



CENTENNIAL LAKES POLICE DEPARTMENT
54 NORTH ROAD
CIRCLE PINES, MN 55014



APPLICATION FOR EMPLOYMENT

POSITION APPLYING FOR: _____

PERSONAL INFORMATION:

Full Name of Applicant: _____
Last First Middle

Present Address: _____
Street City State Zip

Permanent Address: _____
Street City State Zip

Home Phone Number: _____ Work Phone Number: _____

Cell Phone Number: _____ Email: _____

State Name and Relationship of Any Relatives in Our Employ: _____

Have you ever served in the Armed Forces of the United States? Yes _____ No _____

EMPLOYMENT STATUS:

Are You Presently Employed? _____ May We Contact Your Present Employer? _____
Date

Have You Ever Applied Here Before? _____ When? _____ Available: _____

EDUCATION:

1. _____ Did You Graduate? Yes _____ No _____
High School Name

Address

2. _____ Did You Graduate? Yes _____ No _____
Vocational School Name

Address

Major

3. _____ Did You Graduate? Yes _____ No _____
College Name

Address

Major

List All Degrees, Certificates & Licenses Held _____

Specialized Training _____

Civic Activities, Organizations & Other Public Service _____

FORMER/PRESENT EMPLOYERS (PAST 5 YEARS):

1. _____

| Name | Address | Supervisor & Phone Number | |
|---|-------------|---------------------------|--------------------|
| Employed From | Employed To | Position | Reason for Leaving |
| Was Your Termination Voluntary? Yes _____ No _____ If no, please explain: _____ | | | |

2. _____

| Name | Address | Supervisor & Phone Number | |
|---|-------------|---------------------------|--------------------|
| Employed From | Employed To | Position | Reason for Leaving |
| Was Your Termination Voluntary? Yes _____ No _____ If no, please explain: _____ | | | |

3. _____

| Name | Address | Supervisor & Phone Number | |
|---|-------------|---------------------------|--------------------|
| Employed From | Employed To | Position | Reason for Leaving |
| Was Your Termination Voluntary? Yes _____ No _____ If no, please explain: _____ | | | |

THE CENTENNIAL LAKES POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER. THE DEPARTMENT HAS THE RIGHT TO VERIFY THE ACCURACY OF ALL INFORMATION CONTAINED IN THIS APPLICATION. FALSE INFORMATION MAY SUBJECT THE APPLICANT TO THE PENALTY PROVISIONS OF M.S. 43A, 39. IF YOU ARE DISABLED OR HAVE OTHER SPECIAL NEEDS DURING THE SELECTION PROCESS, WE ASK THAT YOU CONTACT THE ADMINISTRATIVE OFFICES AT 763-784-2501 SO THAT EVERY EFFORT MAY BE MADE TO MEET THOSE NEEDS. BECAUSE OF THE NATURE OF THE WORK APPLIED FOR, THE DEPARTMENT ALSO RESERVES THE RIGHT TO CONDUCT A COMPLETE BACKGROUND INVESTIGATION RELATIVE TO APPLICANTS WHO HAVE BEEN IDENTIFIED AS FINALISTS FOR THIS POSITION.

BY MY SIGNATURE, I DECLARE THAT ANY STATEMENT OR INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Applicant's Signature

Date