin Police Department does not imply or intend to imply an agreement or contract to employ the applicant. The purpose of this application is solely to allow persons a standardized form on which to submit their qualifications.

I hereby certify that the facts set forth in this employment application are true and complete to the best of my knowledge. I understand that, if employed, falsified statements or material omissions on this application shall be considered sufficient cause for dismissal. I hereby authorize you to make any investigation of my personal history record, including the use of investigative agencies or bureaus of your choice. In accordance with the requirements of the Fair Credit Recording Act, Title 15, U.S.C. S1618 et Seq., this is to disclose to you that we may request that an investigative consumer or credit report be prepared by a consumer or credit reporting agency as part of your application for employment with the City of Berlin Police Department. This report may include information as to your character, general reputation, financial condition, personal characteristics, and mode of living.

Signature of Applicant:_____

Date: _____

I further hereby certify that I am legally eligible to work in the United States of America and understand that the law (Immigration Reform and Control Act of 1986) requires that I prove my identify and produce proof of work eligibility to the City of Berlin Police Department in order to be considered for employment.

Signature of Applicant:_____

Date: _____

This application will be kept on file for one year. You must submit a new application after one year from the date of submission to maintain an active application with this Department.

For Berlin Police Department to Complete: Date Application Received:_____