



**City of Treasure Island**  
**APPLICATION FOR LAW ENFORCEMENT EMPLOYMENT**  
**TREASURE ISLAND POLICE DEPARTMENT**

Personnel Department, 120 –108<sup>th</sup> Avenue, Treasure Island, Florida 33706

**INSTRUCTIONS:** Only the applicant can complete and sign this form. Please print all responses and carefully answer all questions. Initial on the bottom right of each page as indicated. All information will be verified by a background investigation. Falsification or omission of information will result in rejection of your application or dismissal if you are employed by the City of Treasure Island. If you cannot recall any requested information, so state. One of the components of the hiring process is a polygraph examination. If you are found to have falsified or omitted any information at any time in the selection process, you will be disqualified.

**Position(s) Applied For:** \_\_\_\_\_ **Social Security No.** \_\_\_\_\_

**Name:** \_\_\_\_\_  
Last First MI

**Present Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

\_\_\_\_\_ **Business Telephone:** \_\_\_\_\_  
City State Zip

Do you have any objection to shift work? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Were you ever employed under another name? \_\_\_\_\_ If yes, list name(s) \_\_\_\_\_

Do you have any objections to your present employer being contacted? \_\_\_\_\_ How did you learn of this position? \_\_\_\_\_

Are you a United States Citizen? \_\_\_\_\_ Do you have a PASS file? \_\_\_\_\_ If yes, file number: \_\_\_\_\_

Are you related to any City of Treasure Island employee ? \_\_\_\_\_ If yes, Name and relationship: \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_  
Month Day Year

**Driver's License Number:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Class:** \_\_\_\_\_

Has your driver's license ever been suspended or revoked? \_\_\_\_\_ If yes, provide date(s) and reason \_\_\_\_\_

Do you currently have a sworn law enforcement certification? \_\_\_\_\_  
 If yes, from what state, federal, or military authority? \_\_\_\_\_  
 Date initially certified: \_\_\_\_\_

List any foreign language proficiency:

Foreign Language	Read	Speak	Fluently?







**EDUCATION**

List all schools, public, special, etc. that you have attended since tenth (10th) grade.  
( Use other side or attach additional sheets if necessary)

From	To	Name Of School	Address	Major/Minor	Graduate?
Mo. Yr.	Mo. Yr.				

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Were you ever expelled, suspended, or placed on probation from any education institution? \_\_\_\_\_

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

What, if any, are your future education plans?

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What college degrees, professional licenses, or law enforcement certifications do you possess?

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List any specialized law enforcement training or certifications you have received (e.g. K-9, Intoxilyzer, FTO, etc.)

Specialized Training	Agency where training received	Date Completed (Mo/Yr)

Attach additional sheet(s) or use other side if necessary

**REFERENCES** List three personal or professional references, preferably local, who are not relatives or previous employers.

Name: Occupation:	Telephone: Years Acquainted:
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Name: Occupation:	Telephone: Years Acquainted:

Have you applied for employment with any other law enforcement agency in the past six (6) months? \_\_\_\_\_ If yes, which agencies:

Agency applied to	Approximate date applied	Were you interviewed?	Status of application ( offered employment, pending, withdrawn, rejected, etc)

Attach additional sheet(s) or use other side if necessary

**ARRESTS, CRIMINAL HISTORY**

Have you ever been charged, cited, arrested, or convicted for violation of any laws (including moving traffic violations) by juvenile authorities, or any civilian law enforcement agency, (regardless of whether the record in your case has been "sealed", "expunged", "dropped", or otherwise stricken)? \_\_\_\_\_ If yes, list each instance below ( Use other side or attach additional sheets if necessary)

Date	Violation Actual Charge	Location City and State	Court Disposition or Sentence	Police Agency Concerned

**DRUG AND ALCOHOL USE**

Have you ever sold any type of controlled substance (e.g. Marijuana, cocaine, ecstasy, heroin, LSD, prescription medicine not legally prescribed for you), whether for profit or not?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you used or possessed any type of illegal controlled substance (e.g. Marijuana, cocaine, ecstasy, heroin, LSD, prescription medicine not legally prescribed for you), within the last three (3) years? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain what substance, approximately how many times, and the approximate last date used.

