

**INEXPERIENCED and LATERAL POLICE OFFICER
APPLICATION PACKET INSTRUCTIONS**

www.bethebadge.com

What Documents Should I Gather for My Application Packet?

You will need all of these documents in your application packet when you return it to the Human Resource Development Department:

1. Completed Application
2. Affirmative Action Information form (*optional*)
3. Authorization and Release to Obtain Information (signed & notarized)
(This form can be notarized in the State where you currently reside.)
4. City of Fayetteville Standard Procedure #113: Driving Standard (signed)
5. Copy of valid Drivers License
6. Birth Certificate (Certified /Notarized Copy or Original)
7. High School Diploma (Certified/Notarized Copy, Original, or Transcript)
(Correspondence High School Diploma are not accepted.)
8. G.E.D. Certificate and test scores/High School Equivalency (Certified/Notarized Copy, Original, or Transcript)
9. Military DD214 Member Copy #2 and or #4 (if you are a military veteran)
*** To access your DD214 please visit <http://www.archives.gov/veterans/> ***
10. Basic Law Enforcement Training (BLET) Certificate for lateral applicants (including out-of-state applicants) or applicants that have graduated BLET within the last 12 months.

Lateral Out of State Applicants – must also submit all of the following with your application packet:

1. A signed letter from your Chief/Sheriff or your authorized representative, stipulating exactly how long you have been a sworn officer with their department (cannot be a detention officer).
2. A certified breakdown from your state Post agency indicating what subjects were taken during your academy training, how many hours for each subject and total number of hours for the academy.
3. Certified driving history from your State DMV

What Else Should I Include?

When completing your application, please remember to:

- Include all of your residences you have lived for the past 10 years
- Include every employer for whom you have worked for the last 10 years, even if the business is now closed. Include temporary, seasonal, part-time and volunteer jobs.
- Have the Authorization to Release Obtain Information notarized.
- Review all the information you have provided for accuracy.

The information requested of you is very important in the consideration of your application. It is imperative that you provide all of the information requested; information must also be accurate and legible.

Mail or Return your completed packet to:	For questions call:
City of Fayetteville Human Resources Department 433 Hay Street Fayetteville, NC 28301	Human Resources Department (910) 433-1635 Police Recruiter (910) 433-1902



About the Position:

A Police Officer performs a variety of duties in the enforcement of laws and the prevention of crimes; to control traffic flow and enforce State and local traffic regulations; to perform investigation activities; and to perform a variety of technical and administrative tasks in support of the Police Department.

Police Officer Essential Job Functions:

- Effect an arrest, forcibly if necessary, using handcuffs and other restraints; subdue resisting suspects using maneuvers and weapons and resort to the use of hands and feet and other approved weapons in self-defense.
- Prepare investigative and other reports, including sketches, using appropriate grammar, symbols and mathematical computations.
- Exercise independent judgment in determining when there is reasonable suspicion to detain, when probable cause exists to search and arrest and when force may be used and to what degree.
- Operate a law enforcement vehicle during both the day and night; in emergency situations involving speeds in excess of posted limits, in congested traffic and in unsafe road conditions used by factors such as fog, smoke, rain, ice and snow.
- Communicate effectively and coherently over law enforcement radio channels while initiating and responding to radio communications.
- Gather information in criminal investigations by interviewing and obtaining the statements of victims, witnesses, suspects and confidential informers.
- Pursue fleeing suspects and perform rescue operations which may involve quickly entering and exiting law enforcement patrol vehicles; lifting, carrying and dragging heavy objects; climbing over and pulling oneself over obstacles; jumping down from elevated surfaces; climbing through openings; jumping over obstacles, ditches and streams; crawling in confined areas; balancing on uneven or narrow surfaces and using body force to gain entrance through barriers.
- Load, unload, aim and fire from a variety of body positions handguns, shotguns and other agency firearms under conditions of stress that justify the use of deadly force and at levels of proficiency prescribed in certification standards.
- Perform searches of people, vehicles, buildings and large outdoor areas which may involve feeling and detecting objects, walking for long periods of time, detaining people and stopping suspicious vehicles.
- Conduct visual and audio surveillance for extended periods of time.
- Engage in law enforcement patrol functions that include such things as working rotating shifts, walking on foot patrol and physically checking the doors and windows of buildings to ensure they are secure.
- Effectively communicate with people, including juveniles, by giving information and directions, mediating disputes and advising of rights and processes.
- Demonstrate communications skills in court and other formal settings.
- Detect and collect evidence and substances that provide the basis of criminal offenses and infractions and that indicate the presence of dangerous conditions.
- Endure verbal and mental abuse when confronted with the hostile views and opinions of suspects and other people encountered in an antagonistic environment.

