

P.O. Box 729 120 W. McKinley Ave Haughton, La 71037 TEL: (318) 949-6666 FAX: (318) 949-6030



#### HAUGHTON POLICE DEPARTMENT

#### **Employment Application**

Haughton Police Department does not discriminate in hiring or employment on the basis of race, color, religion, creed, sex, national origin, handicap, veteran status, or on the basis of age in the case of persons forty years old or over. No question in this application is intended to secure information to be used for discriminatory purposes.

All job offers are contingent upon the successful completion of a background process, which may include a police records check and a medical examination which includes a drug screening.

DO NOT WRITE IN THIS BLOCK

						I	
CRIMINAL	HISTORY CHECK: _						РНОТО
3ACKGRO	UND CHECK:						MUST
VARRANT	CHECK:						BE
OFFICER S	SIGNATURE:						ATTACHED
CHIEF SIGI	NATURE:						HERE
	s: Write or print clearly neir own application. D		writer.	question is no		mark it (2	K). ALL applicants must
ull Name:							Date:
	Last		First		Middle		
laiden nan	Last ne of female applican	t:					
Other name	ne of female applican						
Other name	ne of female applican						
Other name Residence Address:	ne of female applicantes and/or nicknames:						
Other name Residence Address:	ne of female applicantes and/or nicknames:  Street Address						Apartment/Unit #
	ne of female applicantes and/or nicknames:  Street Address  City						Apartment/Unit #  ZIP Code



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# **Haughton Police Department-**

Date Available:	Soci	al Security	y No.:			Desire	ed Salary: <u>\$</u>		
Driver's License #:		State and Class:			Expira	tion Date:			
Restrictions:	<u>.</u>								
Position Applied for:									
Are you a citizen of the U	nited States?	YES YES				orized to work in ars of age?	n the U.S.?	YES TYES	NO NO
Are you under 18 years o	f age?						safety position)		
Are you related to anyone Haughton?	of YES	NO If □ R	yes, Nam elationsh	ne: ip:					
Have you ever worked for Haughton?	r the Town of	YES	NO □ If	yes, whe	n? _				
Have you ever been conv	victed of a felony?	YES	NO □ If	yes, whe	n and w	here?			
Explain:									
			Educ	cation					
Grammar									
Junior High									
High School:			A	\ddress:_					
From:	To:	Did you g	raduate	YES	NO	Diploma:			
College:			Address	:					
Major			Mino	r					
Subjects:			Subjects	:					
From:	To:	Did you g	raduate	YES	NO	Degree:			
Other:			Address	:					
From:	To:	Did you g	raduate?	YES	NO	Degree:			
Scholastic Disciplinary Action taken against me:									
Professional Licenses or Certifications:									



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# **Haughton Police Department-**

Social/Fra Members	aternal/Civic :hips:			
Other Job Training:	o Related			
Professio Members				
		References		
Please li employe Full Name:	rs.	tizens who have known you during the last 5 ye		elatives or former  Relationship:
				Phone:
Address:				
Full Name:				Relationship:
Company				Phone:
Address:				
Full Name:				Relationship:
Company	/:			Phone:
Address:				
		Relatives		
Father:		Address	Age	Employer
Mother:				:
	Name	Address	Age	Employer
Brother:	Name	Address	Age	Employer
Brother:			·	
	Name	Address	Age	Employer
Sister:	-			<u></u>
0: .	Name	Address	Age	Employer
Sister:	Name	Address	Age	Employer
Wife:				
	Name	Address	Age	Fmplover



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### **Haughton Police Department-**

Husband:				<u>;</u>
	Name	Address	Age	Employer
Son:				<u> </u>
	Name	Address	Age	Employer
Son:				<u> </u>
	Name	Address	Age	Employer
Daughter:				<u></u>
	Name	Address	Age	Employer
Daughter:	: 			
	Name	Address	Age	Employer
		Residence Record		
Please lis	st all places you h	have resided during the last 2 years.		
Address:			From:	To:
Reason fo	or move:			
Address:			From:	To:
Reason for	or move:			
Address:			From:	To:
Reason fo	or move:			
Address:			From:	To:
Reason for	or move:			
Address:			From:	To:
Reason fo	or move:			
		Health		
	uffer from any physent manner?	sical or mental disability that would prevent you fron	n performing your jol	o duties in a safe YES NO
have	<del>_</del>	reated or confined for a mental disorder.		
ıı ııave, e	Λριαιιι. <u> </u>			
		Legal		
Please lis	st your traffic viola	ations during the past 3 years.		
	-		Date	):
				· :
				·

I have have not been arrested for any offense.



