

Memphis Police Department



Police Officer and Police Service Technician Application Packet

W.W. Herenton
Mayor of Memphis

James H. Bolden
Director of Police

Memphis Police Department Personal History Statement

Please Read: Answer each question on this form. Information must be **HANDWRITTEN AND PRINTED IN BLACK INK (DO NOT TYPE)**. If additional information must be submitted in response to a specific question, please submit this information on additional sheets of 8 ½” x 11” paper (**NO SCRAP SHEETS**) and attach them to this form. Precede each answer with the number and letter of the referenced section. **DO NOT MISSTATE OR OMIT ANY FACTS**, as all information is verified. **ACCURACY IS ESSENTIAL. ANY FALSE STATEMENTS OR INFORMATION KNOWINGLY OMITTED IN THIS QUESTIONNAIRE IS JUST CAUSE FOR DENYING OR TERMINATING YOUR APPLICATION.** There are to be no **UNKNOWN** or **UNANSWERED** questions when this form is completed and turned in. If a Question or the information requested does not apply, indicate this by using the symbol N/A (not applicable). Should this questionnaire be **UNSATISFACTORILY FILLED OUT**, you will be rejected from further consideration.

When the Personal History Statement is turned in, the following support documents **MUST ALSO BE TURNED IN**:

1. A Certified copy of your Birth Certificate for us to witness, and photo copy for us to retain
2. Your original Driver’s License for us to witness, and a photo copy for us to retain
3. Your original Military DD214 Member 2 (including character of discharge Section), and any other discharge document(s), if applicable, for us to witness
And a copy for us to retain
4. Active Reserves who currently attend Military Drills must submit a Military Letter of Good Standing. This letter can be obtained from a staff member Upon receipt of your Application Packet. The applicant must also submit all Original DD214 discharge documents as soon as they become available to the Applicant.
5. Applicants who have previously served in the Active Reserves **MUST** submit Copy of their discharge papers, showing character of discharge from the Reserve Unit.
6. All PST applicants must submit transcripts from ALL colleges attended. All PST Applicants under the age of twenty-one (21) **MUST** provide their ACT/SAT scores.

FAILURE TO TURN IN THESE DOCUMENTS WILL RESULT IN YOUR APPLICATION BEING REJECTED BY THE MEMPHIS POLICE DEPARTMENT.

I hereby certify that I have read and understand all of the above stated information.

Signature _____ Date _____

This packet must be **HANDWRITTEN IN BLACK INK (DO NOT TYPE)**.

****Please Print** If this application packet is NOT LEGIBLE, IT WILL NOT BE ACCEPTED**

1. PERSONAL HISTORY

Date _____ Position Applied For _____

A. _____
Full Name (Last) (First) (Middle) Sex/Race Date of Birth

B. _____
Current Street Address Apt. # City State Zip Code

C. _____
Home Phone Work Phone Cell Phone Pager Number Work Hours Days Off

D. _____
Name and phone number of a neighbor or relative with whom you are in regular contact, where a message can be left for you.

E. Are you a United States Citizen? _____ Yes _____ No

Social Security Number Birthplace City State County

F. List any maiden name or any other names that you have ever used, including all married names or Nicknames, etc. _____

G. Marital Status _____ Single _____ Married _____ Divorced _____ Separated _____ Widowed

H. Driver's License _____
State Number Type or Classification

Expiration Date Conditions (Corrective Lens, etc.)

2. FAMILY HISTORY

A. _____
Full Name of Present Spouse Maiden Name Age Date of Birth

B. _____
Present Employment of Spouse Address (City/State) Phone Number

C. _____
Full Name of Former Spouse(s) Maiden Name Age Date of Birth

Address (City/State) of **Former** Spouse(s)

D. List ALL Children and Step-Children:

	Full Name	Address	Phone Number	Age	Date of Birth
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____

E. List separately, Mother, Father, Step-Mother, and Step-Father:

1.

Full Name of Father	Age	Date of Birth
_____	_____	_____

Home Address (City/State/Zip)	Phone Number
_____	_____

2.

Full Name of Mother	Age	Date of Birth
_____	_____	_____

Home Address (City/State/Zip)	Phone Number
_____	_____

3.

Full Name of Step-Mother	Age	Date of Birth
_____	_____	_____

Home Address (City/State/Zip)	Phone Number
_____	_____

4.