Police Officer Essential Job Functions: *(contd)*

- Perform rescue functions at accidents, emergencies and disasters to include directing traffic for long periods of time, administering emergency medical aid, lifting, dragging and carrying people away from dangerous situations and securing and evacuating people from particular areas.
 - Process and transport prisoners and committed mental patients using handcuffs and other appropriate restraints.
 - Put on and operate a gas mask in situations where chemical munitions are being deployed.
 - Extinguish small fires by using a fire extinguisher and other appropriate means.
 - Read and comprehend legal and non-legal documents, including the preparation and processing of such documents as citations, affidavits and warrants.
 - Process arrested suspects to include taking their photographs and obtaining a legible set of inked fingerprints impressions.
-

An applicant who does not successfully pass the Physical Agility Test for any reason on the first attempt may re-test on the scheduled testing date of their choice within 8 weeks from the date of the original test. It is the applicant's responsibility to contact the Training Staff to schedule the second Physical Agility Test and he/she must be listed on the schedule the day of the testing. The candidate must complete the entire Physical Agility Test successfully to be eligible to continue in the hiring process. If the applicant fails the Physical Agility Test for the second time, they can resubmit an application within 6 months from the date of the original application.

Requirements:

- Age 20 ½ years at the time of the academy start date
- U.S. Citizen (if naturalized, must provide documentation)
- High School Graduate Diploma OR
GED Graduate Certificate with test scores. The certificate must meet the minimum total score of 225, with a minimum of 35 points for each section.
- The ability to obtain and maintain NC Driver's License upon acceptance of job offer with the City of Fayetteville
- Licensed to drive for a minimum of 1 year, with no loss of license within the past year
- Acceptable driving record in accordance with the City of Fayetteville Driving Standard
- 3-year driving history from the DMV in any state for which you held a Driver's License
- No felony and limited misdemeanor convictions
- Willing to submit and successfully pass pre-employment drug screen and physical
- Good Physical Condition as required by the job functions
- Good Moral Character
- Honorable discharge from the military
- Sign a 2-year training agreement beginning on the first day of Basic Law Enforcement Training.

Lateral Applicant Additional Requirements:

- BLET (Basic Law Enforcement Training) Course within the past 12 months
- **OUT OF STATE CANDIDATES** must have 2 years of full-time sworn experience (Law Enforcement Certification Course does not count towards the 2 years)
- You must not have been out of the law enforcement field for more than one year. (If so, you are considered inexperienced and must attend BLET).
- Sign a 730-day training agreement beginning on the first day of employment.

Qualifications:

Join Our Team Today Fayetteville Police Department Officers are entrusted with the responsibility to keep our cities safe from crime and corruption. Therefore, a history of ethical and moral behavior is of the utmost importance. Your background will be looked at very closely. Applicants who have a history of unethical or immoral behavior will not be hired. You will be subjected to an intensive background evaluation, which will include, but is not limited to, the following:

- Your past behavior and the choices you have made must demonstrate positive traits that will support your candidacy for Police Officer and reflect favorably on your character.
- You must have a history of lawful conduct.
- You must possess high standards of honesty and integrity as demonstrated by your dealings with individuals and organizations. Falsifying, misrepresenting, or omitting information on any document or during the selection process will be closely scrutinized.
- You must respect the rights of all people and have an appreciation for the diversity that characterizes the City of Fayetteville. A history of domestic violence, physical altercations, or discourteous, abusive, or violent treatment of others may indicate a lack of self-discipline, an unwillingness or inability to cooperate, or a disregard for the rights of others.
- Your employment and military (if applicable) histories must demonstrate the motivation and success-orientation needed to succeed as a Police Officer.
- Your financial and driving records must demonstrate responsible decisions and appropriate behavior. Please call to discuss your driving history prior to applying if you have recent charges or convictions to determine if you are a suitable applicant.

Hiring Process:

The application process from start to finish may take 3 to 5 months. Successful completion of this process does not guarantee employment. The Fayetteville Police Department reserves the right to hire any candidate from the list depending on the department's needs.

1. Complete and submit all applications.
2. Criminal History and Driving History Review
3. Written Exam
4. Successfully complete the Police Officer Physical Ability Test (POPAT)
5. Complete an oral Interview
6. Submit to a background Investigation
7. Complete a Computer Voice Stress Analyzer (CVSA) / Polygraph Examination
8. Pass a physical examination administered by a practicing physician in the State of North Carolina, to include vision, color blindness and drug testing.
9. Complete a psychological evaluation

Upon successful completion of the process, candidates may be considered for available positions.