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☐ ☐ ☐ If have, explain:	
have have not  I	
have have not  I	
Miscellaneous Information	_
Special abilities which may be of value to the police department are:	
☐ Firearms ☐ Karate ☐ Automotive ☐ Construction ☐ Artwork	Legal
Photography Identification Music Aviation Accounting	
Other	
Duaviana Employment	
Please list employment record for the last 10 years beginning with your last (or pre-	sent) job and working backward
Company:	
Address:	Supervisor:
Job Title: Starting Salary:	Ending Salary:
Responsibilities:	
From: To: Reason for Leaving:	
May we contact your previous supervisor for a reference?	
Company:	Phone:
Address:	Supervisor:
Job Title: Starting Salary:	
Responsibilities:	Ending Salary:
	· · · · · · · · · · · · · · · · · · ·
From: To: Reason for Leaving:	· · · · · · · · · · · · · · · · · · ·



use unauthorized prescription drugs.

#### "Honor, Pride, Dignity"

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### Haughton Police Department-

Company:				Phone:	
Addross:					
Job Title:	Starting S			Ending Salar	y: <b>\$</b>
Responsibilities:					
From: To:_		Reason f	or Leaving:		
May we contact your previous supervis	sor for a reference?	YES	NO		
	Militar	y Service			
Branch:			_ From:		To:
Rank at Discharge:		_ Type of	Discharge:		
Date at Discharge:					
If other than honorable, explain:					
	Disclaimer	and Signat	ure		
I certify that:					
☐ I do not drink excessively	, <del>,</del>				
☐ I do not use illegal drugs,	controlled substances	, designer dru	ıgs, or any ot	her substance v	which may have the

I HEREBY AUTHORIZE a review and full disclosure of all information of record concerning myself to the Haughton Police Department related to educational background, medical, alcohol, drug abuse and psychological treatment and/or consolation, employment and pre-employment records, including background reports, efficiency ratings, and any other facts relating to my suitability for employment.

effect on the human body of being a narcotic, depressant, stimulant, hallucinogen, or cannabinoid, and I do not

I UNDERSTAND that any information obtained by a personal history background investigation will be considered in determining my suitability for employment by the Haughton Police Department. I understand and agree that as an applicant for employment and during the course of my employment with the Haughton Police Department, I am subject to and may be tested in the following manner: Psychological tests, polygraph tests, physical fitness tests, honesty tests, and drug screens.

I HEREBY RELIEVE, RELEASE AND HOLD HARMLESS THE Police Chief, his agents, and the individuals and/or agencies or institutions who supply requested information from any liability or damage which may result from furnishing the information requested above.



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### Haughton Police Department



I UNDERSTAND that the Haughton Police Department is responsible for enforcing the laws concerning the possession, use and distribution of controlled dangerous substances (C.D.S. – drugs) and alcoholic beverages and that the use, possession, concealment, transportation, promotion or sale of the following items or substances by any employee is strictly prohibited on or off duty: (1) illegal drugs, controlled substances (including trace amounts), designer drugs, or any other substance which may have the effect on the human body of being a narcotic, depressant, stimulant, hallucinogen or cannabinoid (herein called "drugs"); (2) unauthorized alcoholic beverages; (3) unauthorized items-drug paraphernalia; and (4) unauthorized prescription drugs. Use includes being on duty, or reporting for duty, with any detectable quantity of the above in the employee's system.

I WILL comply with the above policy and consent to testing for the presence of the above substances in my body as a part of the pre-employment processing, when I am considered for transfer or promotion, and at other times considered appropriate by the Police Chief.

I FURTHER UNDERSTAND AND AGREE that I have not been offered an employment contract or employment for any specified period of time, and that my employment can be terminated by the Police Chief or his designee at any time with or without cause, and with or without notice. I also understand that I may terminate my employment at any time, with or without cause, upon giving proper notice.

I CERTIFY that this application contains no willful misrepresentations of false statements, and I know of no legal or moral prohibitions against my employment by the Haughton Police Department.

IT IS FURTHER AGREED that in the event I am employed, information concerning such employment may be released to any future prospective employers.

Signature:	Date:
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