



Town of Hampden

Police Department
625 Main Street
Hampden, MA 01036

Chief of Police
Jeff W. Farnsworth

APPLICATION FOR EMPLOYMENT

Check Position Sought:

Regular Police _____ Reserve Police _____

1. These forms must be typewritten or printed in blue or black ink by the applicant himself/herself.
2. All questions must be answered, if applicable. If not applicable, indicate N/A.
3. Failure to answer any and all questions truthfully, accurately or completely shall result in the applicant's disqualification, or, if discovered after an individual is hired, termination from employment.
4. If the space provided is not sufficient for complete answers, or you wish to make additional comments, attach sheets the same size as these forms and indicate to which questions those sheets pertain.
5. You are applying for a responsible public safety position. It is essential that you follow instructions specifically as directed. Make sure all data and information are absolutely accurate.
6. If, after submitting this application, you become no longer interested in appointment, please notify the Chief of Police in a timely manner.
7. All applicant must submit the following documents with their application:
 - A. One certified copy of your High School Diploma or Equivalency Certificate.
 - B. One certified copy of your higher education diploma (if applicable.)
 - C. One certified copy of your birth certificate.
 - D. Writing Sample - Please submit with your application a handwritten (or printed) 150 word essay explaining why you want to be a police officer. You may also include in this essay other topic areas such as your career goals.
 - E. A Copy of your social security card.
 - F. A copy of your driver's license.
 - G. A copy of your current Pistol Permit/FID card.
 - H. A copy of police academy certifications held (Basic Recruit, Radar, FST, Reserve Academy certificate, etc.)
 - I. A copy of CPR/1st Responder Certifications.
8. A Criminal Offender Record Information check will be performed on each applicant who submits an application for employment with this police department.

I have read and understand the above instructions.

CANDIDATE NAME

SIGNATURE

DATE

This application will be held on file for a period of three years.

DATE RECEIVED: _____



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THE HAMPDEN POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER.

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, national origin, or disability. (As does the Americans with Disability Act.) Federal Law also prohibits some or all of the above stated discrimination as well as some additional types, such as discrimination based upon ancestry, sexual orientation, and marital status.

Questions that are labeled optional are up to you to answer. Although the information is useful in our examination of applicants, your decision not to answer any or all of the optional questions will not be held against you.



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Application and Personal History for the position of (check one):

Police Officer: _____ Reserve Officer: _____

I. PERSONAL HISTORY

1. FULL NAME: If no middle initial, enter, "NMI."

LAST NAME: _____ FIRST _____ MIDDLE _____

2. DATE OF BIRTH: ____/____/____ SOCIAL SECURITY #: ____/____/____

3. ADDRESS

STREET NAME AND NUMBER: _____

CITY/TOWN: _____ STATE: _____ ZIP: _____

APT/CONDO/UNIT # (IF APPLICABLE) : _____

4. OTHER NAMES USED: List any other names you have used (maiden names, alias, etc.)

NAME: _____ WHEN USED: _____

NAME: _____ WHEN USED: _____

NAME: _____ WHEN USED: _____

5. RESIDENTIAL INFORMATION

HOW LONG HAVE YOU LIVED AT YOUR CURRENT ADDRESS: _____

PHONE (HOME): _____ PHONE (BUSINESS) : _____

PHONE (CELLULAR): _____ EMAIL (OPTIONAL): _____

THE HAMPDEN POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER

6. NEIGHBOR NAME, ADDRESS, AND TELEPHONE NUMBER WHO CAN VERIFY RESIDENTIAL INFORMATION FROM BOX 5.

NAME: _____

ADDRESS: _____

PHONE: _____

7. PAST RESIDENTIAL INFORMATION: Please list every place that you have resided in within the past ten years. Include address while attending school, if you were away from home, and all military addresses. Please work backwards, starting from your current address.