Automatic Disqualifiers

According to the NC Criminal Justice Training & Standard Title 12 NCAC Chapter 9B .0101/9B .0111

Felony Criminal History

- Any felony convictions;
- Any crime for which the conviction could have been punishment of more than two years incarceration;

Misdemeanors Criminal History

- A crime or unlawful act defined as a "Class B misdemeanor" within the five year period prior to the date of application for employment;
- Four or more crimes or unlawful acts defined as "Class B misdemeanors" by the NC Training and Standards Commission regardless of the date of conviction;
- Four or more crimes or unlawful acts defined as "Class A misdemeanors" except the applicant may be employed if the last conviction occurred more than two years prior to the date of an application for employment

Other

- Dishonorable or General discharge from any military service (only honorable discharges will be considered)
- Untruthfulness or the intentional withholding of information on any application, interview, or paperwork associated with the position
- Deliberate inaccuracies or incomplete statements
- Cheating on any examination or testing associated with the position

The City of Fayetteville is an Equal Opportunity Employer. Only US Citizens are eligible for hire. The City of Fayetteville will not refuse to hire a disabled applicant who is capable of performing the essential requirements of a job with reasonable accommodation.

Questions?

Call the Human Resource Development Department at (910) 433-1635,
433 Hay Street, Fayetteville, NC 28301

POLICE OFFICER PHYSICAL ABILITIES TEST
Inexperienced and Lateral Applicants

This is a modified Police Officer Physical Abilities Test (POPAT) outline. Applicants MUST complete the entire exercise within 8 minutes 30 seconds to proceed in the hiring process. This exercise may be viewed in its entirety by visiting www.bethebadge.com.

- 1. Exit Vehicle and run 200 yards.**
Test begins with applicant seated in a police car with seat belt secured. Applicant exits the vehicle and runs 100 yards in a straight line to an orange cone and then returns to the vehicle.

- 2. Pull 130-pound dummy from vehicle and drag it 50 feet.**
Applicant opens the door to the rear passenger area of the vehicle, pulls a 130-pound dummy from the vehicle and drags it 50 feet.

- 3. Run up and down a 5-step staircase three times.**

- 4. Push open and walk through a door weighted with 50 pounds of resistance.**

- 5. Complete 10 push-ups and 10 sit-ups.**

- 6. Run up and down a 5-step staircase three times.**

- 7. Crawl through culvert.**
Applicant runs 25 feet to the entrance of a culvert. Applicant then crawls through the 40-foot culvert.

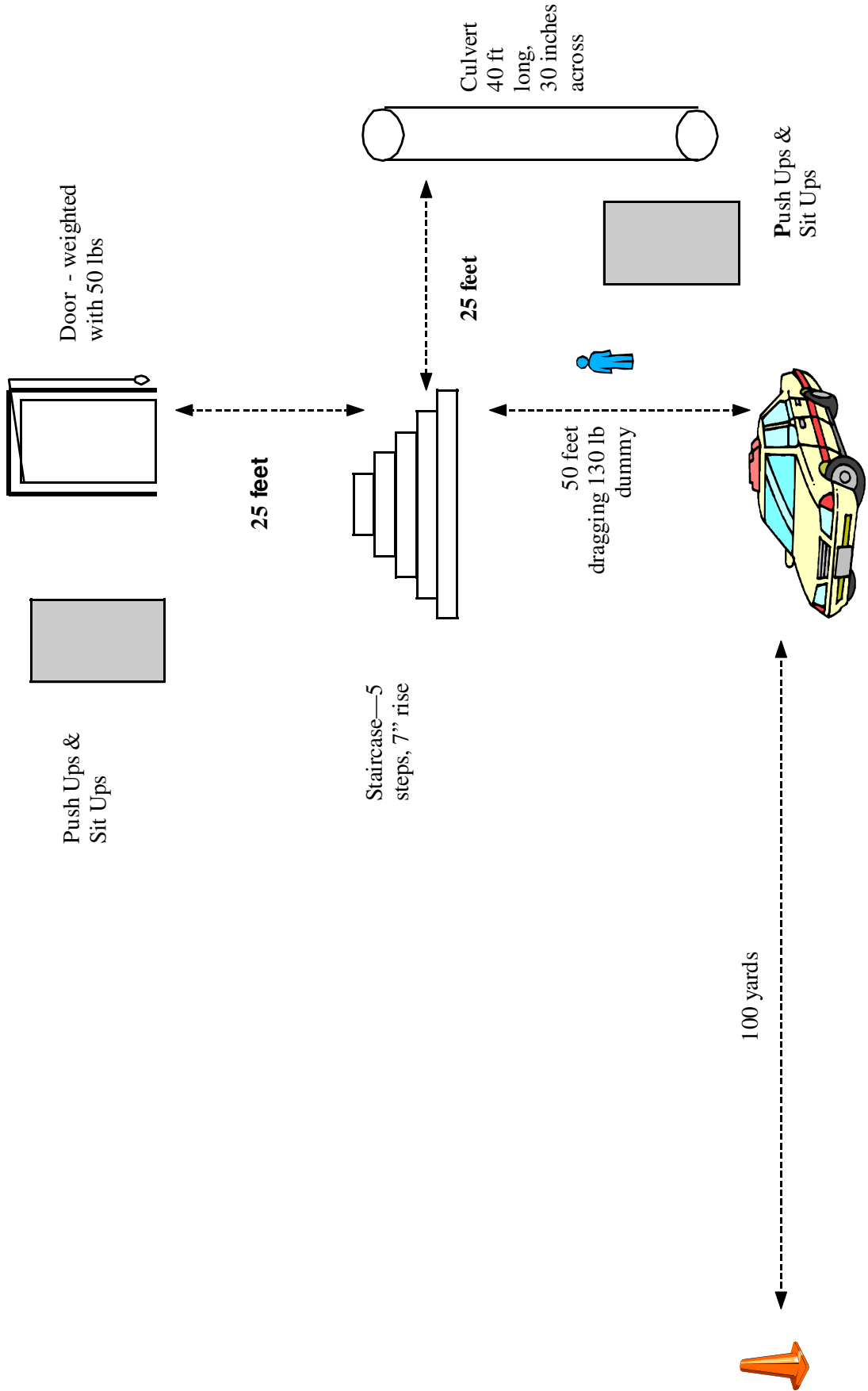
- 8. Complete 10 push-ups and 10 sit-ups.**

