



NASHVILLE POLICE DEPARTMENT

**1406 Saddle Club Lane
Nashville, Georgia 31639
Telephone (229) 686-6558
Fax (229) 686-2089**

Dear Applicant,

We are pleased that you have decided to apply for employment with Nashville Police Department. We provide an entire range of public safety services to Nashville community, and should you be selected to join our team, you will find that the employees of the agency are professional and competent men and women. We have established very high ethical standards for our employees. It is the policy of this agency to hire only the best qualified individuals for full and part-time positions. Our selection process affords equal opportunity to everyone regardless of race, creed, color, gender, national origin, age or disability. Should you be disabled you may request any reasonable accommodations in order to participate in the application process. Please contact my staff for assistance.

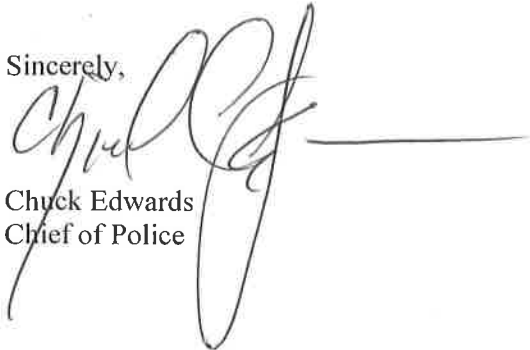
To be considered for employment, applicants must be 21 years of age for sworn positions, and 18 years of age for civilian positions. All documents specified on the instruction sheet (page 2 of this application packet) must be submitted with the application.

For certified peace officers the hiring process will include, but is not limited to, one or more oral interviews and a thorough background investigation which may be subject to verification by polygraph examination. If a conditional job offer is made, we may require a physical examination, physiological evaluation, and a drug screen. This process may take up 60 days from the date of application.

Police academy applicants will complete two or more oral interviews and a thorough background investigation which may be subject to verification by polygraph examination. Completion of an extensive Georgia Peace Officer Standards & Training Council (P.O.S.T.) application is also required. This will include a mandatory physical examination/physiological evaluation and drug screen. Applicants must also complete and pass a written Police Academy Entrance Examination. The P.O.S.T. application must then be submitted to the Council not later than 15 days prior to the Academy start date for issuance of a Police Academy Acceptance form, which must be received from P.O.S.T. by the first day of the Academy session. This entire process may take several months to complete. If a conditional job offer is made you must successfully complete all phases of the Police Academy.

Whether applying as a certified peace officer, academy prospect, or for a "civilian" non-sworn position, it is essential that you follow all directions provided in this application package. Because we are an organization dealing with criminal justice information and law enforcement duties, we must have accurate and extensive information on which to base our employment decisions, therefore the application requires you to provide much detailed information about yourself. Should you have any questions please contact my staff at the address/phone/fax listed above.

Sincerely,


Chuck Edwards
Chief of Police

EMPLOYMENT APPLICATION INSTRUCTION SHEET

- The application **must** be typewritten or legibly hand written using black ink.
- If additional space is needed for any section or question on the application, or if you wish to furnish additional information, submit it on 8 ½ x 11 white paper, with corresponding section identification.
- All sections of the application must be completed. A resume may be attached only as additional information and will not be accepted in lieu of completing any section of the application.
- Any questions not pertaining to you individually should be listed as “N/A” meaning Not Applicable.
- If you are unable to obtain any information requested on the application, you must give a reason why.
- Failure to furnish the pertinent information requested on the application may result in the Nashville Police Department being unable to complete a background investigation. This could disqualify you as a candidate for employment.
- Intentional omissions or false answers will be basis for the termination of the application process, and **can result in criminal prosecution** for False Swearing, as defined under Georgia Law (O.C.G.A. 16-10-71).
- The information provided by you will be subject to verification by background investigation and may include confirmation by polygraph examination.
- Be sure to review the entire application for both accuracy and completeness before submitting.
- When you submit your application, **do not** include the letter to applicant from the Chief, and do not include the instruction sheet (this page) ... the first/top page of the package should be the “Cover Page” which is number at the bottom as “1”
- **The application must be completed and returned prior to job announcement closing date or your application cannot be accepted.**
- **You may hand deliver the application package to the Department or mail it to the address below, however if mailed, it must be received prior to the closing date.**

