



**City of Gordon
Police Department**
P.O. Box 310
Gordon, Nebraska 69343
308/282-0308
CHIEF OF POLICE CLAY HEATH



RELATIVES, REFERENCES, ACQUAINTANCES

During the course of the background investigation, persons who know you will be asked to comment upon your suitability for the position for which you have applied. Inquiries will be confined to job relevant matters.

7. Please supply the appropriate information in the spaces below. If a category is not applicable, write in "N/A".

	Address where person can be contacted (include City, State and Zip Code)	Phone number at which person can be contacted
Name of your:		

Father _____

Mother _____

Father-in-law _____

Mother-in-law _____

Spouse _____

Former Spouse(s) _____

Brothers and Sisters _____

Step-father _____

Step-mother _____

Step-brothers and sisters _____

List all offspring: (Please indicate "son" or "daughter" and whether natural, adopted, from another marriage, etc. List current address and phone number as above.)



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RELATIVES, REFERENCES, ACQUAINTANCES (Continued):

8. List as personal or professional references 3-5 individuals who have knowledge of you and your qualifications.

NAME/RELATIONSHIP	ADDRESS	TELEPHONE

9. List individuals with whom you have resided within the past 10 years. List no information prior to your 15th birthday. Exclude family members.

NAME	ADDRESS	TELEPHONE

EDUCATION

10. The Commission on Peace Officer Standards and Training requires a peace officer to possess a high school diploma or its equivalent. Please indicate your current status with regard to this requirement by checking the appropriate spaces.

- I possess a high school diploma.
- I passed the G.E.D. (General Educational Development) test.
- I possess the following college degrees (please include name of college and year attained):



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11. List all the schools you have attended, beginning with high school. During the background investigation, persons who have known you in a learning environment may be contacted. A review of your school records may be made in conjunction with those contacts.

NAME OF SCHOOL	LOCATION CITY AND STATE	DATES OF ATTENDANCE	TEACHER OR REFERENCE

12. Have you ever been suspended or expelled from any high school or post-secondary school? (Post-secondary schools include colleges and universities, graduate schools, business and vocational schools.....any formal education beyond the high school level.)

YES _____ **NO** _____

If "YES", please explain (include school, date and circumstances): _____

EXPERIENCE AND EMPLOYMENT

13. Beginning with your most current employment, list all jobs you have held in the past 10 years. For purposes of the Personal History Statement, part-time, temporary, and voluntary work should be included. Please list all periods of unemployment in chronological sequence in the spaces provided for you between employment listings.

Should you need to list additional experience/employment information, please use an additional sheet of paper, and continue in the EXACT same format as below.



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NAME & ADDRESS OF EMPLOYER: _____

 Telephone _____

Dates of employment: From: _____ To: _____
 Full-time _____ Part-time _____ Voluntary _____ Military Service _____
 Title or duties: _____
 Name you were known by: _____
 Name of supervisor: _____
 Names of co-workers: (1) _____
 (2) _____
 (3) _____
 Reason for leaving: _____

UNEMPLOYED FROM _____ TO _____

NAME AND ADDRESS OF EMPLOYER: _____

 Telephone _____

Dates of employment: From: _____ To: _____
 Full-time _____ Part-time _____ Voluntary _____ Military Service _____
 Title or duties: _____
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 Name of supervisor: _____
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UNEMPLOYED FROM _____ TO _____



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EXPERIENCE AND EMPLOYMENT (Continued):

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Telephone _____

Dates of employment: From: _____ To: _____

Full-time _____ Part-time _____ Voluntary _____ Military Service _____

Title or duties: _____

Name you were known by: _____

Name of supervisor: _____

Names of co-workers: (1) _____

(2) _____

(3) _____

Reason for leaving: _____

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Names of co-workers: (1) _____

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Name of supervisor: _____

Names of co-workers: (1) _____

(2) _____

(3) _____

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UNEMPLOYED FROM _____ TO _____



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FINANCIAL (Optional)

The management of personal finances is relevant to an individual's qualifications for a position with a law enforcement agency. The behavior exhibited in meeting your financial obligations will be reviewed. A credit reporting agency may be contacted for a report of your credit history.

22. Have you ever filed for or declared bankruptcy or filed for the Wage Earner's Plan?

YES ____ **NO** ____ If "YES", please give details to include when, where, and why.

23. Within the last seven (7) years, have any of your bills ever been turned over to a collection agency?

YES ____ **NO** ____ If "YES", please give details to include when, firms involved and circumstances.

24. Within the last seven (7) years, have you ever had purchased goods repossessed?

YES ____ **NO** ____ If "YES", please give details to include when, firms involved, and circumstances.



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LEGAL (Continued):

28. As an adult, have you ever been placed on probation by any court?

YES ____ **NO** ____ If "**YES**", please give details to include when, where, and why.

29. Please list any other crimes you have committed, **REGARDLESS** of whether stopped, arrested, and/or convicted, to include what, when, where, how, and why.

30. Are you now or have you ever been involved as a defendant in any civil court action?

YES ____ **NO** ____ If "**YES**", please give details to include when, where, name of court and circumstances.