- 9. Run 200 yards and return to 130-pound dummy.**
Applicant runs 100 yards in a straight line to an orange cone and then returns to the 130-pound dummy positioned beside the staircase.

- 10. Drag a 130-pound dummy 50 feet.**
Applicant drags the 130-pound dummy 50 feet back to the rear door of the vehicle.

The City of Fayetteville reserves the right to modify or change this exercise without notice.

Physical Abilities Test OBSTACLE COURSE





Police Officer Application



Today's Date
Name (Last, First, Middle)

This application will be evaluated by those persons responsible for hiring at the Fayetteville Police Department. It will be reviewed as part of an extensive background investigation into your personal and employment history.

Any false, misleading or incomplete information or failure to follow the instructions listed below will be grounds to disqualify you for employment with the Fayetteville Police Department.

FOLLOW DIRECTIONS CAREFULLY

1. USE BLACK or BLUE INK TO COMPLETE QUESTIONNAIRE
2. COMPLETE THE FORM IN YOUR OWN HANDWRITING OR PRINTING. DO NOT TYPE.
3. WRITE OR PRINT LEGIBLY.
4. READ EACH QUESTION CAREFULLY.
5. ANSWER EACH QUESTION COMPLETELY AND ACCURATELY.
6. ANSWER ALL QUESTIONS. DO NOT LEAVE ANY BOXES BLANK.
7. IF A QUESTION DOES NOT APPLY TO YOU, WRITE N/A IN THE BOX.
8. FOR ADDITIONAL EMPLOYMENT SPACE COPY AN EMPLOYMENT HISTORY PAGE
9. IF YOU NEED ADDITIONAL SPACE, WRITE ON THE BACK PAGE.
10. BEFORE RETURNING QUESTIONNAIRE, READ, SIGN THE LAST PAGE AND MAINTAIN A COPY FOR YOUR RECORDS.

REFERRAL SOURCE / AVAILABILITY

A	Which position are you applying for?	<input type="checkbox"/> Inexperienced Police Officer	<input type="checkbox"/> Lateral Police Officer
B	What types of work will you accept?	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time
C	Please indicate your referral source:	<input type="checkbox"/> bethebadge.com	<input type="checkbox"/> Police Recruiter
		<input type="checkbox"/> City of Fayetteville Website	
	<input type="checkbox"/> Friend	<input type="checkbox"/> ESC	<input type="checkbox"/> Job Fair
	<input type="checkbox"/> Matchforce.org	<input type="checkbox"/> Monster.com	<input type="checkbox"/> Newspaper
	<input type="checkbox"/> Other		
	<input type="checkbox"/> Walk-In	<input type="checkbox"/> City Employee	<input type="checkbox"/> Internet Website, if so list name:
D	Which Job Fair did you attend (please specify):		
E	If other referral source (please specify the name of the website, friend city employee or agency in which you found out about this position):		
F	If selected for this position, how soon can you begin employment?	<input type="checkbox"/> As soon as possible	<input type="checkbox"/> Two week notice
		<input type="checkbox"/> Need more notice	
G	If you are not available for work now, enter the earliest date you could begin work?		

