

HOMEWOOD POLICE DEPARTMENT

PERSONAL HISTORY QUESTIONNAIRE

PART ONE (To be completed by ALL applicants)

1. POSITION APPLIED FOR: _____ DATE: _____
2. NAME: _____
3. ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
4. TELEPHONE NUMBERS: (HOME) _____ (WORK) _____
(CELL) _____
5. ARE YOU AT LEAST 18 YEARS OLD? _____
6. ARE YOU A CITIZEN OF THE UNITED STATES? _____
7. SOCIAL SECURITY NUMBER: _____ - _____ - _____
8. ARE YOU PRESENTLY USING ILLEGAL DRUGS? _____
9. HAVE YOU EVER POSSESSED OR SOLD ANY AMOUNT OF ILLEGAL DRUGS? IF YES, EXPLAIN:

10. DO YOU CONSUME ALCOHOL? IF YES, EXPLAIN: _____

11. ARE YOU AN HONEST PERSON? _____
12. ARE YOU RELIABLE? _____
13. ARE YOU ABLE TO MANAGE YOUR PERSONAL FINANCES? _____
14. ARE YOU GOOD AT COMMUNICATING WITH ALL KINDS OF PEOPLE? _____

15. ARE YOU ABLE TO CONTROL YOUR ANGER WHEN INSULTED OR THREATENED? _____

16. ARE YOU ABLE TO FUNCTION NORMALLY WHEN PLACED UNDER TEMPORARY OR PROLONGED STRESS? _____
17. DO YOU HAVE ANY OUTSTANDING CIVIL JUDGEMENTS AGAINST YOU? IF YES, EXPLAIN.

18. HAVE YOU COMMITTED AN ILLEGAL ACT IN THE LAST FIVE YEARS? IF YES, EXPLAIN.

19. HAVE YOU EVER BEEN DETAINED BY THE POLICE? IF YES, EXPLAIN. _____

20. HAVE YOU EVER BEEN ARRESTED? _____
21. HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____
22. HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____

23. LIST ALL ARRESTS FOR WHICH YOU HAVE BEEN CONVICTED OR PLED GUILTY TO. INCLUDE ALL TRAFFIC ARREST AND CITATIONS:

DATE TYPE OF CHARGE OR CITATION POLICE DEPARTMENT

24. DO YOU HAVE ANY RELATIVES WHO HAVE CRIMINAL CONVICTIONS? _____

25. ARE YOU WILLING TO WORK ROTATING SHIFTS? _____

26. ARE YOU ABLE AND WILLING TO WORK OVERTIME WITH LITTLE OR NO NOTICE? _____

27. ARE YOU ABLE AND WILLING TO WORK WEEKENDS AND HOLIDAYS? _____

28. ARE YOU ABLE AND WILLING TO WEAR A UNIFORM? _____

29. ARE YOU ABLE AND WILLING TO CONFORM TO THIS DEPARTMENT'S GROOMING STANDARDS? _____

30. CAN YOU PERFORM THE ESSENTIAL JOB FUNCTIONS OF THE JOB APPLIED FOR, WITH OR WITHOUT REASONABLE ACCOMMODATIONS? IF SO, PLEASE LIST ANY REASONABLE ACCOMMODATIONS NEEDED. (ESSENTIAL JOB FUNCTIONS LIST CAN BE VIEWED AT THE PERSONNEL BOARD OF JEFFERSON COUNTY WEBSITE – PBJCAL.ORG.)

MILITARY SERVICE

1. HAVE YOU EVER SERVED IN A MILITARY ORGANIZATION? _____
2. IF SO, WHAT BRANCH? _____ FROM: _____ TO: _____
3. WAS YOUR DISCHARGE HONORABLE? _____
4. DID YOU HAVE ANY CONVICTIONS UNDER UNIFORM CODE OF MILITARY JUSTICE (UCMJ)? IF YES, EXPLAIN. _____

5. DID YOU RECEIVE ANY DISCIPLINARY ACTIONS UNDER UCMJ? IF YES, EXPLAIN. _____

6. WHAT SPECIAL TRAINING DID YOU RECEIVE IN THE ARMED SERVICES THAT WOULD BE RELEVANT TO THIS POSITION? _____

7. ARE YOU PRESENTLY A MEMBER OF THE NATIONAL GUARD OR RESERVE? IF YES, WHAT UNIT? _____

RESIDENCE HISTORY

LIST YOUR ADDRESSES FOR THE LAST TEN (10) YEARS, BEGINNING WITH YOUR PRESENT ADDRESS.