NASHVILLE POLICE DEPARTMENT
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Nashville, Georgia 31639
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NASHVILLE POLICE DEPARTMENT EMPLOYMENT APPLICATION

COVER PAGE

Applicant Name (Last) (First) (MI)

1. I understand that if I choose to not to answer a question in this application booklet the application process may be terminated.
2. Photocopies (do not submit originals) of the following documents are required to be attached to this application; failure to attach these documents at the time your application is submitted will result in an incomplete application and the application process may be terminated:
 - Birth Certificate
 - Social Security Card
 - High School Diploma or GED
 - Record Military Service (DD form 214)
 - Drivers License
3. This application will be considered only for vacancies existing on or within 60 days after filing of this application. After this time a new application may be required for further consideration.

Applicant Signature

Today's Date

**NASHVILLE POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT**

Today's Date _____ Date available for employment _____

Please check the position you are applying for:

Police Officer _____ Are you a currently certified peace officer? Yes _____ No _____

Administrative _____ Other _____

If this application is in response to an announced opening, how did you learn about it?

Have you ever been employed with the City of Nashville before? Yes _____ No _____

If yes, what position? _____
(Explain further in the Prior Employment section)

Have you ever applied for employment with the City of Nashville before? Yes _____ No _____

If yes, what position? _____

Are you now, or have you ever been related to anyone currently employed with the City of Nashville?

Yes _____ No _____

Their Name _____ Relationship _____

In accordance with the Immigration Act of 1986, proof of authorization to be employed in the United States will be required of all prospective employees; failure to establish such proof will prohibit employment:

Are you a citizen of the United States? Yes _____ No _____

Because you are applying to a criminal justice agency, you must include information about any charge, arrest, conviction or other criminal activity. If you answer yes to any one of the following, attach a full explanation to your application ... have you ever been:

- charged with or arrested for a felony? Yes _____ No _____
- convicted of a misdemeanor other than a minor traffic violation? Yes _____ No _____
- involved in the possession, use or sale of illegal drugs? Yes _____ No _____
- taken anything from an employer without permission? Yes _____ No _____
- detained for investigative purposes by any law enforcement agency? Yes _____ No _____
- involved or affiliated with any criminal activity? Yes _____ No _____

PERSONAL INFORMATION

Full Legal Name _____
Last First Middle

List any alias names used: (maiden names, nicknames, etc) _____

Residence Street Address _____

City State Zip Code

Telephone Numbers: (Primary) _____ (Other) _____

Email address _____

Date of Birth ____/____/____ Gender ____ Race ____

Hair Color ____ Eye Color ____ Height ____ Weight ____

Place of Birth _____
City State Country

Social Security Number _____

Driver's License: State _____ Number _____

Have you ever been licensed in another state? Yes ____ No ____

If yes, State _____ Number _____

IMMEDIATE FAMILY

Spouse/Life Partner Name _____

Residence Address (if not same) _____

City _____ State _____ Zip Code _____

Telephone Numbers (Primary) _____ (Other) _____

Children or other Dependents:

Name _____ Age _____

Address _____

Name _____ Age _____

Address _____

Name _____ Age _____

Address _____

Name _____ Age _____

Address _____

Name _____ Age _____

Address _____

OTHER IMMEDIATE FAMILY

Other than those above, list immediate family members who are still living, i.e., Father, Mother, Father-In-Law, Mother-In-Law, Parental Grandfather/Grandmother, etc.:

Name	Relationship
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Address	Telephone No.
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Name	Relationship
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Address	Telephone No.
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Name	Relationship
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Address	Telephone No.
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Name	Relationship
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Address	Telephone No.
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Name	Relationship
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Address	Telephone No.
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Name	Relationship
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Address	Telephone No.
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EDUCATION

Do you have a High School Diploma or equivalent GED? Yes _____ No _____ GED _____

Year graduated/diploma/certificate awarded _____

Name and address of high school/institution issuing diploma/certificate:

If you are not a high school graduate, give highest grade completed: _____

Please complete the following for post secondary education (Technical Schools, Colleges, and Universities):

Name of School: _____

City and State: _____

Major: _____

Degree or Diploma: _____

Date Received: _____

Name of School: _____

City and State: _____

Major: _____

Degree or Diploma: _____

Date Received: _____

Indicate any foreign languages you speak, read or write:

Speak: _____

Read: _____

Write: _____

PROFESSIONAL BACKGROUND

If you are now, or have ever been a certified peace officer/police officer:

Georgia P.O.S.T. Certification No. _____

Date of certification: _____ Name of Academy: _____

Georgia P.O.S.T. OKEY Number: _____

If you are/have been certified in another state:

State: _____ Certification No. _____

Date of certification: _____ Name of Academy: _____

Has your certification, in any state, ever been suspended or revoked? Yes _____ No _____
(If yes, attach a thorough explanation.)