VOLUNTARY: Persons with disabilities who **DO NOT WISH** to report their disabilities should respond to the next question as "no". Information reported regarding this question will be kept confidential as required by State law. Public disclosure of this information without your consent would be a violation of NC Law.

B Do you have a disability? Yes No **DISABILITY:** Disability means, with respect to an individual: (1) a physical or mental impairment that substantially limits one or more of the major life activities of such individual; (2) a record of such impairment; or (3) being regarded as having such an impairment, (Americans with Disabilities Act of 1990).

If you answered yes to the above stated question, please list your disability:

C Can you, after employment submit proof of your legal right to work in the United States? Yes No

D Are you legally eligible to work in the United States? Yes No

E Are you a previous City of Fayetteville employee? Yes No If yes, please list dates of employment: (MO / YY)

F Are you currently working at the City of Fayetteville as a regular or temporary employee? Yes No

G Are you related by blood or marriage to a person now employed by the City of Fayetteville? Yes No If yes, please indicate:

Name: Relationship: Department:

Reinstatement is a privilege granted at the discretion of the City of Fayetteville for the purpose of assuring a well-trained and experienced workforce for the benefit of the organization. Reinstatement is not a right, but a privilege that shall only be available to former City employees who have successfully completed their first year probationary employment period. Employees requesting reinstatement must return to their former position, or to similar position, whereby prior training and experience is beneficial to the City.

At the time of the application, an individual wishing to be considered for reinstatement with the City of Fayetteville must submit a letter to the Human Resource Development Department indicating their name, current address, original date of hire, position held, department in which the individual worked and the position for which the individual wishes to be considered.

H Are you seeking reinstatement to the same or similar position? Yes No

2. REFERENCES

List three (3) references (NO relatives, household members, or former employers) who are responsible adults, and who have known you well for at least the last three (3) years.

Name	Street Address	City	State	Zip Code
How long known?	Occupation	Home Phone ()	Business Phone ()	
Name	Street Address	City	State	Zip Code
How long known?	Occupation	Home Phone ()	Business Phone ()	
Name	Street Address	City	State	Zip Code
How long known?	Occupation	Home Phone ()	Business Phone ()	

3. EDUCATION

A Indicate by checking all boxes that apply if you have any of the following: HS Diploma GED Certificate College Degree Masters Degree

High School Name	Address	City	State	Zip Code
Dates Attended (MM/YY) From: To:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree or Credit Hours		
High School Name	Address	City	State	Zip Code
Dates Attended (MM/YY) From: To:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree or Credit Hours		

Name(s) and location(s) of Colleges, Universities or vocational schools attended or internships:

College Name	Address	City	State	Zip Code
Dates Attended (MM/YY) From: To:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree or Credit Hours		
College Name	Address	City	State	Zip Code
Dates Attended (MM/YY) From: To:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree or Credit Hours		

College Name		Address		City	State	Zip Code	
Dates Attended (MM/YY) From: _____ To: _____		Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Degree or Credit Hours				
B Have you ever been suspended, disciplined or expelled from any high school or institution of higher learning? If YES, explain on the back page.						<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. EMPLOYMENT HISTORY							
A Have you ever been dismissed or asked to resign from ANY employment?						<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, explain on the back page.
B If you do not want your present employer to be contacted, check the box to the right and on the back page explain why.						<input type="checkbox"/>	
<p>Beginning with your present employer or most recent employer, list ALL of the places you have worked during the last ten (10) year period. Keep in chronological order. List periods of school, military service, each duty station, assigned military unit, unemployment, temporary assignments, volunteer service and part-time employment. List everything during the last ten (10) year period. Omit None! Copy the employment page and continue your information on the copy(s).</p>							
From MO/YR	Name Street Address	Job Title Supervisor					
To MO/YR	City State	Phone () Zip Code	Starting Salary Ending Salary				
Describe your duties							
<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Volunteer If part-time, list number of hours worked per week							
Detail Reason for Leaving							
From MO/YR	Name Street Address	Job Title Supervisor					
To MO/YR	City State	Phone () Zip Code	Starting Salary Ending Salary				
Describe your duties							
<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Volunteer If part-time, list number of hours worked per week							
Detail Reason for Leaving							
From MO/YR	Name Street Address	Job Title Supervisor					
To MO/YR	City State	Phone () Zip Code	Starting Salary Ending Salary				
Describe your duties							
<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Volunteer If part-time, list number of hours worked per week							
Detail Reason for Leaving							