From Month/Year	To Month/Year	Address	Apt #	City/Town	State	Zip	Landlord Name and Telephone Number

8. IDENTIFYING INFORMATION (OPTIONAL)

HEIGHT: _____ WEIGHT: _____

EYE COLOR: _____ HAIR COLOR: _____

MALE: _____ FEMALE: _____

9. FINANCIAL: Please list all credit cards for which you are responsible.

Card Name	Account Number	Current Balance

10. LIVING SITUATION

DO YOU OWN A HOME _____ RENT _____ LIVE WITH PARENTS _____

IF OTHER LIVING SITUATION, PLEASE ELABORATE _____

DO YOU OWN A HOME: (YES) _____ (NO) _____

IF YOU OWN A HOME, WHO IS THE MORTGAGE HOLDER _____

ADDRESS: _____ PHONE: _____

11. MISCELLANEOUS PERSONAL HISTORY QUESTIONS

A. ARE YOU LAWFULLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES

YES _____ NO _____

B. DO YOU PERSONALLY KNOW ANY POLICE OFFICERS WORKING IN THIS DEPARTMENT?

YES _____ NO _____

IF ANSWERED YES, PLEASE INDICATE RANK AND NAME OF OFFICER :

11. MISCELLANEOUS PERSONAL HISTORY QUESTIONS (CONT.)

C. ARE YOU WILLING TO WORK ANY SHIFT, INCLUDING FOR EXAMPLE, 11PM TO 7AM DURING THE WEEK AND HOLIDAYS IF REQUIRED.

YES _____ NO _____

IF YOU ANSWER WAS NO, PLEASE EXPLAIN: _____

D. IF YOUR APPLICATION IS CONSIDERED FAVORABLY, ON WHAT DATE CAN YOU START WORK? _____

E. DO YOU POSSESS A VALID DRIVERS LICENSE FROM THE COMMONWEALTH OF MASSACHUSETTS.

YES _____ NO _____

IF YES, WHAT IS YOUR DRIVERS LICENSE NUMBER: _____

F. HAS YOUR DRIVERS LICENSE IN THIS STATE, OR ANY STATE, EVER BEEN SUSPENDED OR REVOKED?

YES _____ NO _____

IF YES, PLEASE EXPLAIN WHERE AND WHY? _____

G. HAVE YOU PREVIOUSLY SUBMITTED AN APPLICATION FOR ANY EMPLOYMENT WITH THIS MUNICIPALITY?

YES _____ NO _____

IF YOU ANSWERED YES, PLEASE INDICATE THE AGENCY, THE POSITION SOUGHT, AND WHEN.

II. MARITAL AND FAMILY STATUS

1. PRESENT STATUS

SINGE _____ MARRIED _____ SEPARATED _____ DIVORED _____

2. FAMILY INFORMATION

A. FATHERS NAME _____ ADDRESS _____ DOB _____

B. MOTHERS MAIDEN NAME _____ ADDRESS _____

DOB _____

C. BROTHERS AND SISTERS (USE ADDITIONAL SHEETS IF NECESSARY)

NAME _____ AGE _____

ADDRESS _____

NAME _____ AGE _____

ADDRESS _____

NAME _____ AGE _____

ADDRESS _____

NAME _____ AGE _____

ADDRESS _____

D. NUMBER OF CHILDREN _____ WHERE RESIDING _____

NAMES AND AGES _____

2. FAMILY INFORMATION (CONT.)

E. SPOUSES PRE-MARRIAGE NAME _____ DOB _____
DATE OF MARRIAGE _____

F. IF DIVORCED (COMPLETE THE FOLLOWING INFORMATION)

NAME OF FORMER SPOUSE _____ DOB _____
PRESENT ADDRESS _____
DATE OF DIVORCE _____ PLACE _____
COURT _____

III. EDUCATION

1. SCHOOLS - List the name, address, and dates of schools that you have attended and dates of graduation.

	SCHOOL NAME, ADDRESS, AND PHONE NUMBER	GRADUATED YES/NO	NUMBER OF YEARS ATTENDED	DEGREE	MAJOR
HIGH SCHOOL					
COLLEGE					
GRADUATE					
OTHER					
COURSES NOW STUDYING					

2. Were you ever dismissed from a school or was any disciplinary action, including scholastic probation, ever taken against you during your scholastic career?

YES _____ NO _____

IF YES, PLEASE GIVE SCHOOL, DATE, AND ACTION TAKEN:

SCHOOL: _____ DATE _____

ACTION TAKEN _____

3. List all awards, honors, citations, positions held in school organizations, athletic endeavors, and any other recognition you have received in your community since you left school. (Exclude those organizations and awards which by their nature, name, or character indicate the religion, race, or national origin of its members.)