Have you ever been investigated by a certification agency or law enforcement agency for possible misconduct/policy violation as a peace officer/police officer?
(If yes, attach a thorough explanation.) Yes _____ No _____

Are you currently, or have you ever served in active military service? Yes _____ No _____
(If yes and discharged, explain further in the Prior Employment section, and **attached DD FM 214**)

Military Occupational Specialty _____

Are you currently, or have you ever served in the Reserve or National Guard? Yes _____ No _____

If yes, what Branch? _____ Current/Highest Rank? _____

Military Occupational Specialty _____

PRIOR EMPLOYMENT

List all positions of employment you have had **starting with your present or most recent job**. Include Military Service in the proper time sequence. List all temporary and part-time jobs. Place all periods of unemployment in the proper time sequence.

Employment Dates: From _____ To _____ Reason for Leaving: _____

Position: _____ Annual Salary: _____

Job Duties: _____

Company Name: _____

Address: _____

Telephone Number: _____ Name of Supervisor: _____

Employment Dates: From _____ To _____ Reason for Leaving: _____

Position: _____ Annual Salary: _____

Job Duties: _____

Company Name: _____

Address: _____

Telephone Number: _____ Name of Supervisor: _____

Employment Dates: From _____ To _____ Reason for Leaving: _____

Position: _____ Annual Salary: _____

Job Duties: _____

Company Name: _____

Address: _____

Telephone Number: _____ Name of Supervisor: _____

PRIOR EMPLOYMENT - CONTINUED

Employment Dates: From _____ To _____ Reason for Leaving: _____

Position: _____ Annual Salary: _____

Job Duties: _____

Company Name: _____

Address: _____

Telephone Number: _____ Name of Supervisor: _____

Employment Dates: From _____ To _____ Reason for Leaving: _____

Position: _____ Annual Salary: _____

Job Duties: _____

Company Name: _____

Address: _____

Telephone Number: _____ Name of Supervisor: _____

Employment Dates: From _____ To _____ Reason for Leaving: _____

Position: _____ Annual Salary: _____

Job Duties: _____

Company Name: _____

Address: _____

Telephone Number: _____ Name of Supervisor: _____

If need more space you may make copies of this sheet.

PERSONAL REFERENCES

Please list five personal references. These are people you have known for at least 3 years, which are not former employees, relatives, or people with whom you are living with.

Name: _____ Phone # _____

Address: _____

Occupation: _____

Name: _____ Phone # _____

Address: _____

Occupation: _____

Name: _____ Phone # _____

Address: _____

Occupation: _____

Name: _____ Phone # _____

Address: _____

Occupation: _____

Name: _____ Phone # _____

Address: _____

Occupation: _____

NASHVILLE POLICE DEPARTMENT

NOTICE OF BACKGROUND INVESTIGATION CRITERIA

Prior to being employed with the Nashville Police Department I will be required to pass an extensive background investigation. This investigation will include, as a minimum:

1. Criminal history check
2. Driver history check
3. Employment history check
4. References check
5. Verification of diplomas and or certificates

The investigation may also include interviews of known associates and acquaintances, a medical examination/evaluation, and a psychological examination/evaluation.

Following an interview with the background investigator(s), or at any time during employment, I may be asked to take a polygraph examination. Polygraph questions may come from any of the following areas of the application.

1. Criminal History
2. Driver's History
3. Work History
4. Drug Use
5. Alcohol Use
6. Honesty in filling out the application for employment

By signing this notice, I hereby acknowledge that I have read, understand, and agree to all provisions outlined herein.

Signature

Date

Name-Based Criminal History Record Information Consent/Inquiry Form

I hereby authorize Nashville Police Dept to conduct an inquiry for the purpose(s) listed below and receive any Georgia and/or national criminal history record information as authorized by state and federal law.

