

City of Riverside, Missouri

Police Department
2990 NW Vivion Road
Riverside, Missouri 64150
816.741.1191

Application for Employment

Please Print Legibly
Questions That Do Not Apply Should Be Marked N/A

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for: Communications/Records Police Officer Intern Date of Application: _____

How did you hear about us: _____

Were you recruited by a member of the department: Yes No If yes, what is the name of your recruiter: _____

Name: _____
LAST FIRST MIDDLE

Address: _____
ADDRESS CITY STATE ZIP

Email: _____ Cell Phone Number: _____ Social Security number: _____

Date of Birth: _____ List any other names you have used: _____

List all addresses you have lived at for the past ten years. Use back of page if additional space is needed.

Dates	From	To	Street Address	City	County	State	Zip Code

Have you ever been employed here before? Yes No

Are you legally eligible for employment in this country? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Date available for work _____

Type of employment desired: Full Time Part-Time Intern

Driver's License number as driving is an essential job function: _____ State: _____

EMPLOYEMNT HISTORY

(List entire employment history. Begin with your current employer.)

From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly rate/salary Start \$ _____ Per _____ Final \$ _____ Per _____	

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City of Riverside is an equal opportunity employer

Updated: 02/2019

EMPLOYMENT HISTORY
(Continued)

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SKILLS AND QUALIFICATIONS

Summarize any training, special skills, licenses presently held, and or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. Attach copies.

EDUCATIONAL BACKGROUND

****Attach copy of High School Diploma, GED and College Degree.**

Check each of the following that you possess: High School Diploma GED College Degree

Dates	Name	Address	Degree/Diploma

REFERENCES

List three references (not relatives) who have known you for at least five years.

(1) Name	Occupation	How long known
Home address	City State Zip code	Telephone Number
Work address	City State Zip code	Telephone Number
(2) Name	Occupation	How long known
Home address	City State Zip code	Telephone Number
Work address	City State Zip code	Telephone Number
(3) Name	Occupation	How long known
Home address	City State Zip code	Telephone Number
Work address	City State Zip code	Telephone Number

CITY OF RIVERSIDE ASSOCIATIONS

List all City of Riverside employees and officials whom you have been acquainted. Continue on back if needed.

NAME	HOW KNOWN

MILITARY STATUS

**ATTACH COPY OF DD214

Have you ever served in the Army, Navy, Marine Corps, Air Force, and Coast Guard, R.O.T.C. or any other military or semi-military organization? YES NO If so list them. If for more than one period, list each period of service.

Month / Year Entered	Discharge Date	Branch or Organization	Type of Discharge	Rank

List all Military Service Numbers:

ARREST HISTORY

The following questions pertain to your experiences in this country and all other countries, other than in reference to traffic violations.

Have you ever been arrested? YES NO

If you answered yes to the question above, list the incident(s) in the below section and make certain you attach a separate sheet explaining each in detail.

Date	Charge	Agency / City / State	Disposition / Sentence

DRIVING HISTORY

Has your driver's license ever been revoked or suspended? YES NO

List all drivers licenses you now hold or have previously held. Please list dates and reasons for any suspensions or revocations on separate sheet.

State	Type of License	Expiration Date	License Number

Have you ever attended a court ordered driver improvement school? YES NO

When? _____ Where? _____

List each traffic citation or summons you have been convicted of. List in chronological order starting with the most recent. Use a separate sheet of paper if more room is needed.

Date	Charge	City and State	Disposition

PERSONAL HISTORY

Have you ever used a prescription drug without a doctor's prescription? If yes, explain below. YES NO

Please answer yes or no if you have tried any of the following drugs listed below. If you answer yes, please explain on a separate sheet and include dates of use and amounts.

Hash <input type="checkbox"/> YES <input type="checkbox"/> NO	Cocaine <input type="checkbox"/> YES <input type="checkbox"/> NO	Crack etc. <input type="checkbox"/> YES <input type="checkbox"/> NO
Ecstasy <input type="checkbox"/> YES <input type="checkbox"/> NO	Heroin <input type="checkbox"/> YES <input type="checkbox"/> NO	Opium <input type="checkbox"/> YES <input type="checkbox"/> NO
Barbiturates <input type="checkbox"/> YES <input type="checkbox"/> NO	Amphetamines <input type="checkbox"/> YES <input type="checkbox"/> NO	Inhalants <input type="checkbox"/> YES <input type="checkbox"/> NO (Glue, Solvents, Gasoline, etc)
Hallucinogenic (LSD, Acid, Angel Dust, etc) <input type="checkbox"/> YES <input type="checkbox"/> NO	Marijuana <input type="checkbox"/> YES <input type="checkbox"/> NO	

Have you ever illegally sold or furnished drugs or narcotics to anyone? YES NO
If yes, explain below.

List any incidents in your life you feel may reflect negatively upon your suitability to perform as an employee with the Riverside Police Department.
Explain Below.

Are you a citizen of the United States? YES NO If naturalized, attach proper documentation.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by Local, State or Federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of this employer other than an authorized officer has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing, signed by an authorized officer.

I understand it is the City of Riverside's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired I will be required to provide proof of identity, and legal work authority and complete a drug screen.

Notice

Applications must be accompanied with copies of:

- **Valid state driver's license**
- **Birth certificate or naturalization papers**
- **High school diploma or GED certificate**
- **Military: DD-214 (if former military)**
- **Police/Communications related training certificates**
- **Any other educational or training certificate you would like considered**

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Applicants Name: _____ Applicants Signature: _____ Date: _____
Last First Middle

***If applicant is under 18 years of age the signature of a parent or legal guardian is required.**

Parent/Guardian Name: _____ Parent/Guardian Signature: _____ Date: _____
Last First Middle