

# HEMOCROFT POLICE DEPARTMENT

## LAW ENFORCEMENT OFFICER ESSENTIAL JOB FUNCTIONS

Incumbent perform duties related to law enforcement such as preventing crimes, investigating suspicious activity, apprehending violators, assisting persons in trouble, directing vehicular and pedestrian traffic, and enforcing traffic laws.

1. Affect 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.
2. Prepare investigative and other reports, including sketches, using appropriate grammar, symbols and mathematical computations.
3. 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.
4. 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 caused by factors such as fog, smoke, rain, ice and snow.
5. Communicate effectively and coherently over law enforcement radio channels while initiating and responding to radio communications.
6. Gather information in criminal investigations by interviewing and obtaining the statements of victims, witnesses, suspects and confidential informers.
7. Pursue fleeing suspects, and perform rescue operations that may involve quickly entering and exiting law enforcement patrol vehicles; lifting, carrying and dragging heavy objects, climbing over and pulling up one's self 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.
8. 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.
9. Perform searches of people, vehicles, buildings and large outdoor areas that may involve feeling and detecting objects, walking for long periods of time, detaining people and stopping suspicious vehicles and persons.
10. Conduct visual and audio surveillance for extended periods of time.
11. 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.
12. Effectively communicate with people, including juveniles, by giving information and directions, mediating disputes and advising of rights and processes.
13. Demonstrate communication skills in court and other formal settings.
14. Detect and collect evidence and substances that provide the basis of criminal offenses and infractions and that indicate the presence of dangerous conditions.

15. Endure verbal and mental abuse when confronted with the hostile views and opinions of suspects and other people encountered in an antagonistic environment.
16. 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.
17. Process and transport prisoners and committed mental patients using handcuffs and other appropriate restraints.
18. Put on and operate a gas mask in situations where chemical munitions are being deployed.
19. Extinguish small fires by using a fire extinguisher and other appropriate means.
20. Read and comprehend legal and non-legal documents including the preparation and processing of such documents as citations, affidavits and warrants.
21. Process arrested suspects to include taking their photographs and obtaining a legible set of inked fingerprint impressions.
22. Maintain uniforms, equipment and weapons.
23. Perform related duties as assigned.

#### REQUIRED KNOWLEDGE, SKILLS AND ABILITIES

Extensive knowledge of law enforcement procedures and methods including patrol, traffic, officer safety, investigation, report writing, and data systems.

Extensive knowledge of criminal law procedures such as search and seizure, arrest, interrogation, confession, evidence, crime scene protection, due process, and court procedure.

Extensive knowledge of criminal and traffic law.

Working knowledge of social service agencies in the community.

Working knowledge of business, educational, civic, and social organizations in assigned area.

Working knowledge of basic emergency medical treatment procedures, and ability to apply those procedures safely to others.

Extensive knowledge of streets and alleys lay-out in assigned area, and working knowledge of streets and highway lay-out in community and surrounding area.

Ability to stand or sit for long periods of time, sometimes in extreme weather conditions.

Ability to operate vehicle safely even at high speeds under less than ideal conditions or weather.

Ability to physically protect one's self and to restrain others.

Ability to lift and carry unconscious persons short distances.

Ability to pursue suspects by running, climbing stairs, forcing entry, scaling walls and jumping fences, and ability to sustain physical effort in situations of personal danger or danger to others.

Ability to use weapons accurately and safely.

Ability to use a two-way radio

Ability to communicate with public in situations that are highly emotional or hostile.

Ability to observe and report observations accurately and in detail.

Ability to establish rapport with individuals and groups of differing ages, races and values.

Knowledge of Departmental Rules and Regulations, and Departmental General Orders.

Ability to respond appropriately to emergencies from off-duty status.

#### OTHER REQUIREMENTS

Maintain telephone at residence and inform Department of current telephone number.

Meet training requirements prescribed by Indiana law.