Full Name of Step-Father	Age	Date of Birth
_____	_____	_____

Home Address (City/State/Zip)	Phone Number
_____	_____

5. List all persons who reside at your present residence:

_____	Age	Date of Birth
Full Name		
_____	Age	Date of Birth
Full Name		
_____	Age	Date of Birth
Full Name		
_____	Age	Date of Birth
Full Name		

5. EMPLOYMENT

On the following pages you will find employment reference sheets. It is very important that employment information be accurate.

Please list your **ENTIRE** employment history.

Include **ALL PART-TIME, TEMPORARY, and SEASONAL EMPLOYMENT** regardless of Time employed.

IF UNEMPLOYED FOR ANY LENGTH OF TIME, LIST DATES OF UNEMPLOYMENT

BEGIN WITH YOUR CURRENT EMPLOYMENT, OR MOST RECENT JOB, AND WORK BACKWARDS.

Employment history must cover from **HIGH SCHOOL GRADUATION TO PRESENT.**

LIST ALL AREA CODES AND ZIP CODES

MAKE SURE THAT ALL ADDRESSES AND PHONE NUMBERS ARE COMPLETE AND ACCURATE.

If additional employment reference sheets are needed, please make photocopies prior to filling out any forms.

6. EMPLOYMENT TERMINATION

A. Have you ever been dismissed, fired, or asked to resign from any employment or position you Have held, knowing that you would be fired if you did not resign?

_____ YES _____ NO If yes, explain below:

TERMINATIONS:

1 Company Name _____

Street address _____

Dates of Employment: From _____ To _____

Position _____ Supervisor _____

Phone Number () _____

Termination #1

EXPLAIN IN DETAIL CIRCUMSTANCES OF TERMINATION:

*** ANY ADDITIONAL TERMINATIONS PLEASE USE A SEPARATE SHEET AND ATTACH.**

Employment Reference Sheet

MAY WE CONTACT YOUR CURRENT EMPLOYER?

_____ YES _____ NO

- If the response is "NO" you will be required to provide proof of employment and dates of employment.
- You may also be required to provide proof and dates of any previous employment, including any periods of self-employment and unemployment.

Name of Employer or Business: _____

Street Address: _____ City _____ State _____ Zip _____

Date of Employment: From: _____ To: _____ Full time ___ Part Time _____

Phone Number: (_____) _____ Supervisor: _____

Position: _____ Work Duties: _____

Reason for Leaving (explain in detail): _____

Name of Employer or Business: _____

Street Address: _____ City _____ State _____ Zip _____

Date of Employment: From: _____ To: _____ Full Time ___ Part Time _____

Phone Number: (_____) _____ Supervisor: _____

Position: _____ Work Duties: _____

Reason for Leaving (explain in detail): _____

Name of Employer or Business: _____

Street Address: _____ City _____ State _____ Zip _____

Date of Employment: From: _____ To: _____ Full Time ___ Part Time _____

Phone Number: (_____) _____ Supervisor: _____

Positions: _____ Work Duties: _____

Reason for Leaving (explain in detail): _____

Employment Reference Sheet

Name of Employer or Business: _____

Street Address: _____ City: _____ State: _____ Zip _____

Date of Employment: From: _____ To: _____ Full Time ___ Part Time ___

Phone Number (_____) _____ Supervisor: _____

Position: _____ Work Duties: _____

Reason for Leaving (explain in detail) _____

Name of Employer or Business: _____

Street Address: _____ City: _____ State: _____ Zip _____

Date of Employment: From: _____ To: _____ Full Time ___ Part Time ___

Phone Number (_____) _____ Supervisor: _____

Position: _____ Work Duties: _____

Reason for Leaving (explain in detail): _____

Name of Employer or Business: _____

Street Address: _____ City: _____ State: _____ Zip _____

Dates of Employment: From: _____ To: _____ Full Time ___ Part Time ___

Phone Number (_____) _____ Supervisor: _____

Position: _____ Work Duties: _____

Reason for Leaving (explain in detail): _____

**IF ADDITIONAL EMPLOYMENT SHEETS ARE NEEDED, PLEASE
MAKE PHOTOCOPIES PRIOR TO FILLING OUT ANY FORMS.**

7. VEHICLE INFORMATION

A. List all vehicles that you own and/or drive for personal use. (Include vehicle belonging to parents Or others with whom you reside.)