4. List any special abilities, interests, sports or hobbies with degrees of proficiency.

5. List your proficiency in speaking, understanding, reading, or writing any foreign languages.

IV. CIVIL HISTORY

1. Do you have any court suits pending against you

YES _____ NO _____

If yes, please explain _____

2. Have you ever been sued or had your wages garnished?

YES _____ NO _____

If yes, please explain _____

- 3. A. Do you now owe money for traffic fines? YES _____ NO _____
- B. Do you now owe money for parking tickets? YES _____ NO _____
- C. Do you now owe money for excise taxes? YES _____ NO _____
- D. Do you now owe money for any moving violations? YES _____ NO _____
- E. Do you now owe money for income taxes? YES _____ NO _____

If you answered yes to any of the above, please give complete details including the amount owed and to whom it is owed.

V. EMPLOYMENT HISTORY

1. **EMPLOYMENT HISTORY** - In reverse order, list all employments (including summer and part-time employment.) All time must be accounted for. If unemployed for a period, set forth the dates of unemployment. Use additional sheets of paper if necessary. Applicants may also include verifiable work performed on a volunteer basis.

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	

REASON FOR LEAVING:

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	

REASON FOR LEAVING:

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	

REASON FOR LEAVING:

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	
REASON FOR LEAVING:					

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	
REASON FOR LEAVING:					

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	
REASON FOR LEAVING:					

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	
REASON FOR LEAVING:					

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	
REASON FOR LEAVING:					

EMPLOYER TELEPHONE: _____

DATES		NAME AND ADDRESS OF EMPLOYMENT	RATES OF PAY		SUPERVISORS NAME AND TITLE
TO MO/YR	FROM MO/YR		START	FINISH	
REASON FOR LEAVING:					

EMPLOYER TELEPHONE: _____

2. EMPLOYMENT QUESTIONS

A. Have you ever been fired or forced to resign because of misconduct or unsatisfactory employment.

YES _____ NO _____

If yes, please explain: _____

B. Are you eligible to rehire with each of your former employers?

YES _____ NO _____

If no, please explain: _____

VI. MILITARY SERVICE

1. MILITARY HISTORY

A. Have you ever served on active duty in the Armed Forces of the United States or the National Guard?

YES _____ NO _____ If yes, highest rank attained: _____

B. If yes to question A, please complete the following:

i. General Information

Branch of Military: _____ Serial Number _____

Type of Discharge: _____ Date of Discharge: _____

Dates of Active Duty- To: _____ From: _____

Member of the Reserve: YES _____ NO _____

If yes, BRANCH: _____

ii. Was any type of disciplinary action taken against you in the Military Service?

YES _____ NO _____

If yes, please explain: _____

iii. Are you now or were you formerly in the National Guard?

PRESENT _____ FORMER _____ NEVER _____

If present member of the National Guard, please provide unit name and location.

SUMMER CAMP OR SIMILAR TRAINING ATTENDANCE:

FROM _____ TO _____

LOCATION _____

iv. If you were ever a member of the Armed Services, were you court-martialed?

YES _____ NO _____

If yes, please explain: _____

v. Please list any medals, accommodations, letters of appreciation,, or any other awards that you have documented proof of?

VII. REFERENCES

1. REFERENCES – List three references (not relatives, in-laws, former or present employers, fellow employees or school teachers) who are responsible adults, have reputable standing in their community and who have known you for at least five years. All persons to whom you refer may be asked to appraise your character, ability, experience, personality and other qualities.

A. FIRST REFERENCE

NAME	
ADDRESS	
PHONE	
HOW DOES THIS PERSON KNOW YOU?	
HOW LONG HAS THIS PERSON KNOWN YOU?	

B. SECOND REFERENCE

NAME	
ADDRESS	
PHONE	
HOW DOES THIS PERSON KNOW YOU?	
HOW LONG HAS THIS PERSON KNOWN YOU?	

C. THIRD REFERENCE

NAME	
ADDRESS	
PHONE	
HOW DOES THIS PERSON KNOW YOU?	
HOW LONG HAS THIS PERSON KNOWN YOU?	

VIII. CRIMINAL RECORD

1. **CRIMINAL RECORD** - With regard to questions contained in this section, under Massachusetts Law, you may answer "no record" if any of the following circumstances are applicable:

- A. You have never been arrested for violation of a criminal statute;
- B. You have been arrested but have never been tried for a criminal offense;
- C. You have been tried for a criminal offense but were not convicted;
- D. You have a first conviction for any of the following misdemeanors:
 - Drunkenness
 - Simple assault
 - Speeding
 - Minor traffic violations
 - Affray or
 - Disturbing the peace
- E. You have not been convicted of a criminal offense within the five years before the date of this application and you have been convicted of misdemeanors where the date of conviction or the termination of incarceration, if any, occurred more than five years before the date of this application;
- F. You have felony or misdemeanor convictions which have been sealed pursuant to Massachusetts Law; or
- G. You have juvenile delinquency or child in need of services complaints which were not transferred to Superior Court for prosecution.