NOTE: The successful applicant must be able to perform ALL of the above essential job functions of an inexperienced law enforcement officer, unassisted, and at a pace and level of performance consistent with the actual job performance requirements. This requires a high level of physical ability to include vision, hearing, speaking, flexibility and strength.

#### PERSONAL CHARACTERISTICS

Since law enforcement officers are required to enforce the law, and they are exposed to certain temptations to show favoritism, corruption or unlawful monetary gain, it is a *business necessity* that officers exhibit a history and characteristics of honesty, reliability, ability to manage personal finances, interpersonal skill, and integrity.

Additionally, law enforcement officers are frequently placed in a position of physical and mental stress. Applicants posing a substantial risk of injury to themselves, other officers and the public are at a substantial disadvantage in the hiring process.

# PROCEDURES FOR APPLYING AND BEING ACCEPTED TO THE HOMECROFT POLICE DEPARTMENT

The applicant will report in person to apply for a position with the Homecroft Police Department. The Chief of Police or his/her designee will coordinate handing out the application via appointment if necessary. He or she must be at least twenty-one (21) years of age, must have a high school diploma or a G.E.D.; and must have eyesight not to exceed 20/50 un-corrected and be corrected to 20/20. The applicant will coordinate the return of the application within 2 weeks of receiving it unless he or she has difficulty in obtaining the required documents to submit with the application. In this case, an extension may be requested.

When the application is brought in, it is turned over to the recruitment and hiring board. Then a series of formalized steps will be completed. The current order is Application, initial background, oral interview, written test and physical agility test, detailed background investigation, psychological and physical examination and final review by the hiring and recruitment board.

Upon all phases of the process completed a hiring order shall be established and this list will be forwarded to the Chief of Police for usage for one calendar year.

~~APPLICANT INFORMATION~~

## General Informational Questions

1. Why do you want to become an officer?

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2. Are you at least twenty-one (21) years of age?

Yes  No

3. Are you a US Citizen?

Yes  No

4. Do you have a high school diploma or GED

Yes  No

5. Do you have a valid driver's license?

Yes  No

6. Has your driver's license ever been suspended or revoked?

Yes  No

If so, was the revocation due to a traffic offense? If so, when and why?

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7. Who suggested that you apply for a position here?

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8. Are you applying to other agencies?

Yes  No If so which ones? \_\_\_\_\_

9. Do you know any law enforcement officers? If so, who and with what department?

Yes  No \_\_\_\_\_

10. Do you have relatives employed by this agency?

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11. Have you ever been denied employment by a criminal justice agency? Who and when?

Yes  No \_\_\_\_\_

12. Do you speak a foreign language and to what proficiency?

Yes  No \_\_\_\_\_

13. Are you a current certified law enforcement officer in the State of Indiana?

Yes  No

14. Have you committed an illegal act in the last five years, and if so, what?

Yes  No

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15. Have you ever been arrested, detained, or charged with a crime?

XXXXXXXXXX^• [

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16. Have you ever been convicted of a crime?

XXXXXXXXXX^• [

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17. Have you ever been convicted of a felony (a crime for which the punishment is more than one year)?

XXXXXXXXXX^• [

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18. Are you presently using illegal drugs?

Yes  No

19. Have you ever possessed or sold *any amount* of illegal drugs? When?

XXXXXXXXXX^• [

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20. Do you have any outstanding civil judgments against you?

Yes  No

21. Do you have relatives who have criminal convictions? For what?

XXXXXXXXXX^• [

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22. How often do you consume alcohol?

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23. Are you able and willing to work rotating shifts?

XXXXXXXXXX^• [

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24. Are you able and willing to wear a uniform?

XXXXXXXXXX^• [

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25. Are you able and willing to meet this department's standards?

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26. Are you willing to use deadly force if necessary to protect your life and that of another?

