

RESUME REQUIRED

Place of Birth (city/state): _____

You must be a citizen of the United States or a permanent resident alien who is eligible for and has applied for citizenship. Can you provide documentation to confirm this? Yes No

Social Security Number: _____ - _____ - _____

(In accordance with the Federal Privacy Act of 1974, disclosure is voluntary. The SSN will be used for identification purposed to ensure that proper records are obtained.)

Please circle the highest grade completed: 7 8 9 10 11 12 13 14+

_____ **High School** _____ **City** _____ **State** _____ **Date Graduated**

_____ **College/University** _____ **City** _____ **State** _____ **Date Graduated**

What degrees do you hold? _____

Have you ever served in the armed forces, National Guard, or military reserves? Yes No

_____ **Branch of Service** _____ **Service Number** _____ **Dates of Service** _____ **to** _____

Were you dishonorably discharged? Yes No

If "yes", explain the circumstances: _____

The position you are applying for requires a valid driver's license and a good driving record. Please complete the following:

Driver's License Number	State	Class	Expiration Date
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List all traffic violations or accidents you have had within the past five (5) years.

Violation/Accident	Date of Occurrence	Status/Disposition

Employment Record. List your complete work history below. Start with your present position and work backwards through your experiences. Please include military service and if you wish, volunteer work. Please identify by month and year any period of unemployment of six months or more. This section must be filled in completely. Attach additional sheets if necessary and a resume. Please include job history for the last five (5) years, at a minimum.

PRESENT OR LAST:

Employer	From Mo./Yr.	To Mo./Yr.
Address	City	State Zip Code
Beginning Position Title	Last Position Title	Name of Immediate Supervisor
Reason for Leaving or Seeking Other Employment		

RESUME REQUIRED

Present or Last Salary

Employer Phone Number

May we contact this employer?

Yes No

PREVIOUS:

Employer

From Mo./Yr.

To Mo./Yr.

Address

CityState

Zip Code

Beginning Position Title

Last Position Title

Name of Immediate Supervisor

Reason for Leaving or Seeking Other Employment

Present or Last Salary

Employer Phone Number

May we contact this employer?

Yes No

PREVIOUS:

Employer

From Mo./Yr.

To Mo./Yr.

Address

CityState

Zip Code

Beginning Position Title

Last Position Title

Name of Immediate Supervisor

Reason for Leaving or Seeking Other Employment

Present or Last Salary

Employer Phone Number

May we contact this employer?

Yes No

PREVIOUS:

Employer

From Mo./Yr.

To Mo./Yr.

Address

CityState

Zip Code

Beginning Position Title

Last Position Title

Name of Immediate Supervisor

Reason for Leaving or Seeking Other Employment

Present or Last Salary

Employer Phone Number

May we contact this employer?

Yes No

PREVIOUS:

Employer	From Mo./Yr.	To Mo./Yr.
Address	CityState	Zip Code
Beginning Position Title	Last Position Title	Name of Immediate Supervisor
Reason for Leaving or Seeking Other Employment		
Present or Last Salary	Employer Phone Number	
May we contact this employer?	Yes	No

PREVIOUS:

Employer	From Mo./Yr.	To Mo./Yr.
Address	CityState	Zip Code
Beginning Position Title	Last Position Title	Name of Immediate Supervisor
Reason for Leaving or Seeking Other Employment		
Present or Last Salary	Employer Phone Number	
May we contact this employer?	Yes	No

PREVIOUS:

Employer	From Mo./Yr.	To Mo./Yr.
Address	CityState	Zip Code
Beginning Position Title	Last Position Title	Name of Immediate Supervisor
Reason for Leaving or Seeking Other Employment		
Present or Last Salary	Employer Phone Number	

May we contact this employer?

Yes No

Have you, regardless of whether the matter is or was appealed or dismissed, regardless of whether the matter is part of your official record, regardless of whether you believe or think it might not still be in your file:

-Ever been discharged from employment for any reason?

Yes No

-Ever resigned after being told that your employer intended to discharge you for any action?

Yes No

-Ever resigned after being told that your employer intended to take disciplinary action against you?

Yes No

-Ever been reprimanded, counseled, or otherwise been put on notice by any employer?

Yes No

-Ever had any conflict with a supervisor?

Yes No

If you answered "yes" to any question, give all details, including name/employer, dates and circumstances.

Have you had at least twelve (12) consecutive months experience as a sworn peace officer in Colorado or elsewhere? Yes No

If "yes" in state other than Colorado, please include state: _____

Have you ever used marijuana and/or other illegal substances? Yes No

If "yes", indicate the circumstances: _____

Do you consume alcoholic beverages? Yes No

If "yes", indicate to what degree: _____

RESUME REQUIRED

Would you be willing to submit to a psychological and polygraph examination? Yes No

Have you ever been arrested or convicted of any crime? Yes No

If "yes", list below the reason of arrest/charge, the agency, date, and disposition of case

Charge/Arrest	Agency	Date	Disposition

List the names of five people (not related to you or former employers) whom have known you for at least five (5) years.

Name: _____ Relationship: _____
Occupation: _____
Home Address: _____ Home Phone Number: _____
Business Address: _____ Business Phone Number: _____
Years Known: _____

Name: _____ Relationship: _____
Occupation: _____
Home Address: _____ Home Phone Number: _____
Business Address: _____ Business Phone Number: _____
Years Known: _____

Name: _____ Relationship: _____
Occupation: _____
Home Address: _____ Home Phone Number: _____
Business Address: _____ Business Phone Number: _____