Full Name (print)			
Address			
Sex	Race	Date of Birth	Social Security Number

- This authorization is valid for _____ days from date of signature.
- I, _____, give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

Signature Date

Attorney for Individual (Pur E and U Only) Bar Number Date

Date of Inquiry: _____ Time of Inquiry: _____ Operator's Initials: _____

Purpose Code Used: (check all that apply)

<input type="checkbox"/>	E - Employment
<input type="checkbox"/>	J - Civilian Criminal Justice Employment (State & III Info Received)
<input type="checkbox"/>	M - Working with Mentally Disabled
<input type="checkbox"/>	N - Working with Elderly
<input type="checkbox"/>	P - Public Records
<input type="checkbox"/>	U - Personal Copy
<input type="checkbox"/>	W - Working with Children
<input type="checkbox"/>	Z - Sworn Criminal Justice Employment (State & III Info Received)

The inquiry resulted in the following: (check all that apply)

<input type="checkbox"/>	No Criminal Record Available
<input type="checkbox"/>	Criminal Record (Attached/Released)
<input type="checkbox"/>	No NCIC/GCIC Warrant
<input type="checkbox"/>	Possible NCIC/GCIC Warrant (List Wanting Agency Below)

Wanting Agency Name: _____

Wanting Agency Telephone: _____

Agency Designee Signature and Title

Date

Georgia Driver's History Consent Form

O.C.G.A. § 40-5-2(f)(4) authorizes local fire departments and law enforcement agencies access to Georgia driver's history records as part of an application for employment or any current employee for use relative to the performance of official duties with the local fire or law enforcement agency.

I hereby authorize the

List Name of Law Enforcement Agency/Fire Department

To receive a copy of my Georgia Driver's History record as part of my application for employment, or for use relative to the performance of my official duties with the agency.

Full Name (print)	
Address	
Sex	
Race	
Date of Birth	
Social Security Number	
Driver's License Number	

This authorization is valid for 90 days from the date of signature.

Signature

Date

To be completed by CJIS network operator:

Date of Inquiry	
Time of Inquiry	
Operator's Initials	

Date Results Provided	
Person Results Provided to	

NASHVILLE POLICE DEPARTMENT

APPLICANT'S STATEMENT / CONSENT WAIVER

I certify that I have read and understand all questions and instructions in this application, and that my answers are true and complete. I understand **this application is not an offer or contract for employment.**

I understand that any false statement in this application may result in my dismissal at any time during my employment with the Nashville Police Department. I understand that any intentional false statement will result in my disqualification of my application and /or prosecution for the offense of False Swearing (Ga. Code Sec. 16-10-71) punishable by a maximum fine of \$1000 plus imprisonment for not less than one nor more than five years or both. I further understand that any erroneous answer given by me during any part of the application process, whether intentional or not will constitute a basis for my elimination from consideration for the employment I now seek. I understand that if I do not wish to answer a question in the process, I may choose not to do so and my application will be terminated.

I hereby authorize any persons or organizations to give the Nashville Police Department any and all information concerning my previous employment, education, military, or any other information they might have, personal or otherwise, with regard to any subjects covered by this application. I release all such parties from liability for any damage which may result from furnishing such information to the Nashville Police Department. This information will be used to assist in determining my qualification and fitness for the position I am seeking with this agency.

I understand resumes; letters of reference, etc., submitted with this application become property of the Nashville Police Department and cannot be returned. The information I have provided on this application is subject to public disclosure under the Georgia Open Records Act.

I understand that employment with the Nashville Police Department begins with a probationary period during which I must demonstrate my fitness for continued employment. Failure to complete this probationary period will result in the termination of employment. I further understand that any employment tendered me will be contingent upon the results of a complete character and fitness investigation, successfully passing a physical examination by a licensed physician of the Nashville Police Departments choosing, a drug screen, a polygraph examination, a psychological profile, and if applicable successful completion of the State of Georgia Peace Officers Standards and Training Council Mandate Academy training.

By signing this application, I hereby acknowledge that I have read, understand, and agree to all provisions outlined herein.

Applicant's Signature _____ Date _____

NOTARY PUBLIC

Before me appeared this applicant who says that he/she executes the above statement of his/her own free will and accord, with full knowledge of the purpose thereof.

Sworn to me and subscribed in my presence this _____ day of _____ 20_____.

Notary Public

My commission expires

SEAL