<i>DATE FROM/TO</i>	<i>ADDRESS</i>	<i>CITY</i>	<i>STATE/ZIP</i>

ADDITIONAL COMMENTS: _____

EMPLOYMENT HISTORY

1. HAVE YOU EVER MADE APPLICATION FOR EMPLOYMENT WITH ANY OTHER POLICE AGENCY? IF SO, WHICH DEPARTMENT(S)? _____

DATE(S) OF APPLICATION(S). _____

HAVE YOU BEEN INTERVIEWED AND REJECTED BY SUCH DEPARTMENT(S)? _____

2. LIST ALL JOBS YOU HAVE HAD IN THE LAST TEN YEARS. INCLUDE PERIODS OF UNEMPLOYMENT. PUT YOUR PRESENT OR MOST RECENT JOB FIRST. INCLUDE MILITARY SERVICE IN PROPER SEQUENCE AND ALL TEMPORARY OR PART-TIME JOBS.

EMPLOYER'S NAME _____

ADDRESS _____

CITY/STATE/ZIP _____ TYPE OF BUSINESS _____

PHONE _____ SUPERVISOR _____

EMPLOYED FROM _____ TO _____ SALARY PER MONTH _____

TITLE/POSITION _____ EXPLAIN DUTIES _____

REASON FOR LEAVING _____

EMPLOYER'S NAME _____

ADDRESS _____

CITY/STATE/ZIP _____ TYPE OF BUSINESS _____

PHONE _____ SUPERVISOR _____

EMPLOYED FROM _____ TO _____ SALARY PER MONTH _____

TITLE/POSITION _____ EXPLAIN DUTIES _____

REASON FOR LEAVING _____

EMPLOYER'S NAME _____
ADDRESS _____
CITY/STATE/ZIP _____ TYPE OF BUSINESS _____
PHONE _____ SUPERVISOR _____
EMPLOYED FROM _____ TO _____ SALARY PER MONTH _____
TITLE/POSITION _____ EXPLAIN DUTIES _____

REASON FOR LEAVING _____

EMPLOYER'S NAME _____
ADDRESS _____
CITY/STATE/ZIP _____ TYPE OF BUSINESS _____
PHONE _____ SUPERVISOR _____
EMPLOYED FROM _____ TO _____ SALARY PER MONTH _____
TITLE/POSITION _____ EXPLAIN DUTIES _____

REASON FOR LEAVING _____

EMPLOYER'S NAME _____
ADDRESS _____
CITY/STATE/ZIP _____ TYPE OF BUSINESS _____
PHONE _____ SUPERVISOR _____
EMPLOYED FROM _____ TO _____ SALARY PER MONTH _____
TITLE/POSITION _____ EXPLAIN DUTIES _____

REASON FOR LEAVING _____

6. WERE YOU EVER DISCHARGED, FORCED TO RESIGN, OR UNDER INVESTIGATION FOR THE FOLLOWING REASONS?

1. UNSATISFACTORY JOB PERFORMANCE
2. QUESTIONS OF HONESTY OR INTEGRITY
3. CRIMINAL ACTIVITY

____NO

____YES-- PLEASE EXPLAIN FULLY: _____

7. HAVE YOU RECEIVED ANY DISCIPLINARY ACTIONS FROM AN EMPLOYER?

____NO

____YES-- PLEASE EXPLAIN FULLY: _____

ADDITIONAL COMMENTS: _____

EDUCATION

1. PROVIDE THE INFORMATION REQUESTED BELOW CONCERNING HIGH SCHOOLS YOU HAVE ATTENDED.

SCHOOL _____

ADDRESS _____

ATTENDED FROM _____ TO _____ GRADUATE YES () NO ()

SCHOOL _____

ADDRESS _____

ATTENDED FROM _____ TO _____ GRADUATE YES () NO ()

SCHOOL _____

ADDRESS _____

ATTENDED FROM _____ TO _____ GRADUATE YES () NO ()

