

14. Education (list Elementary Schools, High Schools, then Colleges or others):

NAME & LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	MAJOR FIELD OF STUDY	DID YOU GRADUATE?	DEGREE, DIPLOMA OR CERTIFICATE

NOTE: An OFFICIAL copy of your college transcripts must be received by the Human Resources Office by October 25, 2024, in order to receive education preference points.

15. Employment: List all employment for at least fifteen (15) years, and begin by listing your last or present employment first. Use additional sheets if necessary

EMPLOYMENT DATES		COMPANY NAME, MAILING ADDRESS AND TELEPHONE NUMBER	WAGE OR SALARY	POSITION	REASON FOR LEAVING
FROM	TO				

16. Character References: Give three, not employers or relatives. At least two of these must have been acquainted with you for more than five years.

NAME	ADDRESS	OCCUPATION	YEARS KNOWN

17. I hereby certify that the foregoing statements are true to the best of my knowledge. I further authorize investigation and verification of all statements contained in this application for employment and release from all liability and responsibility all persons, companies or corporations supplying such information. I understand such information may include records of disciplinary action assessed by previous employers, and hereby release such parties from any obligation to provide me with written notification of such disclosure. I further understand that any misrepresentation, falsification or omission of pertinent facts is good cause for removal from the eligible list or discharge during the probationary period.

SIGNATURE: _____ DATE: _____

EQUAL EMPLOYMENT OPPORTUNITY DATA FORM

In accordance with FEDERAL EQUAL EMPLOYMENT OPPORTUNITY GUIDELINES, the City of Warren is required to maintain statistical data pertaining to the sex and race of job applicants. The information obtained from this form is used for statistical purposes only and does not become a part of your application for employment. Please assist us in obtaining this required data by checking the appropriate spaces below.

Thank you for your cooperation.

Position applying for: **POLICE OFFICER**

Name _____ Sex: _____ Female _____ Male

Address _____
Number and Street City State Zip

Ethnic Group:

_____ **WHITE** (not of Hispanic origin) - All persons having origins in any of the original people of Europe, North Africa or the Middle East.

_____ **BLACK** (not of Hispanic origin) - All persons having origins in any of the Black racial groups of Africa.

_____ **HISPANIC** - All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

_____ **ASIAN or PACIFIC ISLANDERS** - All persons having origins in any of the original people of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

_____ **AMERICAN INDIAN or ALASKAN NATIVE** - All persons having origins in any of the original people of North America who maintain cultural identification through tribal affiliation or community recognition.

_____ **MULTI-RACIAL** (having parents of more than one of the broad race categories listed above) - If you select this category please also check the category above which is your predominant race (the race you are most often identified as).

How Did You Become Aware of This Position?

_____ Detroit News/Detroit Free Press newspaper

_____ CareerBuilder.com

_____ Person Told You

_____ Job Posting (Where: _____)

_____ Other (Be Specific: _____)

Signature _____ **Date** _____

APPLICANTS DO NOT COMPLETE THIS FORM
(For Office Use Only)

CITY OF WARREN - POLICE OFFICER APPLICATION CHECKLIST

ORIGINAL DOCUMENTS TO BE PRESENTED FOR REVIEW

By OCTOBER 25, 2024, to apply:

- _____ COMPLETED Application
- _____ COMPLETED Equal Employment Opportunity Data Form
- _____ **ORIGINAL** Driver's License
- _____ **ORIGINAL** Social Security Card
- _____ **ORIGINAL** Birth Certificate/Proof of U.S. Citizenship
- _____ **ORIGINAL** Photograph (will not be returned)-Print name on back
- _____ Signed up for Oral Board Examination
- _____ Date: _____ Time: _____
- _____ **OFFICIAL COLLEGE TRANSCRIPTS** -Official transcripts must be received in the Human Resources Office in an envelope sealed by the school to receive preference point
- _____ **THREE YEARS OF ACTIVE U.S. MILITARY DUTY** with an honorable discharge verified by a Form DD214, or a minimum of four years of military reserve experience with proof of honorable service , -OR-
- _____ **ORIGINAL Badge and Police Officer I.D.** (If a licensed Police Officer), -OR-
- _____ **ORIGINAL MCOLES CERTIFICATION LETTER,** -OR-
- _____ **PROOF OF ACCEPTANCE INTO CURRENT MCOLES LAW ENFORCEMENT BASIC TRAINING YOU ARE ATTENDING**

****FOR MILITARY VETERANS WHO ARE NOT MCOLES LICENSED OR ELIGIBLE FOR LICENSURE****

_____ **Valid MCOLES Reading/Writing and Physical Agility**

If I am a military veteran, I understand I have until **November 1, 2024, by 5:00 p.m. to submit proof of successful completion of both the MCOLES reading/writing and physical agility tests to the Human Resources Office. Failure to provide this proof will result in my application not being under further consideration for this position.

I understand that I may turn in an application without all of the documents listed above, but that my application is not complete until all documents are accepted by the City of Warren Human Resources Department. I further understand that failure to submit all above required documents by **October 25, 2024** for this or any other position.

Applicant's Signature

Date

If scheduled for an oral board interview, I want to be notified by:

_____ Email: _____
(Print email address)

-OR-

_____ Certified mail

HR Personnel Receiving Application _____