

City Of White Police Department



NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

POSITION APPLIED FOR: \_\_\_\_\_

**PERSONAL DATA**

Name: \_\_\_\_\_

Last

First

Middle Suffix

List below ANY other NAMES you have ever used or been known by. Include any aliases, Nicknames, maiden names, previous married names, etc. If none, so state.

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

List all addresses for the last ten (10) years. Start with your current address and work Backwards. Include all college addresses and any addresses or bases where you were stationed while in the military

From To

Month/Year Month/Year Address City State Zip Code

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

Telephone Numbers:

Home: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Work: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_

Cell: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Other: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Specify: \_\_\_\_\_

**PERSONAL DATA cont.**

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

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

Are you a: U.S. Citizen by Birth  Naturalized Citizen  Resident Alien

List any scars, marks or tattoos including location and description:

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Marital Status: Single { } Married { } Divorced { } Separated { } Widowed { }

Name of Current Spouse: \_\_\_\_\_

Last First Middle Maiden

Date of Marriage: \_\_\_\_\_ Place of Marriage: \_\_\_\_\_

(Month/Day/Year) (City/State)

Spouse's Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Work Phone Number: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_

Former Spouse's (include maiden name):

Name Address City State Zip Code

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Dependents:

Name Sex Date of Birth Place of Birth Resides with

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## **PERSONAL REFERENCES**

Please provide in the spaces below the names, phone numbers, addresses and other required data of five persons who you have known for at least five (5) years. These references must not be relatives, former employers or supervisors. These people will be asked to appraise your character, ability, experience, personality and other qualities.

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Phone Number: \_\_\_\_\_ Business/Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Phone Number: \_\_\_\_\_ Business/Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Phone Number: \_\_\_\_\_

Business/Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Phone Number: \_\_\_\_\_

Business/Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Phone Number: \_\_\_\_\_

Business/Occupation: \_\_\_\_\_

**EDUCATION**

Are you a high school graduate? Yes { } No { } If yes complete below:

High School Name: \_\_\_\_\_ City/State: \_\_\_\_\_

Month/Year Graduated: \_\_\_\_\_ Name Used: \_\_\_\_\_

Do you possess a High School Equivalency(GED)Certificate? Yes{ }No { } If yes complete below

Issuing Authority: \_\_\_\_\_

Number: \_\_\_\_\_

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

Name Used: \_\_\_\_\_

Indicate below the schools that you have attended, their location (City/State) and the years you attended. Include schools you dropped out without completing. Start with most recent or present and work backwards.

Name of School/College: \_\_\_\_\_

From \_\_\_\_\_ Until \_\_\_\_\_ City/State: \_\_\_\_\_

Month/Year Month/Year

Graduate: Yes{ } No { } Course of Study: \_\_\_\_\_

Name of School/College: \_\_\_\_\_

From \_\_\_\_\_ Until \_\_\_\_\_ City/State: \_\_\_\_\_

Month/Year Month/Year

Graduate: Yes{ } No { } Course of Study: \_\_\_\_\_

Name of School/College: \_\_\_\_\_

From \_\_\_\_\_ Until \_\_\_\_\_ City/State: \_\_\_\_\_

Month/Year Month/Year

Graduate: Yes{ } No { } Course of Study: \_\_\_\_\_

Name of School/College: \_\_\_\_\_

From \_\_\_\_\_ Until \_\_\_\_\_ City/State: \_\_\_\_\_

Month/Year Month/Year

Graduate: Yes{ } No { } Course of Study: \_\_\_\_\_

## **EMPLOYMENT RECORD**

List all jobs you have held within the past 10 years. Start with your present or most recent job and work backwards. Include all jobs whether full time, part time, temporary or voluntary. Also include military service and any periods of unemployment. Do not leave any dates unaccounted for during the last 10 years.

From: \_\_\_\_\_ To: \_\_\_\_\_

Month/Year Month/Year .