2. CRIMINAL RECORD QUESTIONS

A. Have you ever been convicted of a felony?

YES _____ NO _____

B. Have you been convicted of a misdemeanor within the last five years other than the first conviction of drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbing the peace?

YES _____ NO _____

C. Were you convicted of a misdemeanor (other than first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbing the peace) more than five years ago which resulted in a jail sentence from which you were released within the last five years?

YES _____ NO _____

3. **CRIMINAL RECORD QUESTIONS (CONT.)**

A. If your answer to any of the three preceding questions (Part 2, Questions A,B,C) is yes, please describe the offense involved, the date of the offense, the court in which you were convicted, and any mitigating circumstances. Please include the Docket number if possible:

FULL DESCRIPTION OF OFFENSE	DATES OF OFFENSE	COURT AND DOCKET NUMBER	DISPOSITION, (FINDING, SENTENCE AND PROBATION, AND ANY OTHER MITIGATING CIRCUMSTANCES

B. Have you ever been convicted of a sexual offense? YES _____ NO _____

If yes, please complete the following:

FULL DESCRIPTION OF OFFENSE	DATES OF OFFENSE	COURT AND DOCKET NUMBER	DISPOSITION, (FINDING, SENTENCE AND PROBATION, AND ANY OTHER MITIGATING CIRCUMSTANCES

C. Have you ever been convicted of a narcotic drug offense?

YES _____ NO _____

If yes, please complete the following:

FULL DESCRIPTION OF OFFENSE	DATES OF OFFENSE	COURT AND DOCKET NUMBER	DISPOSITION, (FINDING, SENTENCE AND PROBATION, AND ANY OTHER MITIGATING CIRCUMSTANCES

D. Have you ever been sentenced to imprisonment after conviction of a crime?

YES _____ NO _____

If yes, please complete the following:

FULL DESCRIPTION OF OFFENSE	DATES OF OFFENSE	COURT AND DOCKET NUMBER	DISPOSITION, (FINDING, SENTENCE AND PROBATION, AND ANY OTHER MITIGATING CIRCUMSTANCES

E. Are you now under charge for any criminal offense on which you are awaiting trial or final disposition?

YES _____ NO _____

If you answered yes, please explain:

FULL DESCRIPTION OF OFFENSE	DATES OF OFFENSE	COURT AND DOCKET NUMBER	DISPOSITION, (FINDING, SENTENCE AND PROBATION, AND ANY OTHER MITIGATING CIRCUMSTANCES

F. Have you ever been or are you currently the subject of any petition for restraining order requested or issued pursuant to C209A or other abuse prevention statutes, of the Massachusetts General Laws or similar laws of other states?

YES _____ NO _____

If yes, please explain when and where?

DATE	POLICE/DEPARTMENT	CHARGE/COURT/DISPO	DOCKET NO

F. Have you ever been, or are you now, a defendant in any civil court action?

YES _____ NO _____

If yes, please provide the nature of the action and the court:

NATURE OF ACTION	COURT	DOCKET NO.

IX. LICENSES

1. Do you have experience with firearms? YES _____ NO _____

If yes, please explain why?

2. Have you ever been issued a license to carry firearms? YES _____ NO _____

If yes, please specify:

ISSUED BY	DATE ISSUED	REASON	FIREARM LICENSE NUMBER

3. Have you ever applied for and been denied a license to carry a firearm?

YES _____ NO _____

If yes, please provide details, including the date of denial, person denying the application and reason.

4. Have you ever been issued a Firearms identification Card? YES _____ NO _____

If yes, please specify?

ISSUED BY	DATE ISSUED	CARD NUMBER

5. Have you ever applied for and been denied a Firearms Identification Card?

YES _____ NO _____

If yes, please provide details; include the date of denial, person denying application, and reason.

6. If the answer to Questions 2 and 4 were yes, was the license to carry or Firearms Identification Card ever revoked or suspended?