Yes  No

27. Are you able and willing to render emergency aid to trauma victims?

Yes  No

28. Are you able and willing to identify dead persons and to witness autopsies?

Yes  No

29. Are you able and willing to perform the essential job functions of the position for which you have applied?

Yes  No

NOTE: You may be required to demonstrate the ability to accomplish the essential job functions by performing various tasks.

30. With proper training and supervision, do you believe that you can perform ALL of the essential job functions of a law enforcement officer, unassisted and without delay?

Yes  No

31. Are you an honest person?

Yes  No

32. Are you reliable?

Yes  No

33. Are you able to manage your personal finances?

Yes  No

34. Are you good at communicating with all kinds of people?

Yes  No

35. Are you able to control your anger when insulted or threatened?

Yes  No

36. Are you able to function normally when placed under temporary or prolonged stress?

~~//////////~~  Yes  No

## Military Service

1. Have you been a member of the armed services?

Yes  No

2. If yes, when?

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3. If yes, what were your occupational specialties and assignments?

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4. Was your discharge Honorable?

Yes  No

5. Did you have any arrests or convictions under UCMJ?

Yes  No

6. Did you receive any disciplinary actions under UCMJ? If so, when?

Yes  No

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7. What special training did you receive in the armed services that would be relevant to this position?

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# HEMOCROFT POLICE DEPARTMENT

## CONDITIONAL OFFER OF PROBATIONARY EMPLOYMENT

NAME \_\_\_\_\_  
LAST FIRST MIDDLE

Is applying for the position of Police Officer with the Homecroft Police Department.

\_\_\_\_\_  
(Candidate's Address)

I \_\_\_\_\_, a candidate for Police Officer with the  
NAME OF CANDIDATE  
Homecroft Police Department; have received a conditional offer of employment for that position.

I understand that the offer is conditional on my successfully passing the statewide baseline medical examination as well as any local medical and mental examination requirements. If I do not pass these examinations and requirements, the offer of employment will be withdrawn.

I further understand that as a result of tests and examinations certain diseases or conditions may be identified. These diseases or conditions, if identified, will prevent me from receiving certain Class 3 impairment benefits for a period of four (4) years, and will disqualify me from receiving impairment benefits throughout my employment if the disability is related in any way to the identified disease or condition.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF CANDIDATE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF POLICE CHIEF

# Non Certified Application



## HEMOCROFT POLICE DEPARTMENT

P. O. Box 47123  
Indianapolis, Indiana 46227  
(4925 South Shelby St #500)  
(317) 783-4400

NAME (Print) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Contact Telephone Numbers: Home \_\_\_\_\_, Cell \_\_\_\_\_, Pager \_\_\_\_\_

E-Mail: \_\_\_\_\_

APPLICANT INFORMATION SUMMARY

## STATEMENT OF EQUAL EMPLOYMENT OPPORTUNITY POLICY

The Homecroft Police Department is an Equal Opportunity Employer and does not unlawfully discriminate in hiring or employment practices on the basis of race, color, sex, religion, national origin or handicap as defined by law, or age except when such constitutes a bona fide occupational qualification necessary for proper and efficient administration.

*No question on this report is intended to secure information to be used for unlawful discrimination.*

### **APPLICANT CHECK LIST**

Please use the following list as a guide in completing your application.