2. IF YOU DID NOT GRADUATE FROM HIGH SCHOOL, DO YOU HAVE A G.E.D.?

YES () NO ()

3. PROVIDE THE INFORMATION REQUESTED BELOW CONCERNING COLLEGES YOU HAVE ATTENDED.

SCHOOL _____

ADDRESS _____

ATTENDED FROM _____ TO _____ DEGREE _____

SCHOOL _____

ADDRESS _____

ATTENDED FROM _____ TO _____ DEGREE _____

SCHOOL _____

ADDRESS _____

ATTENDED FROM _____ TO _____ DEGREE _____

PERSONAL REFERENCES

NAME _____

ADDRESS _____

HOME PHONE _____ BUSINESS PHONE _____

NAME _____

ADDRESS _____

HOME PHONE _____ BUSINESS PHONE _____

NAME _____

ADDRESS _____

HOME PHONE _____ BUSINESS PHONE _____

CERTIFICATE

I, _____, DO HEREBY

CERTIFY THAT I PERSONALLY COMPLETED THIS PERSONAL HISTORY QUESTIONNAIRE AND ALL ATTACHMENTS. I CERTIFY THAT ALL THE ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AM AWARE THAT ANY MISSTATEMENTS OF FACT OR WILLFUL WITHHOLDING OF INFORMATION ON THIS FORM WILL DISQUALIFY ME OR IF APPOINTED, WILL BE CAUSE FOR IMMEDIATE DISMISSAL FROM THE HOMEWOOD POLICE DEPARTMENT.

I FULLY UNDERSTAND AND AGREE TO THE ABOVE.

APPLICANT _____ DATE _____

WITNESS _____ DATE _____

**HOMEWOOD POLICE DEPARTMENT
PERSONAL HISTORY QUESTIONNAIRE**

PART TWO (To be completed by applicants for Police and Correction Officers)

1. ARE YOU AT LEAST 21 YEARS OLD? _____
2. DO YOU POSSESS A VALID ALABAMA DRIVER'S LICENSE? _____
LIST NUMBER _____ EXPIRATION DATE _____
3. HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED? IF YES, EXPLAIN.

4. HAVE YOU EVER HELD A DRIVER'S LICENSE IN ANOTHER STATE? IF YES, WHERE?

5. WAS THIS LICENSE EVER SUSPENDED OR REVOKED? IF YES, EXPLAIN. _____

6. ARE YOU WILLING TO USE DEADLY PHYSICAL FORCE, IF NECESSARY, TO PROTECT YOUR LIFE OR THAT OF ANOTHER PERSON? _____

7. ARE YOU ABLE AND WILLING TO RENDER EMERGENCY AID TO TRAUMA VICTIMS?

8. ARE YOU ABLE AND WILLING TO IDENTIFY DECEASED PERSONS AND WITNESS AUTOPSIES?

9. WITH PROPER TRAINING AND SUPERVISION, AND/OR THE PROVISION OF REASONABLE ACCOMMODATION, CAN YOU PERFORM ALL OF THE ESSENTIAL JOB FUNCTIONS OF A LAW ENFORCEMENT OFFICER WITHOUT DELAY? _____

**HOMEWOOD POLICE DEPARTMENT
INTERVIEW QUESTIONNAIRE**

PART THREE (To be completed by ALL applicants)

1. BEGINNING WITH YOUR SENIOR YEAR IN HIGH SCHOOL, GIVE A BRIEF SUMMARY OF WHAT YOU HAVE ACCOMPLISHED. _____

2. LIST YOUR LONG TERM GOALS. _____

3. LIST YOUR SHORT TERM GOALS. _____

4. WHAT QUALITIES CAN YOU BRING TO THIS POSITION, WHICH WOULD CONTRIBUTE TO THE OVERALL PERFORMANCE OF THE HOMEWOOD POLICE DEPARTMENT? _____