From MO/YR	Name Street Address	Job Title Supervisor
To MO/YR	City State	Phone () Zip Code
		Starting Salary Ending Salary
Describe your duties		
<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Volunteer If part-time, list number of hours worked per week		
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From MO/YR	Name Street Address	Job Title Supervisor
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Detail Reason for Leaving		
From MO/YR	Name Street Address	Job Title Supervisor
To MO/YR	City State	Phone () Zip Code
		Starting Salary Ending Salary
Describe your duties		
<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Volunteer If part-time, list number of hours worked per week		
Detail Reason for Leaving		

C Have you ever applied for ANY position with ANY law enforcement agency including local, state and federal agencies? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Date	Position	Law Enforcement Agency	Disposition

D Have you ever attended a law enforcement academy? <input type="checkbox"/> Yes <input type="checkbox"/> No		Were you certified? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of academy: _____		Date attended: _____	
City & State: _____			

E Has your law enforcement certification ever been suspended, revoked or brought before a review board? <input type="checkbox"/> Yes <input type="checkbox"/> No
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5. ARREST HISTORY

The following questions pertain to your experiences in this country and all other countries as both a juvenile and an adult. Include any military law enforcement contact. If a charge or conviction was judicially expunged do not list it. **Explain all "YES" answers in detail.**

	Yes	No		Yes	No
A Have you ever had any contact with ANY law enforcement official, to include as a victim, witness or reporting party?	<input type="checkbox"/>	<input type="checkbox"/>	G Have you ever been convicted of a crime?	<input type="checkbox"/>	<input type="checkbox"/>
B Has a law enforcement official for any reason ever issued you a verbal or written warning?	<input type="checkbox"/>	<input type="checkbox"/>	H Have you ever been booked into jail?	<input type="checkbox"/>	<input type="checkbox"/>
C Have you ever been detained by a law enforcement official?	<input type="checkbox"/>	<input type="checkbox"/>	I Have you ever received a criminal citation?	<input type="checkbox"/>	<input type="checkbox"/>
D Have you ever been accused of a crime?	<input type="checkbox"/>	<input type="checkbox"/>	J Have any relatives of you or your spouse ever been convicted or held in any detention facility, jail or prison?	<input type="checkbox"/>	<input type="checkbox"/>
E Have you ever been charged with a crime?	<input type="checkbox"/>	<input type="checkbox"/>	K Have the police ever been called to your home for any reason?	<input type="checkbox"/>	<input type="checkbox"/>
F Have you ever been arrested?	<input type="checkbox"/>	<input type="checkbox"/>			

L If you have answered "yes" to any of the above questions, list the incident below and make certain you have explained it on the back page. **ALL INCIDENTS MUST BE EXPLAINED IN DETAIL BELOW. If more space is needed, use the back page.**

Section # (A-K)	MO/YR	Reason / Charge	Law Enforcement Agency - City / State	Disposition / Sentence	MO/YR

6. DRIVERS HISTORY

A List all valid driver's license you now hold

Issue Date	Type of License	Expiration Date	State	License Number

B If you have previously held a drivers license from ANY state, please indicate below:

Issue Date	Type of License	Expiration Date	State	License Number

C Is your driver's license currently restricted, suspended, or revoked? Yes No Reason: _____

D Have you ever had a driver's license, canceled, refused, revoked, or suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, explain in detail on the back page the reasons and dates.	Date of Reinstatement
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E Have you ever been charged with driving under the influence of alcohol or drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, explain on the back page.	Convicted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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F List each and every **TRAFFIC** citation, summons and written warning you have ever received. List in chronological order beginning with the most recent. If you need more space use the back page.

MO / YR	Charge	Agency/ City or State	Disposition / Conviction	MO / YR

7. LIQUOR AND NARCOTICS

A Have you ever used any prescription drugs not prescribed to you by a doctor? Yes No **If YES, explain on the back page.**

B If you have tried, used or ingested **ANY** of the drugs listed below, check the "Yes" box; if you have not, check the "No" box. **Include the number of times used and dates.**

	Yes	No	Total # Times Used	Last Use (MO/YR)	Date/s (MO/YR)		Yes	No	Total # Times Used	Last Use (MO/YR)	Date/s (MO/YR)
Marijuana	<input type="checkbox"/>	<input type="checkbox"/>				Cocaine (powder/crack)	<input type="checkbox"/>	<input type="checkbox"/>			
Inhalants	<input type="checkbox"/>	<input type="checkbox"/>				Heroin	<input type="checkbox"/>	<input type="checkbox"/>			
Ecstasy	<input type="checkbox"/>	<input type="checkbox"/>				Opium	<input type="checkbox"/>	<input type="checkbox"/>			
Barbiturates	<input type="checkbox"/>	<input type="checkbox"/>				Injectable /Oral Steroids	<input type="checkbox"/>	<input type="checkbox"/>			
Hashish	<input type="checkbox"/>	<input type="checkbox"/>				Other: _____	<input type="checkbox"/>	<input type="checkbox"/>			
Amphetamines (speed, meth, etc)	<input type="checkbox"/>	<input type="checkbox"/>				Hallucinogenic Substances (LSD, PCP, Mescaline, Mushrooms, etc)	<input type="checkbox"/>	<input type="checkbox"/>			