Year	Make	Model	Color	Auto Tag Number	State	Own/Buying

8. DRUG HISTORY

A. Are you currently using any kinds of drugs or controlled substances not prescribed by a Physician?

_____ Yes _____ No If yes, explain: _____

B. Drug/Narcotic Information (Explain any "YES" answer in "Comments" section)

YES	NO	
_____	_____	1. Have you ever tried, used, puffed, experimented, taken orally or injected any drug or narcotic?
_____	_____	2. Have you ever tried or used marijuana?____If yes, how many times have you tried____, puffed____, or used marijuana_____?
_____	_____	3. Have you ever tried or used hashish?
_____	_____	4. Have you ever tried or used heroin?
_____	_____	5. Have you ever tried or used cocaine?
_____	_____	6. Have you ever tried or used LSD or any other hallucinogen?
_____	_____	7. Have you ever tried or used speed, amphetamine, ecstasy, or methphetamines?
_____	_____	8. Have you ever tried or used downers, barbiturates, or mandrax?
_____	_____	9. Have you ever used any prescription drugs not intended for you?
_____	_____	10. Have you ever used anabolic steroids?
_____	_____	11. Have you ever tried or used any other illegal drug or narcotic?
_____	_____	12. Have you ever sold marijuana?
_____	_____	13. Have you ever sold any illegal drugs or narcotics?
_____	_____	14. Have you ever been present when others were using marijuana?
_____	_____	15. Have you ever been present when others were using illegal drugs or narcotics?
_____	_____	16. Have you ever altered a prescription given to you by a doctor?
_____	_____	17. Have you ever taken a substance not knowing what it was?
_____	_____	18. Have you ever inhaled paint, gases, glues, or other abusable chemicals?
_____	_____	19. Have you ever obtained a drug from an altered prescription?

Comments _____

9. MILITARY RECORD

- A. Have you ever been on active duty in the Armed Forces of the United States?
_____ YES _____ NO **If yes:**
- B. Branch of Military Service _____
- C. Type of Discharge _____ **If other than HONORABLE , explain:**

- D. Dates of Active Duty (Month, Day, and Year) FROM _____ TO _____
- E. Have you ever been, or are you currently, a member of a **Reserve Unit** _____ **YES** _____ **NO**

If yes, Branch _____ Ready _____ Standby/RR _____
Date of Discharge: _____ Type of Discharge _____

- F. Are you currently active in the military? _____ YES _____ NO
If yes, what is your anticipated release date _____
- G. If you were in the military, were you ever court-martialed? _____ YES _____ NO
If yes, explain: _____

Did you ever have ANY type of disciplinary action taken against you while in the military (this includes Article 15, Captain’s Mast, etc.)? _____ YES _____ NO

If YES explain: _____

10. COURT RECORD

- A. Have you ever been arrested as an **adult or a juvenile** (arrest is defined as being taken into custody and transported to a jail/detention facility) or charged with a crime as an adult or a juvenile (charged with a crime means issued a misdemeanor citation, a juvenile summons, an adult summons, arrested on a warrant, or indicted by a grand jury)? _____ YES _____ NO
- B.** List **ALL** times you have been arrested or had criminal charges placed against you, including a detailed explanation of the circumstances (use additional sheets if needed). You must list **ALL** arrests or charges even if they were dropped or did not result in a conviction and even if the public records of the arrest or charges were expunged and erased and even if you have been told that you do not have to admit to arrests or charges which have been expunged or erased. An independent investigation of your criminal history will be conducted and, **if arrests or charges are found which you did not report, your application can be rejected due to untruthfulness.**

Date	City/State	Charges	Circumstances	Disposition
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- C. Have you ever, as an **adult or a juvenile**, been convicted of or entered a guilty plea or a plea of nolo contendere to any criminal charge? This question includes ALL criminal offenses including felonies, misdemeanors, misdemeanor citations, traffic citations, city ordinance summons, and juvenile summons _____ YES _____ NO

D. List below ALL adult and juvenile convictions, guilty pleas and pleas of nolo contendere with a disposition for each. You must list ALL convictions and pleas even if the conviction or plea was later expunged or erased and even if you were told that you did not have to admit to the conviction or plea since it had been expunged or erased. Failure to list a conviction or plea, which is later uncovered during the background investigation, can result in your application being rejected for untruthfulness.

