



Town of Ellettsville Employment Application

An Equal Opportunity Employer

The Town of Ellettsville, Indiana does not discriminate on the basis of race, color, gender, national origin, age, religion or disability in employment or the provision of services.

Please print and complete all sections of the application.

Are you a U. S. citizen or otherwise legally eligible to work in the United States?

Proof of eligibility to work in the U. S. will be required upon employment.

Yes

No

Position Applying For: _____

Are you interested in: Full-time Part-time Seasonal / temporary

On what date would you be available to work? _____

Full Legal Name: _____

Social Security Number: _____

Are you at least 18 years of age?

Yes

No

Address: _____

Home and/or Cell Phone Number(s): _____

Email: _____

Do you have a valid Driver's License?

Yes

No

Commercial Driver's License (CDL)?

Yes

No

Type: _____

Some positions do not require a driver's license. If you do not have a valid driver's license that will not necessarily disqualify an applicant from employment.

Driver's License Number: _____

Have you ever been employed by the Town of Ellettsville?

Yes

No

If yes, please provide date and department: _____

Date

Department

Are you related to a current Town of Ellettsville employee?

Yes

No

Indiana law and Town policy disallow family members from working together in some circumstances.

If yes, please provide the following information regarding current employee:

Name: _____ Relationship: _____ Department: _____

Has your Driver's License been suspended or have you ever been convicted of, or entered a plea of guilty or no contest, or had a withheld judgement to a felony?

Yes No

A current charge or conviction will not necessarily disqualify an applicant from employment.

If yes, please explain. _____

Education

Description	Name and Location	Dates Attended	Degree / Major - Year Awarded and Professional Licensing (if applicable)
High School / GED			
Business / Trade School			
College			
Graduate / Professional			

Special Skills

List your special qualifications, skills, training, awards or accomplishments.

List any professional, trade, business, civic or other organizations that you belong to and offices held that you consider relevant to your ability to perform this job.

Have you ever had any job related training in the United States Military?

Yes No

If yes, please describe below.

Employment History

1	Current / Most Recent Employer:	Phone Number(s):
	Address:	Employed (State month and year) From: To:
	Supervisor:	Weekly Pay Starting Pay: Ending Pay:
	List Job Title & Duties:	Reason for Leaving:

2	Previous Employer:	Phone Number:
	Address:	Employed (State month and year) From: To:
	Supervisor:	Weekly Pay Starting Pay: Ending Pay:
	List Job Title & Duties:	Reason for Leaving:

3	Previous Employer:	Phone Number:
	Address:	Employed (State month and year) From: To:
	Supervisor:	Weekly Pay Starting Pay: Ending Pay:
	List Job Title & Duties:	Reason for Leaving:

We may contact the employers listed above unless you indicate those you do not want us to contact.	DO NOT CONTACT: Employer Number(s)
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Reason for not contacting:	
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References

Please give name, address and phone number of three references who are not related to you and are not previous supervisors.

Name & Occupation	Address	Phone Number

Applications will be screened after the closing date of the job posting. Applicants will be notified whether or not they will receive an interview.

PLEASE READ AND SIGN THE FOLLOWING STATEMENT AND E-MAIL THE COMPLETED APPLICATION TO POLICE@ELLETTSVILLE . IN . US .

I certify that all information provided in this Application for Employment is true, accurate and complete. I understand that any misrepresentation or omission of facts is sufficient reason for rejection of this application or termination of subsequent employment regardless of the timing or circumstances of discovery. Except as indicated on page three of this application, I authorize the Town of Ellettsville to investigate all statements made on my application and release from liability former employers, institutions or persons providing such information to the Town.

I hereby authorize the Town of Ellettsville to conduct work history, personal reference or criminal history inquiries to determine my acceptability for employment.

I understand that, in connection with the routine processing of the employment application or when hiring for certain positions, the Town of Ellettsville will request and conduct a criminal background check.

I understand that acceptance of this application or an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

Date: _____ **Signature:** _____

Date Received Application: _____

ELLETTSVILLE POLICE DEPARTMENT



APPLICATION FOR EMPLOYMENT

Thank you for your interest in employment with the Ellettsville Police Department, an equal opportunity employer. Please read this page thoroughly before completing this application as it contains important information regarding the application process.

Instructions

1. Read each item carefully.
2. This form must be typed or printed neatly in black or blue ink.
3. All items must be completed and necessary documentation attached.
4. This completed application must be e-mailed to the Ellettsville Police Department at police@ellettsville.in.us.

Application Checklist Please use the following list as a guide in completing your application.

- Complete addresses (including zip codes) of all current and former residences
- Complete phone numbers (including area codes)
- Complete driver's license information including number, state of issuance, date of expiration, and information regarding motor vehicle accidents and moving violations
- Complete information regarding any arrest (adult or juvenile) including charges, locations, and dispositions
- Complete addresses (including zip codes), phone numbers (including area codes), names of supervisors, and dates of all current and former employers
- Complete addresses (including zip codes) and phone numbers (including area codes) of personal references

Photocopies of the following documents **MUST** be attached to this completed application:

- Driver's License
- Birth Certificate
- Social Security Card
- High School/GED and College diplomas
- DD214 and other military records, if applicable
- Law Enforcement Certification, if applicable
- Other training records pertinent to the position being applied for
- A credit report from one of the following companies: Equifax, TransUnion, or Experian

If you have any questions regarding this application please contact the Ellettsville Police Department:

Phone: (812) 876-2270

Fax: (812) 876-8332

Website: www.ellettsvillepolice.com

INCOMPLETE OR ILLEGIBLE APPLICATIONS WILL NOT BE CONSIDERED

VI. Certification and Authorization

The above information is true and correct. I understand that in the event of my employment by the Ellettsville Police Department, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery. This application expires within one (1) year of the signature date below unless the Ellettsville Police Department begins the review process within that time.

I authorize the Ellettsville Police Department to inquire into my educational, professional, and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Ellettsville Police Department and will hold the Ellettsville Police Department and my former employer harmless from any claim made on the basis of such information. I further authorize the Ellettsville Police Department to obtain any credit and consumer checks they deem reasonable and necessary to perform as part of a background or pre-employment investigation.

I authorize the Ellettsville Police Department to inquire into my personal background and make inquiry with any reference or acquaintance to research my qualifications for this position. I hereby give my consent to any reference or acquaintance to provide the Ellettsville Police Department with any information that they have about my personal character or history that may affect my application for employment or as a volunteer at the Ellettsville Police Department, whether such information is positive or negative.

I hereby authorize the Ellettsville Police Department to obtain my full driver's license history and full criminal history, including my juvenile criminal and status offense history. I hereby waive the restrictions on access to any and all records of any Juvenile Courts or law enforcement agencies relating to myself and when I was a juvenile pursuant to Indiana Code Section 31-6-8-1(1) and Indiana Code Section 31-6-8-12(H).

I understand that nothing in this employment application, the granting of an interview, or my subsequent employment with the Ellettsville Police Department is intended to create an employment contract between myself and the Ellettsville Police Department under which my employment could be terminated only for cause. I understand and agree that, if hired, my employment is probationary and terminable at will and may be terminated by me or by the Ellettsville Police Department at any time and for any reason. If I am applying for a Reserve Police Officer position, I understand that my services are those of a volunteer and may be terminated by the Ellettsville Town Marshal at his/her discretion and that as a volunteer I do not have the same right to a hearing or grievance procedure that paid employees have been granted.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act of 1986. The documents provided will be used for completion of Form I-9.

The Ellettsville Police Department strongly believes in its responsibility to provide a safe and healthful workplace for all its employees. I understand that at any time after I am hired, the Ellettsville Police Department may require me to submit to a physical examination to the extent permitted by law. I consent to the disclosure of the results of the physical examinations and related tests to the Ellettsville Police Department. I further understand that I may be tested for the presence of controlled substances before I am hired as a condition of employment with the Ellettsville Police Department. I understand an offer of employment may be made contingent upon passing a job-related physical examination and drug or alcohol tests. I agree to submit to a controlled substances screening and physical examination by the Ellettsville Police Department designated medical practitioner. If I am applying for a position as a Reserve Police Officer, I further understand that I may be asked to submit to a physical examination, related tests, and/or drug and/or alcohol tests at a medical practitioner or testing facility chosen or specified by the Ellettsville Police Department at cost to me, the applicant.

I have read, understand, and agree to the above statements and conditions of employment. I make this waiver knowingly and voluntarily.

Signature

Date