This job was: Full Time { } Part Time { } Temporary { } Voluntary { } Unemployed { }

Name of Employer/Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Your Title/Duties: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Business Telephone Number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext \_\_\_\_\_

Beginning Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Month/Year Month/Year

This job was: Full Time { } Part Time { } Temporary { } Voluntary { } Unemployed { }

Name of Employer/Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Your Title/Duties: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Business Telephone Number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext \_\_\_\_\_

Beginning Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**EMPLOYMENT RECORD cont.**

From: \_\_\_\_\_ To: \_\_\_\_\_

Month/Year Month/Year

This job was: Full Time { } Part Time { } Temporary { } Voluntary { } Unemployed { }

Name of Employer/Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Your Title/Duties: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Business Telephone Number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext \_\_\_\_\_

Beginning Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Month/Year Month/Year

This job was: Full Time { } Part Time { } Temporary { } Voluntary { } Unemployed { }

Name of Employer/Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Your Title/Duties: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Business Telephone Number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext \_\_\_\_\_

Beginning Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**EMPLOYMENT RECORD cont.**

From: \_\_\_\_\_ To: \_\_\_\_\_

Month/Year Month/Year

This job was: Full Time { } Part Time { } Temporary { } Voluntary { } Unemployed { }

Name of Employer/Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Your Title/Duties: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Business Telephone Number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext \_\_\_\_\_

Beginning Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Month/Year Month/Year

This job was: Full Time { } Part Time { } Temporary { } Voluntary { } Unemployed { }

Name of Employer/Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

Complete Street Address City State Zip Code

Your Title/Duties: \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Business Telephone Number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Ext \_\_\_\_\_

Beginning Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_ per \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_



**EMPLOYMENT HISTORY**

Have you ever applied, prior to this application, for employment with the City of White?

Yes { } No { } If yes give details including when, what position and the outcome.

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Have you ever worked for the White Police Department before?

Yes { } No { } If yes provide

details. \_\_\_\_\_

Are you seeking full time or part time employment? Full Time { } Part Time { }

How did find out about this job? \_\_\_\_\_

If the position you are applying for requires you to wear a uniform do you object? Yes { } No { }

If the position you are applying for requires you to be clean shaven do you object? Yes { } No { }

If offered full time employment are you available to work any day of the week, any hour of the day, including holidays? Yes { } No { } if no please explain \_\_\_\_\_

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If offered part time employment what days and times will you be available to work? \_\_\_\_\_

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Do you have experience with shift work? Yes { } No { }

What are your salary expectations? \_\_\_\_\_

Do you currently hold a Peace Officer Certification from Georgia? Yes { } No { }

If yes what is your Okey # \_\_\_\_\_

Please list any Certifications you hold as a Peace Officer.

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# City of White Police Department

29 W. Rocky Street  
White Ga, 30184  
Phone (770)382-9383  
Fax (770) 382-2242



## CONSENT FORM

I, \_\_\_\_\_ hereby do authorize the City of White to receive any criminal history and/or driving history record information pertaining to me which may be in the files of any State criminal justice agency.

Full Name: \_\_\_\_\_

Last

First

Middle Suffix

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

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

(Month)

(Day)

(Year)

Race: \_\_\_\_\_

Sex: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date

**Christopher H. Barnes**  
Chief of Police



# City of White Police Department

29 W. Rocky Street  
White Ga, 30184  
Phone (770)382-9383  
Fax (770) 382-2242

This employment application is not an offer of employment nor a contract for employment. The completion of this application does not stand as an agreement, or a promise to hire the applicant. The answers that you provide for each question on this application must be full and complete. Do not leave any blanks in this booklet. Answer all questions accurately, truthfully and in complete detail. The applicant must neatly print the answers in this booklet in black ink. All yes/no questions must be answered with either a yes or no response. Do not use N/A anywhere in this booklet. If necessary you may also attach additional sheets. Be sure to provide the page number and section to be further explained. In order to avoid either misplaced and/or out of place pages, do not remove the staple from this booklet. If you are unsure about any question, contact the White Police Department at 770-382-9383 Monday thru Friday between the hours of 8am and 5pm.

It is necessary that all information be complete, truthful and accurate. (Georgia Peace Officer Standards and Training Council, Chapter 464-4.12: "The Council shall deny certification to any applicant supplying false information.....or the use of fraud in securing employment...") The discovery of deliberate omissions, intentional misrepresentations or any falsified information will be a basis for the termination of the application process or employment and could result in criminal prosecution under the Official Code of Georgia Annotated 16-10-20. It is imperative that any conviction be listed (to include a finding or a verdict of guilt, a plea of guilty, a plea of nolo contendere in a criminal proceeding, regardless of whether the judgment of guilt or sentence is withheld or not entered thereon, and/or expungement). This includes First Offenders. (OCGA 35-8-7.1) All information will be subject to verification through polygraph, voice stress analysis and/or administrative investigation. All information obtained is confidential and will not be given to the applicant.

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

I understand that if I do not wish to answer a question in this booklet, I may choose not to do so and my application will be terminated.

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SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

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**Christopher H. Barnes**  
Chief of Police