



Do you possess a valid Wisconsin driver's license?  Yes  No DL#

If you possess a valid driver's license from another state, please specify.

### EDUCATION

Name of School	Location	Dates		Course Pursued	Degree, Diploma, or Credits Earned
		From	To		
High Schools:					
College:					
Graduate School:					
Miscellaneous:					

### ATTACH COPIES OF ALL DIPLOMAS AND TRANSCRIPTS

Were you ever dismissed from a school because of disciplinary action?

No  Yes \_\_\_\_\_  
(School) (Date) (Type of Action)

### COURT RECORD

Have you ever been convicted of any violation including traffic, but not parking?

NO  YES, list all violations below ↓

Date	Place (City, State)	Charge
Details		Final Disposition
Date	Place (City, State)	Charge
Details		Final Disposition
Date	Place (City, State)	Charge
Details		Final Disposition
Date	Place (City, State)	Charge
Details		Final Disposition

### ORGANIZATION MEMBERSHIP

No  Yes Have you ever organized or helped to organize or become a member of any organization or group of persons which, during the period of your membership or association, you knew was advocating or teaching that the government of the U.S. or any state or any political subdivision thereof should be overthrown by force, violence or any other unlawful means? If the answer to this is yes, explain fully.

No  Yes If your answer to the above question is yes, did you during the period of such membership or association have the specific intent to further the aims of such organization, association or group of persons to overthrow or overturn the government of the U.S. or any state or any political subdivision thereof by force, violence or any other unlawful means?

## MILITARY RECORD

1. Have you ever served active duty in the Armed Forces of the United States?

No

Yes

Highest rank attained:

2. Branch of military service:

Serial #:

Dates of Active Duty (month/day/year)

From:     /     /

To:     /     /

Type of Discharge:

Basis of Discharge:

3. Member of Reserve?

No

Yes

Ready

Standby

Service Branch:

4. Was any type of disciplinary action taken against you in service which remains a part of your permanent record?

No

Yes

Nature of: \_\_\_\_\_  
\_\_\_\_\_

5. National Guard

Present

Former

None

If you attend drills, meetings or camps, give name of unit and location:

## REFERENCES

Give at least three (3) references (not relatives, former or present employers, clergymen, fellow employees or school teachers) who are responsible adults of Reputable standing in their communities.

Complete Name:

Addresses: Residence

Business:

Home Phone:

Cell phone:

Work phone:

Occupation:

No. years Acquainted

Complete Name:

Addresses: Residence

Business:

Home Phone:

Cell phone:

Work Phone:

Occupation:

No. Years Acquainted

Complete Name:

Addresses: Residence

Business:

Home Phone:

Cell phone:

Work Phone:

Occupation:

No. Years Acquainted

Complete Name:

Addresses: Residence

Business

Home Phone:

Cell phone:

Work Phone:

Occupation:

No. Years Acquainted

## EMPLOYMENT EXPERIENCE

List all employment during last 10 years. Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Telephone (    )	Dates Employed		Work Performed
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting	Final	
Supervisor				
Reason for Leaving				

Employer	Telephone (    )	Dates Employed		Work Performed
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting	Final	
Supervisor				
Reason for Leaving				

Employer	Telephone (    )	Dates Employed		Work Performed
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting	Final	
Supervisor				
Reason for Leaving				

**Provide a written response to the following question.** Please limit response to no more than one page.

- Why have you chosen to apply for this position?

## WAIVER

**IMPORTANT:** Administrative Rule LES 2.01(1)(e) requires that an applicant possess either a two-year Associate Degree or 60 college-level credits, or meet the standard within the first five years of employment. The Law Enforcement Standards Board **may** waive up to 30 credits upon documentation of writing, problem solving, and other communication skills. [Waiver forms available via this employing agency or the Department of Justice, Training and Standards Bureau, P.O. Box 7857, Madison, WI 53707-7857; (608) 266-8800.]

Do you request a waiver of college-level credits under LES 2.01(1)(e)?

Yes

No

I understand that all appointments are probationary for a period during which I must demonstrate my fitness of continued employment. 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 basis for dismissal. 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.

\_\_\_\_\_  
Signature of Applicant (Do not use nickname)

\_\_\_\_\_  
Date

In order for your application to be considered, it must be complete.

**HAVE YOU REMEMBERED:**

- To include your response to the question, “Why have you chosen to apply for this position?”
- To include copies of diplomas and transcripts?
- To include a signed *Authorization for Release of Information* form (must be signed in the presence of a Notary Public)?
- To include your resume’ (optional)?

Attach all documents behind the application and return to:

North Fond du Lac Police Department  
16 Garfield Street  
North Fond du Lac, WI 54937



# North Fond du Lac Police Department



## Authorization for Release of Information

To Whom It May Concern:

I am an applicant for the position of **Police Officer** with the Village of North Fond du Lac. I realize that during the processing of my application, I will be investigated by personnel officers of that department.

I hereby empower an employee of the Village of North Fond du Lac or other authorized representative bearing this release to, within one year of its date; obtain information and records pertaining to me from any or all of the following sources:

1. Municipal, state or federal law enforcement agencies
2. Selective Service System
3. Any banking institution
4. Any place of business (for purposes of obtaining credit or employment data)
5. Credit rating bureaus or institutions maintaining individual credit rating files
6. Any previous employer
7. Present employer
8. Any school, college, university or other educational institution

### Exceptions to this Blanket Authorization:

1. Any medical information in the possession of any source named above if a conditional offer of employment has not yet been made.
2. Any medical information in the possession of any source named above if a final job offer has already been made.
3. \_\_\_\_\_
4. \_\_\_\_\_

I hereby release any municipal, state or federal enforcement agency, individual or institution, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it.

I understand that any information concerning my past will be considered in evaluating me as an applicant to the Village of North Fond du Lac, and that all information obtained by the Village of North Fond du Lac in conjunction with this investigation and this permission, is confidential and I have no right to examine it, as the people contacted will be advised that what they say will be held in confidence.

Name: \_\_\_\_\_  
(Print)

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

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

Signature: \_\_\_\_\_

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

Notary: \_\_\_\_\_

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

My Commission Expires on: \_\_\_\_\_

(Seal)