ARRESTS:

Date	City/State	Charges	Circumstances	Disposition

E. Has your Driver’s License ever been suspended, cancelled, or revoked? YES NO
 If yes, please explain: _____

Have you ever had a Driver’s License in any other state? YES NO
 If yes, which state(s), list license number if known: _____

TRAFFIC TICKETS:

Date	City/State	Charges	Circumstances	Disposition

11. MISCELLANEOUS

A. Based on your religion, are there any special considerations you might request as to the handling of a firearm or days off? Yes No
 If yes explain _____

B. List all relatives employed by the City of Memphis Government, including the Memphis Police Department. _____

C. Are you currently, or have you ever been, an employee of the City of Memphis or Shelby County Government? Yes No. If yes, list what agency, dates of employment, position, and designate whether or not you were a permanent employee, temporary employee, reserve, or volunteer. _____

D. Have you previously submitted an application for employment or tested for the **Memphis Police Department or any other law enforcement agency?**
If Yes list below:

E. Do you currently possess a Special Officer's (Security Guard) Commission? ___ Yes ___ No
If yes, list agency issuing commission: _____

F. Do you currently possess a valid gun permit? _____ Yes _____ No

G. Have you ever submitted to a polygraph test? ___ Yes _____ No If yes, explain: _____

H. Are you presently involved or have knowledge that you might become involved in any criminal
Or civil lawsuits? _____ Yes _____ No. If yes, explain: _____

12. REFERENCES:

- A. List three (3) references who are responsible adults or reputable standing in their community, Who you HAVE KNOWN WELL FOR AT LEAST THREE YEARS, AND WHO KNOW YOU. References CANNOT be relatives, former employers, or present employers. You MUST include their full names, COMPLETE home address and business address (include city, state, zip code), and correct home or business telephone number (including area code) were *they may be contacted Monday through Friday during normal business hours:*

1.

Full Name (Last, First, Middle)			Years Known
<hr/>			
Current Street Address Apt. #	City	State	Zip Code
<hr/>			
Employment Address	City	State	Zip Code
<hr/>			
Home Phone	Work Phone	Cell Phone	Pager Number

2.

Full Name (Last, First, Middle)			Years Known
<hr/>			
Current Street Address Apt #	City	State	Zip Code
<hr/>			
Employment Address	City	State	Zip Code
<hr/>			
Home Phone	Work Phone	Cell Phone	Pager

3.

Full Name (Last, First, Middle)			Years Known
<hr/>			
Current Street Address Apt. #	City	State	Zip Code
<hr/>			
Employment Address	City	State	Zip Code
<hr/>			
Home Phone	Work Phone	Cell Phone	Pager

13. APPLICATION PROCESS

A. If you are applying for the position of Police Officer, and fail to meet the minimum requirements, Of age and/or college/experience, do you want to be considered for the position of Police Service Technician (PST)?

_____YES _____NO

B. If you are applying for the position of a Police Service Technician (PST) and we discover that You currently qualify for the position of Police Officer, do you want to be considered for the position of Police Officer?

_____YES _____NO

I hereby certify that ALL statements made by me on this application are TRUE and COMPLETE to the best of my knowledge. I further certify that this application contains no willful misrepresentations or falsifications. I am aware that should any investigation at any time reveal or disclose any such misrepresentations or falsifications, my application may be rejected and my name may be removed from the employment list and I may be disqualified from applying in the future for positions with the City of Memphis, or my employment with the City of Memphis may be terminated. If any information changes on your application, you MUST keep this office updated. This includes jobs, addresses, phone numbers, any contact with law enforcement officers and any other important information.

DO NOT WRITE BELOW THIS DOUBLE LINE

Signature: _____ Date: _____

Received by: _____ Date: _____

FOR EMPLOYMENT TEAM USE ONLY

RIGHT THUMB PRINT



**MEMPHIS POLICE DEPARTMENT EMPLOYMENT TEAM
AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION**

I, _____ do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the City of Memphis Police Department, whether the said records are public, private, or confidential in nature.

The intent of this authorization is to **give my consent for full and complete disclosure** of the records of educational institutions; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records; complaints or grievances filed by or against me; the records and recollections of attorneys at law or of other counsel, whether representing me or another person in any case, whether criminal or civil, in which I presently have, or have had an interest. This waiver also gives authority to release law enforcement or criminal records or information from a law enforcement agency.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization, will be considered in determining my suitability for employment by the City of Memphis Police Department. I also certify that any person(s) who may provide such information concerning me shall not be held accountable for providing said information, and **I do hereby release said person(s) from any and all liability** which may be incurred as a result of providing such information.

A copy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

Signature (include maiden name)

Address _____ City _____ State _____ Zip _____

Phone Number _____ Date of Birth _____ Social Security Number _____

****This form MUST BE NOTARIZED by a notary before your application will be accepted. THIS FORM MUST BE SIGNED IN FRONT OF THE NOTARY.**

Sworn to and Subscribed before me this _____ day of _____, 20_____.

State of _____ County of _____

NOTARY My Commission Expires: _____