***Use copies only – not originals.***

- Birth Certificate (copy only)
- Marriage Certificate if applicable (copy only)
- Divorce Decree if applicable (copy only)
- High School and College transcripts and diplomas (copies only)
- DD 214 Form if applicable (copy only)
- Driver's License (copy only)
- Two photographs: one full length and one head & shoulders
- Full names and addresses of family members: (Mother, Father, Step-parents, Guardians, Brothers, Sisters, Spouse, Children, In-laws, Ex-spouses.)
- Addresses and dates pertaining to all prior residences in the last ten (10) years.
- Information pertaining to all present and former employers. (Dates, Names, Addresses and Phone Numbers of Company.)
- Selective Service Number, Dates of Active Duty, Serial Number and Reserve Obligation.
- Type, Expiration date, Number, and restrictions relating to Driver's License.
- Dates, Locations, Descriptions of any vehicle accidents in the last three (3) years. Note any Citations.
- Date, place, charge and disposition of any arrests (Adult & Juvenile) local and non-local.
- Information relating to five (5) personal references. (Name, address, day-time telephone number, occupation, length of time known, and ZIP codes.) References shall not include relatives and/or former and current employers.
- Double check for ZIP codes.
- Letter in your own writing to the Chief of Police stating "Why I want to be a Police Officer." If you are currently an officer state why you've stayed in this career.
- Have the application returned to: Homecroft Police Department (address above) within five (14) days. If extenuating circumstances arise, permission may be granted by the Chief of Police to extend the five (5) day period for return of your application.
- On the outside of the envelope please write your name, address and telephone number.

**Comments:** Return completed application along with all supporting documents to: Chief John Ryan, P.O. Box 47123, Indianapolis, Indiana 46247

It is the policy of the Homeroft Police Department to recruit qualified individuals that will make the best police officers from all segments of the surrounding community. In pursuing this goal, a background investigation of each applicant is conducted with respect to factors that may have a bearing upon the applicant's job performance or tend to measure job capability as a member of the Homeroft Police Department.

Members of the Police Department are public servants and must present a good image of the Police Department. Police Officers are in situations in which theft could easily occur; therefore they must be of high integrity and character. Police Officers work long hours with their squad, and as a result, they should possess personal habits that make them compatible with the other members of the force. A police officer's job often involves critical and dangerous situations and they should not be prone to external pressures that would affect his or her ability to perform the job.

Accordingly, the following items and the circumstances surrounding such items are reviewed:

1. Contents and completeness of employment application.
2. Driver's responsibility. (Copy of driving summary is furnished by the Indiana Bureau of Motor Vehicles.)
3. Former employment.
4. Criminal record of applicant pursuant to policy statement on employment of ex-offenders.
5. References.
6. Personal history and character of applicant.

A negative finding on any one of these factors shall not be an automatic reason for rejection of an applicant. Instead, the circumstances underlying such matters will be considered as they relate to the applicant's ability to perform the job of a police officer. Although it is impossible to state all relevant and material factors to a background investigation and to the applicant's being a qualified police officer, in each case, the Department will consider whether the applicant's background as set forth above will have a bearing on the applicant's job performance or tend to measure his or her job capability. The date and circumstances surrounding any negative finding in the background investigation; the requirements of the position as well as the applicant's other qualification will be considered.

The background phase of the hiring process shall be based upon objective factual findings and any required subjective determination shall be in accordance with the aforementioned policy and conducted in such a manner so as not to discriminate on the basis of race, creed, color, national origin, sex or age. The background investigation phase shall be reviewed periodically so that it does not result in unintended discriminatory selection of applicants.

THIS APPLICATION **MUST** BE FILLED OUT IN YOUR OWN HANDWRITING

**I. PERSONAL HISTORY**

Full Name: (Last, First, Middle) \_\_\_\_\_

Social Security Number: \_\_\_\_\_

List all other names you have used, including nicknames. If female, furnish maiden name. If you have ever used any last name other than your true name, during what period and under what circumstances were these names used? If you have ever legally changed your name, give date, place and court. (This information is being collected to assist the department in conducting a thorough background investigation, i.e. felony conviction check.)

\_\_\_\_\_  
\_\_\_\_\_

Birth Date (Month, Day, Year) \_\_\_\_\_

Birth Place (City & State) \_\_\_\_\_

Include a copy of your Birth Certificate. This will be used to verify your age for statutory requirements and for pension purposes.

Are you a U. S. Citizen? Yes  No

**II. FAMILY HISTORY**

List all family members (living or deceased) in the following order: Parents, step-parents, foster parents, guardians, brothers, sisters, spouse, children, in-laws, ex-spouses. Include copies of your marriage certificates and divorce decrees.