YES _____ NO _____

If yes, please provide details:

IT IS UNLAWFUL IN MASSACHUSETTS TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATIONS THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

Thank you for completing this application and your interest in employment with the
Hampden Police Department



Town of Hampden

Police Department
625 Main Street
Hampden, MA 01036

Chief of Police
Jeff W. Farnsworth

PLEASE READ THE FOLLOWING SECTION CAREFULLY AND SIGN BELOW
INDICATING THAT YOU UNDER AND AGREE TO THE TERMS AS STATED.

I understand that a physical, which includes a drug screening urinalysis, may be required after an employment offer has been made. I understand that this is not a contract of employment and I or the municipality may sever the employment relationship at any time for any reason. Any oral or written statement to the contrary, including any which are made by a City/Town representative, are disavowed and may not be relied upon by any prospective or existing employee.

I understand also that this Department has established day and night tours for which I must be available as required. I further understand that any appointment tendered me will be contingent upon the results of a complete character and fitness investigation, and I am aware that willfully withholding information or making false statements on this application will be the basis of rejection of my application or dismissal from the Department. I agree to these conditions and I hereby certify that all statements made by me on this application are true and complete to the best of my knowledge. I hereby give this Police Department authorization to contact any person reasonable related to the character and fitness investigation and to request that an independent cred report be prepared as to my financial condition. I also authorize any person contacted to share written and oral information which is reasonable related to the public safety position for which I am applying.

Finally, I hereby release, discharge and exonerate this municipality, its agents and representatives, and any person furnishing or receiving information, from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, or other information or investigation made by or on behalf of this municipality. This authority shall continue until revoked in writing by the undersigned.

DATE

SIGNATURE OF APPLICANT

COMMONWEALTH OF MASSACHUSETTS

_____, SS.

I, _____, being duly sworn, depose and state I am the above named person. I signed the foregoing statement. I personally read and printed by hand or typewriting/printer answers to each and every questions therein and I do solemnly swear that each and every answer is full, true, and correct in every respect.

SIGNATURE OF APPLICANT

Sworn before me this _____ day of _____ 20____.

Notary Public

My Commission Expires: _____



Town of Hampden

Police Department
625 Main Street
Hampden, MA 01036

Chief of Police
Jeff W. Farnsworth

DATE _____

I, _____, born at _____

on _____, having filed an application for employment with the Hampden Police Department, consent to have an investigation made as to my moral character, reputation and fitness for the position to which I have applied. I also agree that such information as may be received, reported to and reviewed by the appointing authority. I agree to give any further information which may be required in reference to my past record.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records, and other information pertaining to me; to furnish to the Hampden Police Department such information including: documents, records, files regarding charges or complaints filed against me, formal or informal, pending or closed or any other pertinent data, and to permit the Hampden Police Department or any of its agents or representatives to inspect and make copies of such documents, records, and other information.

Specifically, in addition, I hereby authorize the release of the following date or records to the Hampden Police Department: _____

I hereby release, discharge and exonerate the Hampden Police Department, its agents and representatives and any person so furnishing 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 or the investigations made by or on behalf of the Hampden Police Department.

This authority shall continue for one year unless sooner revoked in writing by the undersigned.

SIGNATURE

WITNESS

ADDRESS



Town of Hampden

Police Department
625 Main Street
Hampden, MA 01036

Chief of Police
Jeff W. Farnsworth

CREDIT CHECK AUTHORIZATION

The undersigned applicant certifies that she/she has duly authorized this credit check, and he/she acknowledges that all information requested is for the exclusive, official use of the undersigned police department and for use only in connection with such investigation; and the consumer report requested is for a permissible purpose under the Fair Credit Reporting Act, of which the undersigned is knowledgeable.

Pursuant to the provisions of the Fair Credit Reporting Act, any person who knowingly and willfully obtains information from a consumer reporting agency under false pretenses shall be fined no more than \$5000 or imprisoned for not more than one year, or both.

APPLICANT PRINTED NAME

APPLICANT SIGNATURE

DATE

Police Department Employee
Requesting This Report

TITLE

Police Department
Requesting Check



Town of Hampden

Police Department
625 Main Street
Hampden, MA 01036

Chief of Police
Jeff W. Farnsworth

CORI CHECK ACKNOWLEDGMENT

I, _____ residing at _____

_____, acknowledge that a Criminal Offender Record Information (CORI) check will be performed as part of the municipality's hiring process. I further acknowledge that a refusal to allow the CORI check to be performed will cause my application to no longer be considered for employment.

PRINT NAME

SIGNATURE

DATE