5. HOW DO YOU THINK OTHERS PERCEIVE YOU? _____

6. WHAT DO YOU IDENTIFY AS YOUR PERSONAL STRENGTHS? _____

7. WHAT DO YOU IDENTIFY AS YOUR PERSONAL WEAKNESSES? _____

8. WHAT MOTIVATES YOU? _____

9. DO YOU SEE YOURSELF AS A LEADER OR FOLLOWER? _____

10. WHEN DID YOU FIRST BECOME INTERESTED IN POLICE WORK? _____

11. DO YOU EXERCISE? IF SO, HOW OFTEN OR REGULAR? _____

12. DO YOU HAVE HOBBIES? IF YES, PLEASE LIST. _____

13. DO YOU OWN WEAPONS? IF SO, WHAT TYPE? _____

14. WHAT DO YOU EXPECT FROM THIS JOB? _____

15. WHAT RESPONSIBILITIES DID YOU HOLD WITH YOUR LAST JOB? _____

16. HOW DO YOU LIKE TO SPEND YOUR LEISURE TIME? _____

17. CAN YOU SPEAK ANY FOREIGN LANGUAGES OR KNOW SIGN LANGUAGE? IF YES, PLEASE LIST. _____

18. LIST ANY AWARDS, HONORS, OR ACHIEVEMENTS THAT YOU HAVE RECEIVED OR ACCOMPLISHED.

19. LIST THE CLUBS OR ORGANIZATIONS THAT YOU BELONG TO. _____

20. ARE YOU COLOR BLIND? _____
21. LIST ANY QUALIFICATIONS OR TRAINING THAT YOU FEEL WOULD BENEFIT OUR AGENCY IN
MAKING DECISIONS REGARDING YOUR EMPLOYMENT. _____

CERTIFICATE

I, _____, DO HEREBY CERTIFY THAT I PERSONALLY COMPLETED THIS PERSONAL HISTORY QUESTIONNAIRE, INTERVIEW QUESTIONNAIRE AND ALL ATTACHMENTS. I CERTIFY THAT ALL THE ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AM AWARE THAT ANY MISSTATEMENTS OF FACT OR WILFUL WITHHOLDING OF INFORMATION ON THIS FORM WILL DISQUALIFY ME OR IF APPOINTED, WILL BE CAUSE FOR IMMEDIATE DISMISSAL FROM THE HOMEWOOD POLICE DEPARTMENT.

I FULLY UNDERSTAND AND AGREE TO THE ABOVE.

APPLICANT _____ DATE _____

WITNESS _____ DATE _____

**PERSONAL INQUIRY WAIVER
AUTHORITY FOR RELEASE OF INFORMATION**

TO: _____

I respectfully request and authorize you to furnish the Homewood Police Department any and all information that you may have concerning me, my work record, school record, reputation, financial and credit status. Please include any and all medical, physical and dental records or reports including all information of a confidential or privileged nature, and photostats of same, if requested. This information is to be used to assist the department in determining my qualifications and fitness for the position I am seeking with the Homewood Police Department.

I hereby release you, your organization and/or others from any liability or damage, which may result from furnishing the information requested above.

DATE _____

APPLICANT (Print Name) _____

APPLICANT (Signature) _____

ADDRESS _____

AFFIDAVIT

STATE OF _____

COUNTY OF _____

Before me personally appeared the said _____ who states that he/she executed the above instrument of his/her own free will and accord, with full knowledge of the purpose therefore.

Sworn to and subscribed in my presence the _____ of _____, _____.

Notary Public

Expiration Date

WRITING EXERCISE

In a minimum of one page, and a maximum of two pages, tell why you want to be a

(list what position you are applying for)

with the Homewood Police Department. Tell what your goals are with the department and the goals for your life. Also, tell why you feel you are better qualified than other applicants.

CREDIT REPORT INFORMATION SHEET

PERSONAL INFO

FIRST NAME _____ MIDDLE _____ LAST _____

STREET ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

SSN _____ - _____ - _____

PREVIOUS ADDRESS INFO

STREET ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

ADDITIONAL INFO

TELEPHONE # (_____) - _____ - _____ DL# _____ STATE _____

ISSUED ON ____/____/____ EXP. DATE ____/____/____

BIRTHDATE ____/____/____ AGE _____

EMPLOYMENT INFO

EMPLOYER'S NAME _____

LENGTH OF EMPLOYMENT _____ (YY MM) EX: 0205 = 2 YRS 5 MONTHS

OCCUPATION _____

DATE HIRED ____/____/____ DATE SEPARATED ____/____/____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE # (_____) - _____ - _____

HPD - ENTERED BY: _____ DATE _____