If you have tried or used any of the drugs listed above or if you have tried or used any other drug without a doctor's prescription, **explain on the back page. You MUST include dates and number of times used.**

8. GANG AFFILIATIONS

A Are you currently, or have you formerly, been associated with a group that engages in criminal activity, to include motorcycle organizations, street gangs, or other organizations involved in criminal activity? Yes No **If YES, explain on the back page.**

B Are you now in a group, which seeks to alter the form of government of the United States by any unlawful or unconstitutional means? Yes No **If YES, explain on the back page.**

9. MILITARY SERVICE

A Have you served honorably in the Armed Forces of the United States on active duty for reasons other than training? Include Army, Navy, Marine Corps, Air Force, Coast Guard, ROTC, or any other military or other semi-military organization. Yes No
****ONLY Honorable Discharges will be considered for employment**

B List dates of military service: (list each service period separately)

MO / YR Entered	Branch / Organization	Discharge Date	Type of Discharge	Rank

C Are you a member of the Military Reserves? Yes No

D Have you received any form of disciplinary action from the military? Yes No **If YES, explain on the back page with the disciplinary action, what it is for, when, why and where.**

E Current Military Status

10. CVSA / POLYGRAPH

Please answer the following question concerning the scheduling of your CVSA / polygraph examination.

Occasionally, an applicant is unable to keep his/her scheduled CVSA / polygraph appointment. When this occurs, we attempt to schedule another applicant into that time slot.

How much notice do you require to be scheduled for a CVSA / polygraph examination?

Hours (s) _____
Day (s) _____

PLEASE READ BEFORE SIGNING

I certify that I have given true, accurate and complete information on this form to the best of my knowledge. In the event that confirmation is needed in connection with my work, I authorize educational institutions, previous employers, military units, associations, registration and licensing boards, and others to furnish the City of Fayetteville whatever detail is available concerning my qualifications. I authorize the City of Fayetteville to investigate all statements made in this application and understand that false information or documentation, or failure to disclose relevant information may be grounds for rejection of my application or disciplinary action up to and including dismissal shall I become an employee of the City of Fayetteville. I further understand that I will not receive and am not entitled to a copy of any report of background investigation or to know its contents.

I understand that If I am currently employed as law enforcement, correctional officer, by a law enforcement or criminal justice related agency of any type, the results of any background checks may be made available to my current employer, whether or not I am offered employment by the City of Fayetteville.

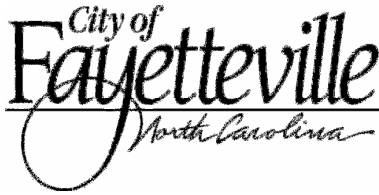
I also understand that employment is conditional until results of health evaluations are known as related to essential job functions and until information given by me on my application has been verified. I certify and acknowledge that I meet minimum age requirements of applicable laws by the City of Fayetteville policy. If required, I will complete a Surety Bond Application. I will accept travel assignments when job duties so require. I will work overtime and other than standard shift hours when job duties so require. As part of the Drug Free Workplace Act, I agree to submit to drug and alcohol screening tests when required upon a conditional offer of employment and during employment. I will participate in the Direct Payroll Deposit program as a condition of employment.

I further authorize the City of Fayetteville and its representatives to perform any criminal records checks that may be required as part of this application process. I understand and acknowledge that, unless otherwise defined by applicable law, my employment relationship with the City of Fayetteville is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of the City of Fayetteville specifically acknowledges such change in writing. I hereby release the City of Fayetteville and its directors, elected officials, employees and assigns from any and all liability or damage that may result from furnishing the requested information.

The City of Fayetteville is an Equal Opportunity Employer

Signature of Applicant (Unsigned applications will not be processed) _____
Date

Print Name



Affirmative Action Information

Notice: The information requested below will in no way affect you as an applicant. The information is requested on a **VOLUNTARY** basis. Data collected will be used for statistical reporting purposes in the Human Resource Development Department, and to see how well recruitment efforts are reaching all segments of the population.