Relationship	Name	Present Address & ZIP Code (if living)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**III. RESIDENCES**

Present residence (number, street, city, county, state, ZIP code, telephone; if apartment, include name and location of complex) \_\_\_\_\_

List chronologically (most current first) all of your residences in the past ten (10) years. Include addresses while attending school if away from home and ALL military addresses including off-base locations. List towns or cities that are located in the immediate vicinity of military complexes. If apartment, include name and location of complex.

DATE FROM	TO	NUMBER	STREET	ADDRESS	CITY	STATE	ZIP

**IV. EDUCATION**

List all schools attended at the high school level and above. Include copies of all transcripts, diplomas and degrees.

NAME OF SCHOOL	YEARS ATTENDED	ADDRESS	DIPLOMA OR DEGREE
HIGH SCHOOL	FROM TO		
COLLEGES & UNIVERSITIES			
GRADUATE SCHOOL			
OTHER – VOCATIONAL, ETC.			

**V. EMPLOYMENT RECORD**

List chronologically (most current first) all former and current employers. Include full-time, part-time, and temporary or seasonal work, and all periods of unemployment. Make sure all phone numbers are correct including extension numbers. All the information of past and present employers must be filled-in. Do not leave any line empty. Attach additional sheets if necessary.

Employment Dates From _____ To _____
Name of Business _____
Address and Zip _____
Name of Supervisor _____ Telephone _____ Ext. _____
Position Held _____ Final Salary _____
Reason for Leaving _____

Employment Dates From _____ To _____
Name of Business _____
Address and Zip _____
Name of Supervisor _____ Telephone _____ Ext. _____
Position Held _____ Final Salary _____
Reason for Leaving _____

Employment Dates From _____ To _____
Name of Business _____
Address and Zip _____
Name of Supervisor _____ Telephone _____ Ext. _____
Position Held _____ Final Salary _____
Reason for Leaving _____

\_\_\_\_\_

Employment Dates From \_\_\_\_\_ To \_\_\_\_\_  
Name of Business \_\_\_\_\_  
Address and Zip \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ Telephone \_\_\_\_\_ Ext. \_\_\_\_\_  
Position Held \_\_\_\_\_ Final Salary \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**VI. MILITARY SERVICE**

- A. Are you registered for Selective Service?       Yes       No  
Selective Service Number: \_\_\_\_\_
- B. Have you ever served on active duty in the Armed Forces of the United States?  
 Yes     No  
Branch of Service: \_\_\_\_\_  
Active Duty Dates (Month-Day-Year) \_\_\_\_\_  
Serial Number \_\_\_\_\_ Type of Discharge \_\_\_\_\_
- C. Are you currently or have you ever been a member of any United States Armed Forces Reserve or National/State Guard Unit?     Yes       No  
If yes, what is your reserve obligation (if any) unit and location? (Address, City, State, Zip Code, Telephone Number)  
\_\_\_\_\_  
\_\_\_\_\_
- D. While in Military Service were you ever convicted of any offense civil or military?     Yes  
 No  
When?  
\_\_\_\_\_  
\_\_\_\_\_  
Explain:  
\_\_\_\_\_  
\_\_\_\_\_
- E. Attach a copy of your DD214



*No applicant will be automatically rejected because of a less than honorable discharge (except a dishonorable one). The discharge may be considered in connection with other information. If your discharge is less than honorable, explain on the supplemental page.*

**VIII. DRIVER'S RECORD**

A. List all vehicle operators' licenses you now hold or have held:

Type (Driver Chauffeur, etc.)	State of Issuance	License Number	Expiration Date	Restrictions

B. List all vehicle accidents you have had in the past three years:

Date	Location	Description	Did you receive a citation?

C. List all traffic citations you have received in the past three years:

Date	Location	Charge

D. Has your driver's license ever been suspended or revoked?     Yes    No  
If yes, explain:

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**IX. ARREST/FELONY CONVICTION RECORD**

- A. Have you ever been arrested or detained by a law enforcement agency? (No applicant will be automatically rejected because of an arrest record. This information is being obtained only to assist in completion of a background investigation.) If yes, provide date(s), place(s), and disposition(s) on supplemental page.     Yes             No

**X. SUBVERSIVE ORGANIZATION MEMBERSHIP**

- A. Are you now or have you ever been a member of any organization, association, movement, group or combination of persons that advocates the overthrow of our constitutional form of government, or that has adopted a policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States by unconstitutional means?     Yes     No
- B. Are you now or have you ever been affiliated with any organization of the type described above as an agent, official or employee?             Yes             No
- C. Are you now associating with, or have you ever associated with, any individuals (including relatives) who you know or have reason to believe are, or have been, members of any of the organizations identified above?     Yes             No
- D. Have you ever been engaged in any of the following activities or any organization of the type described above: contribution(s) to, attendance of, or participation in, any organizational, social or other activity of said organizations or of any projects sponsored by them: the sale, gift or distribution of any written, printed or other matter, prepared, reproduced or published by them or any of their agents or instrumentalities?     Yes     No

If you answered yes to any question above, describe the circumstances completely. If associated with any of the above organizations, specify the nature and extent of association with each, including office or position held. Also include dates, places and credentials now or formerly held. If associations have been with individuals who are members of these organizations, list the individual's names and the organizations with which they were or are affiliated.

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**XI. MEDICAL RECORD**

- A. Do you have a history of medical problems that would preclude you from completing a physical agility test?     Yes             No  
If yes, explain:

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B. How many days of work or school have you missed due to illness or injury during the last year? Briefly describe the nature of illness or injury.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**XII. REFERENCES**

List five current references other than relatives and former or current employers:

Name _____
Address & Zip Code _____
Occupation _____
Phone Number (During Day) _____ Years Known _____

Name _____
Address & Zip Code _____
Occupation _____
Phone Number (During Day) _____ Years Known _____

Name \_\_\_\_\_  
Address & Zip Code \_\_\_\_\_  
Occupation \_\_\_\_\_  
Phone Number (During Day) \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_  
Address & Zip Code \_\_\_\_\_  
Occupation \_\_\_\_\_  
Phone Number (During Day) \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_  
\_\_\_\_\_  
Address & Zip Code \_\_\_\_\_  
Occupation \_\_\_\_\_  
Phone Number (During Day) \_\_\_\_\_ Years Known \_\_\_\_\_

**XIII. ADDITIONAL**

Is there any information not mentioned on this report that may reflect upon your suitability to perform the duties you may be called upon to perform, or that might require further explanation?  
If so, explain

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**XIV. SUPPLEMENTAL PAGE (Attach other forms)**

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***RELEASE OF INFORMATION CONSENT***

I hereby authorize anyone of whom request is made to supply to the Homecroft Police Department any information concerning my background in connection with employment consideration. I hereby release all parties including, but not limited to, the Homecroft Police Department and my prior employers, from any and all liability for any damage that may result from their furnishing information concerning me. I understand that misrepresentation or omission of facts called-for on my employment application is cause for dismissal.

Date: \_\_\_\_\_

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Signature of Applicant

**XV. SIGNATURE**

*Read the following statement carefully.*

*If you have any questions, ask the interviewer **before** signing the form.*

I certify that the information contained in this form is correct and complete to the best of my knowledge. I realize that misrepresentation of facts is cause for rejection of my application, or dismissal after appointment. I understand that final employment is contingent upon satisfactory completion of all phases of the Applicant Screening Process.

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Signature of Applicant

Date of Signature

**XVI. REVIEW BY INTERVIEWER**

Reviewed by \_\_\_\_\_ Date Reviewed  
\_\_\_\_\_

Date Issued \_\_\_\_\_

Date Due \_\_\_\_\_

Date Returned \_\_\_\_\_