Have you ever used anabolic steroids? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when and how often?

How frequently do you currently consume alcoholic beverages? Check one: daily \_\_\_\_\_ weekly \_\_\_\_\_ monthly \_\_\_\_\_ holidays and special occasions only \_\_\_\_\_ never \_\_\_\_\_

When you drink alcoholic beverages, how much do you usually consume? \_\_\_\_\_

**MARITAL STATUS**

Check one: Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widowed \_\_\_\_\_

Present spouse's full name: \_\_\_\_\_  
Last First Middle Maiden

Is your spouse in favor of your applying for this position? \_\_\_\_\_ If not, why?

Former spouse's full name: \_\_\_\_\_  
Last First Middle Maiden

If more than one previous spouse, provide same information on back

Have you ever had legal action taken against you for delaying or failing to make child support payments? \_\_\_\_\_ If yes, Why?

**FINANCIAL HISTORY**

A Credit Report is a component of the hiring process for law enforcement positions.

Have you ever had your wages attached or garnished? \_\_\_\_\_ If yes, explain

Do you or your spouse have any pending civil court action? \_\_\_\_\_ If yes, explain

Have you ever filed bankruptcy? \_\_\_\_\_ If yes, explain

Have you ever been bonded? \_\_\_\_\_ If yes, explain

Have you ever been refused bonding? \_\_\_\_\_ If yes, explain

Have you ever, as an adult, been a volunteer with a community service or charitable organization? (examples are Girl or Boy Scouts, Explorers, Habitat for Humanity, religious charities, service organizations, youth sports organizations, etc.)

YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, when, what organization(s), and where?

Do you now or have you ever belonged to, served with, applied to join, or attended meetings of any gang(s) or any subversive or paramilitary organization(s)?

NO \_\_\_\_\_ YES \_\_\_\_\_ If yes, Present Member? \_\_\_\_\_ Past Member? \_\_\_\_\_

If yes, when, what organization(s), and where?

Do you currently bear any intentionally inflicted tattoo(s), body piercing(s), or other permanent body marking(s)?

YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please describe:

Briefly explain your motivation for a career in law enforcement:

Please Read Carefully

**SWORN STATEMENT and AGREEMENTS**

I hereby swear and affirm that there are no misrepresentations, omissions, or falsifications in the statements and answers on this application, and that all foregoing entries are true, complete, and correct to the best of my knowledge and belief.

I also understand that I must update this application immediately upon my change of address, change of employment, or any arrests or convictions.

I hereby authorize the City of Treasure Island to investigate and verify all information contained herein and I release all past employers and all references from any and all liability for the release of information to the City of Treasure Island. I authorize my former employers to furnish their records of any service, my reasons for leaving their employ, together with all information they may have concerning me, whether on record or not. I also release them and their company or organization from any liability for any damage whatsoever for issuing same. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

I understand that all job offers from the City of Treasure Island Police Department are conditioned upon successful completion of a background investigation, polygraph examination, health questionnaire, medical, and psychological examinations by City appointed practitioners and investigators to determine my ability and fitness to perform the law enforcement position offered. The medical exam shall include alcohol/drug testing for which I give consent.

I further understand and agree in advance that I may be summarily discharged if any of the information provided by me contains any misrepresentations, or falsifications, or if any material information has been omitted.

I understand that all newly hired employees serve a probationary period of one year from the date of hire. During this one year probationary period I may be discharged from employment without any right of appeal.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Date Month Year

\_\_\_\_\_  
Applicant sign here in presence of Notary Public

STATE OF FLORIDA )  
                                  ) ss.  
County of PINELLAS )

On this day, personally appeared before me \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification

SWORN and subscribed to me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Signature of Notary \_\_\_\_\_  
NOTARY PUBLIC in and for the State of Florida

Printed Name of Notary \_\_\_\_\_