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MOTOR VEHICLE OPERATION (Continued):

35. Please list all traffic citations you have received as an adult (after reaching the age of 18). **Exclude parking citations.**

Nature of Violation	Location (City, State)	Approximate date	Disposition

36. Please list all motor vehicle accidents in which you have been involved as a driver within the past seven (7) years.

Date	Location (City, State)	Investigating Agency	Injury or Non-Injury?

37. If there is anything you wish to discuss about your driving record which has not already been covered in the preceding sections, please explain here.



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MOTOR VEHICLE OPERATION (Continued):

38. Please list all vehicles registered to you and/or your spouse.

Year	Make	Model	License Number	Vehicle ID Number (VIN)

39. Nebraska Law requires that operators and owners of motor vehicles be covered by automobile liability insurance or possess a Certificate of Self Insurance with the Department of Motor Vehicles. Therefore, please list the current liability insurance coverage that you have on your motor vehicles.

Company	Address	Policy Number	Expiration Date

40. Have you ever been refused auto insurance for any reason other than failure to pay a premium?
YES ___ **NO** ___ If “YES”, please explain, including the company name, date, and reason.



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GENERAL INFORMATION

41. Are you now, or have you ever been a member of any foreign or domestic organization, association, movement, or group of persons that is, or was, totalitarian, fascist, communist, or subversive in nature, or which has adopted or expressed a policy of advocating or approving of the commission of acts of force or violence as a means to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means?
YES ____ **NO** ____ If “YES”, identify the organization and explain fully.

42. Have you ever applied for a permit to carry a concealed firearm or other weapon?

YES ____ **NO** ____ Was the permit granted? _____ Date issued _____

Name of Law Enforcement Agency _____

Purpose for permit _____

43. Are you willing to work all hours of the day, all days of the week, holidays, and overtime when assigned? **YES** ____ **NO** ____

44. If the necessity arose in the course of your employment to use deadly force on a human being, would you have any reluctance to do so? **YES** ____ **NO** ____



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GENERAL INFORMATION (Continued):

45. Do you have anything in your background that may disqualify you from becoming a Law Enforcement Officer in the State of Nebraska? YES ____ NO ____ If "YES", please explain.

DRUG USE QUESTIONNAIRE:

46. Have you used, tried, experimented, or in any way introduced into your body by any means:

DRUG	YES	NO	DATE FIRST USED	DATE LAST USED	USED ONCE
Marijuana					
Hashish, Hashish Oil					
Cocaine					
Crack, Rock, Ice					
Barbiturates, Hypnotics, or "Downers"					
Amphetamines (Cross-tops, Whites, Bennies, "Uppers")					
Methamphetamines (Speed, Crank)					
LSD or other Hallucinogens					
PCP (Angel Dust, Sperm)					
Heroin or other Opiates					
Steroids					
Pharmaceutical drugs not prescribed for you					



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DRUG USE QUESTIONNAIRE (Continued):

QUESTIONNAIRE	YES	NO
Is there any other illegal drug, narcotic or controlled substance not listed above that you have introduced into your body?		
Have you introduced into your body a substance which you thought was an illegal drug and then found out that it was not?		
Have you ever injected an illegal drug into your body?		
Have you ever sold any illegal drug?		
Have you ever purchased any drug, narcotic or controlled substance other than by a doctor's prescription?		
Have you ever participated in the manufacturing, cultivation, or production of any illegal drug, narcotic, or controlled substance?		
Have you ever acted as a courier by transporting, any illegal drug, narcotic or controlled substance?		
Have you ever acted as a middle man, go-between, or "done a favor for a friend" by becoming involved in any illegal drug transaction?		
Have you ever told anyone where to purchase illegal drugs?		
Have you ever temporarily stored or "held" any illegal drug, narcotic, or controlled substance?		
Have you ever had illegal drugs in your possession while at work?		
Have you ever bought or sold any illegal drug at work?		
Are any illegal drugs presently in your home or car?		

47. Explain any "YES" answer to the "Drug Use Questionnaire" in detail below, to include when, where, what kind of drug, how taken and circumstances. (Continue on back if needed)



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DRUG USE QUESTIONNAIRE (Continued):

48. Please complete this page **in your own handwriting**.

QUESTIONS: “Why do you want this job? How do you think it will benefit you?”
(Limit essay answer to this page only)

Lined area for handwritten response, overlaid with a large, semi-transparent Gordon Police Department badge. The badge features an eagle with wings spread, a shield on its chest, and the text 'GORDON POLICE' and 'LAW & ORDER JUSTICE'.

Signature _____ Date _____



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OPTIONAL INFORMATION

49. List organizations, clubs, professional societies, or other associations of which you are, or have been a member (please include the name of the group, the city and state, and your present status or position in the group).

50. What are your personal hobbies? (What do you like to do during the times that you are not at work?) Please include any special skills or qualifications that might be useful in the position for which you've applied.

51. List the magazines and newspapers to which you currently subscribe:

52. List any identifying marks, scars, tattoos, burns or birthmarks:
