



BRENTWOOD POLICE DEPARTMENT

1 Dalton Road Brentwood

603-642-8817

Fax 603-642-3165

Chief Ellen Arcieri

Application:

This application must be completed in full.

Applications not properly completed will not be accepted.

Forward your completed application to: info@brentwoodpd.com

Attention: Chief Ellen Arcieri

FALSE ANY STATEMENTS MADE IN THIS APPLICATION MAY BE CAUSE FOR REJECTION OF THE APPLICANT.

All applications will be kept on file for two years from the date received and will be considered for future positions.

Name of applicant:	Date of application:
Position applied for:	

When would you be available for employment?
How did you learn about the position for which you are applying?

TOWN OF BRENTWOOD POLICE DEPARTMENT
EMPLOYMENT APPLICATION

1.	Name in full:		
	(Last)	(First)	(Middle)
2.	Have you ever used another name: Yes <input type="checkbox"/>		if yes reason: No <input type="checkbox"/>
3.	Current residence: (Street)	(City)	State/Zip)
4.	Telephone :()		
5.	Place of birth:		
6.	List all schools and colleges attended chronologically:		
	School/College	Location	Dates
	Degree/Diploma		

7. Do you currently hold a license to operate motor vehicles? Yes <input type="checkbox"/> No <input type="checkbox"/>
--

List type(s) of license held: (Operator	Motorcycle
CDL – Class A or Class B)	Other

8. List all places of employment during the past ten years:			
EMPLOYER	ADDRESS	FROM-TO	REASON FOR LEAVING

<p>9. If currently a police officer, are you certified in New Hampshire? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p> If yes, are you employed full-time or part-time? FT <input type="checkbox"/> PT <input type="checkbox"/></p> <p> Are you certified in any other state? Yes <input type="checkbox"/> If yes what state(s) full-time <input type="checkbox"/> Or part-time <input type="checkbox"/></p>
<p>10. Have you ever been arrested or convicted of a crime? Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>11. List personal skills and level (firearms; typing; radios; etc.):</p>

NOTE: ANY PERSON HIRED FOR THE POSITION OF POLICE OFFICER OR ANY SWORN POSITION IS HIRED SUBJECT TO CERTIFICATION BY THE NEW HAMPSHIRE POLICE STANDARDS AND TRAINING COUNCIL PURSUANT TO RSA 105.

THE BRENTWOOD POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER

Applicant Signature:

RENTWOOD POLICE DEPARTMENT
PERSONAL HISTORY STATEMENT

Name:				
(Last)	(First)	(Middle)		
Address:				
(Number)	(Street)	(City/town)	(State)	(Zip)
Telephone:				
(Home)			(Work)	

Residences: List all addresses where you have lived during the past ten (10) years, beginning with present address. List dates by month and year.

From:	to:	
(Street Address):	(City/Town)	(Zip)

From:	to:	
(Street Address):	(City/Town)	(Zip)

From:	to:	
(Street Address):	(City/Town)	(Zip)

From:	to:	
(Street Address):	(City/Town)	(Zip)

From:	to:	
(Street Address):	(City/Town)	(Zip)

From:	to:	
(Street Address):	(City/Town)	(Zip)
From:	to:	

(Street Address):	(City/Town)	(Zip)
-------------------	---------------	---------

From:	to:
(Street Address):	(City/Town) (Zip)

From:	to:
(Street Address):	(City/Town) (Zip)
From:	to:
(Street Address):	(City/Town) (Zip)

From:	to:
(Street Address):	(City/Town) (Zip)

Experience & Employment: Beginning with your present or most recent job, list all employment held for the past ten (10) years, including part-time, temporary or seasonal employment. Include all periods of unemployment.

Employer address				
(Number)	(Street)	(City/town)	(State)	(Zip code)
Employer telephone #		Job Title		
Supervisor		Title		
Name of Co-worker				
Date Started		Date Left		
Reason for leaving this position:				

Employer address				
(Number)	(Street)	(City/town)	(State)	(Zip code)
Employer telephone #		Job Title		
Supervisor		Title		

Name of Co-worker	
Date Started	Date Left
Reason for leaving this position:	
Employer address	
(Number) (Street) (City/town) (State) (Zip code)	
Employer telephone #	Job Title
Supervisor	Title
Name of Co-worker	
Date Started	Date Left
Reason for leaving this position:	
Employer address	
(Number) (Street) (City/town) (State) (Zip code)	
Employer telephone #	Job Title
Supervisor	Title
Name of Co-worker	
Date Started	Date Left
Reason for leaving this position:	
Employer address	
(Number) (Street) (City/town) (State) (Zip code)	
Employer telephone #	Job Title
Supervisor	Title
Name of Co-worker	

Date Started	Date Left
Reason for leaving this position:	
Employer address	
(Number)	(Street) (City/town) (State) (Zip code)
Employer telephone #	Job Title
Supervisor	Title
Name of Co-worker	
Date Started	Date Left
Reason for leaving this position:	

Education:

High School	
Address	
(Number)	(Street) (City/town) (State) (Zip)
From (Year)	to (Year) Graduated Yes [] No [] GED Yes [] No []
College/University from (Year) to (Year)	
Town & State	Degree Received Yes [] No []
Units Completed	Major/Minor
College/University from (Year) to (Year)	
Town & State	Degree Received Yes [] No []
Units Completed	Major/Minor

College/University _____ from _____ to _____		
(Year) (Year)		
College/University _____ from _____ to _____		
(Year) (Year)		
Town & State _____		Degree Received Yes <input type="checkbox"/> No <input type="checkbox"/>
Units Completed _____		Major/Minor _____
College/University _____ from _____ to _____		
(Year) (Year)		
Town & State _____		Degree Received Yes <input type="checkbox"/> No <input type="checkbox"/>
Units Completed _____		Major/Minor _____
College/University _____ from _____ to _____		
(Year) (Year)		
College/University _____ from _____ to _____		
(Year) (Year)		
Town & State _____		Degree Received Yes <input type="checkbox"/> No <input type="checkbox"/>
Units Completed _____		Major/Minor _____
College/University _____ from _____ to _____		
(Year) (Year)		
Town & State _____		Degree Received Yes <input type="checkbox"/> No <input type="checkbox"/>
Units Completed _____		Major/Minor _____
College/University _____ from _____ to _____		
(Year) (Year)		
List all other schools attended with dates of attendance (trade, vocational, business, etc.)		
Enrollment date:	Description:	Completion date:

Special Qualifications and Skills

List any special licenses you hold (pilot, scuba, etc.). List any special skills or qualifications you may have.

Legal:

Have you ever been convicted, arrested, detained by police or summonsed into court?

Yes [] No [] If yes, complete the following:

Police Agency

(City)

(State)

Crime(s) Charged

Disposition(s)

Police Agency

(City)

(State)

Crime(s) Charged

Disposition(s)

References:

Name

Telephone #

Address

(Number)

(Street)

(City/town)

(State)

(Zip)

Years known

Name

Telephone #

Address

(Number)

(Street)

(City/town)

(State)

(Zip)

Years known				
Name		Telephone #		
Address				
(Number)	(Street)	(City/town)	(State)	(Zip)
Years known				

When would you be available for employment?

How did you learn about the position for which you are applying?

The Town of Brentwood Supports the Americans with Disabilities Act. Are you able to perform specific job functions, with or without reasonable accommodations, of the job for which you are applying (yes or no)? _____

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions. I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection or termination of employment.

Signature of Applicant _____ Date _____