Date _____

Print Name _____
Last First Middle

Gender Male Female

Date of Birth _____
Month Day Year

Race or Ethnic Identity Groups: (Check one)

- White (not of Hispanic or Latino)
- Black or African American/Black (Not Hispanic or Latino)
- American Indian/Alaskan Native
- Native Hawaiian or Pacific Islander (Not Hispanic or Latino)
- Asian
- Hispanic or Latino
- Two or More Races (Not Hispanic or Latino)

DISABILITY: Disability means, with respect to an individual: (1) a physical or mental impairment that substantially limits one or more of the major life activities of such individual; (2) a record of such an impairment; or (3) being regarded as having such an impairment, (Americans with Disabilities Act of 1990). Persons without a disability should check item A. The reporting of a disability is **strictly voluntary**. Persons with disabilities who **DO NOT WISH** to report their disabilities should check item A. Information reported on this form will be kept confidential as required by State law. Public disclosure of this information without your consent would be a violation of North Carolina Law.

- A None/Prefer not to report
- B Blind or severely visually impaired
- C Deaf or severely Hearing impaired
- D Loss of limited use of arms and/or hands
- E Non-ambulatory (must use wheelchair)
- F Other orthopedic impairment (including amputation, arthritis, back injury, cerebral palsy, spina bifida, etc.
- G Respiratory
- H Nervous system/Neurological disorder
- I Mentally restored
- J Mental retardation
- K Learning disability
- L Others (heart disease, diabetes, speech impairment).
- M Other (please specify)



Authorization and Release to Obtain Information

I, _____ authorize the City of Fayetteville to conduct a background investigation in connection with my application for employment.

I understand that I will not receive, and am not entitled to, a copy of the report of the investigation or to know its contents. I further understand that the contents of this report are privileged. I agree to give any further information that may be required in reference to my past record. I fully understand that all information gained for such investigation is confidential and will be released only to authorized persons in the employment process.

This investigation may include information from educational institutions, previous employers, military units and organizations, all US Government agencies to include the Office of Personnel Management (OPM), Department of Motor Vehicle records in any state, any physician or medical records, insurance companies, police or court records, tax and property records, personal references, developed references, and any other appropriate sources. I authorize the release of any information that the City of Fayetteville may request from the above sources. I also authorize my former or current employers to give any information regarding my employment; together with any information they may have regarding me, whether or not it is in their records.

I also understand that if I am currently employed as a law enforcement or correctional officer, or by a law enforcement or criminal justice related agency of any type, the results of this background investigation may be made available to my current employer, whether or not I am offered employment by the City of Fayetteville.

I hereby release the City of Fayetteville, North Carolina, or any of its agents or representatives, and any person or entity so furnishing such information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information for the investigation made by the City of Fayetteville.

Signature

Date

State of _____

County of _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ personally appeared before me this day and acknowledged the forgoing signature to be his/hers, and having been duly sworn by me.

Witness my hand and official seal, this the _____ day of _____, 20 _____.

20_____
Notary Public Signature

My commission expires _____

Notary Public (Type or Print) Name

(Official Seal)

**City of Fayetteville Standard Procedure #113: Driving Standard
Acknowledgement of Compliance**

The following criteria shall be applied in determining the driving status of job applicants and for evaluation of the appropriate driving status of current city employees. Any one of the following constitutes an unacceptable driving record:

1. One conviction of driving while intoxicated, impaired, or under the influence of drugs within the last three (3) years. (N.C.G.S. 20-138)
2. One conviction of careless and reckless driving (if the conviction is a result of a reduction from a charge of driving while intoxicated, impaired or under the influence of drugs or alcohol) or prearranged racing on streets and highways within the last three (3) years. (N.C.G.S. 20-140)
3. Two convictions of exceeding by more than 15 miles per hour the speed limit if also driving in excess of 55 miles per hour within the last three (3) years. (N.C.G.S. 20-141)
Examples: 81 mph in a 65 mph zone; 71 mph in a 55 mph zone; and 56 mph in a 35 mph zone.
4. One conviction of involuntary manslaughter involving an automobile or death by vehicle within the last three (3) years. (N.C.G.S. 20-141.4)
5. A judicial determination that one was guilty of any combination of four (4) or more moving violations or determined to be at-fault in four (4) or more automobile accidents within the past three (3) years.
6. A judicial determination that one was guilty of any combination of three (3) or more moving violations or determined to be at-fault in three (3) or more automobile accidents within the past year.
7. A revocation or suspension of driving license within the last year. (Note that a summary 10-day license revocation shall result in a temporarily unacceptable driving record. Final action shall be deferred until such time as the resolution of the infraction or violation which caused the summary 10-day license revocation is known.) (N.C.G.S. 20-16.5)

I agree that I have read and understand the above listed City of Fayetteville Driving Standard and my signature below indicates that my current driving history is in compliance with these standards.

I also understand that I must be able to obtain and maintain an North Carolina Drivers License upon hire. I further understand that my failure to fully comply with these standards will result in my immediate removal from consideration from this position.

Signature

Date

Print Name

Police Officer

Position Title