



UNIFIED POLICE

GREATER SALT LAKE

INSTRUCTIONS TO HUMAN RESOURCES: *Detach this form before processing application.*

The Unified Police Department is proud to be an Equal Employment Opportunity Employer committed to a diverse workforce. Please assist us by providing the information below. **THIS FORM IS VOLUNTARY AND WILL NOT BE USED IN THE EVALUATION OF YOUR APPLICATION**

PLEASE INDICATE THE POSITION FOR WHICH YOU ARE APPLYING:

PLEASE INDICATE HOW YOU HEARD ABOUT THIS POSTION:

PLEASE PLACE A CHECK IN THE APPROPRIATE BLANKS:

GENDER:

- Female
 Male

VETERAN:

- Yes
 No

DISABLED:

- Yes
 No

40 OR OVER:

- Yes
 No

WHICH RACIAL OR ETHNIC GROUP DO YOU IDENTIFY WITH?

- White
 Black
 American Indian/Alaskan Native
 Asian
 Hispanic
 Native Hawaiian/Pacific Islander
 Other



POLICE OFFICER EMPLOYMENT APPLICATION

APPLICANT INFORMATION

| | | | | | | | |
|-----------------|--|--------|-----------------|-------------------------|------|------|--|
| Last Name: | | First: | | M.I.: | | DOB: | |
| Street Address: | | | | Social Security Number: | | | |
| City: | | State: | | | Zip: | | |
| Phone: | | | E-Mail Address: | | | | |

PLEASE ANSWER THE FOLLOWING QUESTIONS

| | |
|--|--|
| Are you a citizen of the United States? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you at least 21 years of age. (must be 21 years old by October 1, 2019) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever been convicted of a felony? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you been convicted of DUI in the last 2 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you used marijuana in the last 2 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you used any illegal drugs in the last 5 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you obtained a High School diploma or GED? | <input type="checkbox"/> Yes <input type="checkbox"/> No Please provide copy of diploma |
| Do you or your spouse claim Veteran's Preference? | <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide DD-214 or enlistment doc. |
| Do you have a valid driver's license? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you passed the NPOST test with a total score of 80% or better? | <input type="checkbox"/> Yes <input type="checkbox"/> No Copy of results must be submitted no later than September 19, 2019 by 5:00pm. |
| Are you POST Certified in the state of Utah? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, What is your level of certification? | <input type="checkbox"/> SFO <input type="checkbox"/> LEO Please provide a copy of certifications |
| Do you have working experience as a Law Enforcement Officer? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If Yes, please describe your experience below: _____ _____ _____ |

| EDUCATION (TO RECEIVE PREFERENCE POINTS FOR YOUR EDUCATION YOU MUST PROVIDE A COPY OF OFFICIAL TRANSCRIPTS) | | | |
|--|----|-------------------|---|
| College | | Location | |
| From: | to | Did you graduate? | <input type="checkbox"/> Yes <input type="checkbox"/> No Degree |
| College | | Location | |
| From: | to | Did you graduate? | <input type="checkbox"/> Yes <input type="checkbox"/> No Degree |

| PREVIOUS EMPLOYMENT (Last 10 years or to your 16th birthday) | | | |
|--|--------------------|--|--|
| Company | | Phone | |
| Address | | Supervisor | |
| Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> | | Supervisor Title | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From: to | | Reason for leaving | |
| May we contact your previous supervisor for a reference? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | |
|---|--------------------|--|--|
| Company | | Phone | |
| Address | | Supervisor | |
| Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> | | Supervisor Title | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From: to | | Reason for leaving | |
| May we contact your previous supervisor for a reference? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | |
|---|--------------------|--|--|
| Company | | Phone | |
| Address | | Supervisor | |
| Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> | | Supervisor Title | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From: to | | Reason for leaving | |
| May we contact your previous supervisor for a reference? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | |
|---|--------------------|--------------------|--|
| Company | | Phone | |
| Address | | Supervisor | |
| Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> | | Supervisor Title | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From: _____ to _____ | | Reason for leaving | |
| May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

| | | | |
|---|--------------------|--------------------|--|
| Company | | Phone | |
| Address | | Supervisor | |
| Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> | | Supervisor Title | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From: _____ to _____ | | Reason for leaving | |
| May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

**Attach Additional Sheets If Necessary (please provide a minimum of 10 years work experience)

| | |
|---|---------------------------|
| MILITARY SERVICE | |
| Do you have military service in the Armed Forces of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| If yes, what Branch? | Dates of service: |
| Highest rank held: | Type of duty: |
| Type of discharge: | Military serial number: |
| Do you have a reserve obligation? | Selective service number: |

| | |
|---|--|
| SUPPLEMENTAL QUESTIONNAIRE (**Attach additional sheets if necessary**) | |
| Have you taken any extended work absences for reasons other than earned vacations? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain (include when, names of employer, and why). _____ _____ _____ | |
| Have you ever been disciplined, suspended, or placed on leave without final pay for a violation of work place policies or procedures? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, please give details. _____ _____ _____ | |

UPD Policy describes Misrepresentation under the Conduct Section as follows: With reference to their official duties, members will not make false statements, falsify records, or knowingly allow incorrect statements or records to be accepted as valid.

Have you ever been accused of misrepresentation, or a similar policy violation as described above, during a work investigation, whether official or unofficial?

YES NO If yes, please describe the circumstances and whether the allegation was sustained, unfounded, or unresolved.

Have you ever been the subject of any judicial or non-judicial disciplinary action resulting from your employment?

YES NO If yes, please give details.

Have you ever been fired, asked to resign, or given the option to resign from any place of employment?

YES NO If yes, please give details.

FINANCIAL

The management of personal finances may be relevant to an individual's qualification for police department employment. Please answer the questions below. Be complete and accurate. The amount of indebtedness in itself will not be used in evaluation your qualifications, but rather the behavior exhibited in meeting financial obligations.

Within the last 10 years, have you filed or declared bankruptcy or filed for the Wage Earners Plan?

YES NO If yes, please give details (include when, where, why and amount).

Have any of your bills ever been turned over to a collection agency?

YES NO If yes, please give details (include when, firms involved and circumstances).

Have your paychecks ever been garnished?

YES NO If yes, please explain.

Have you ever had purchased goods repossessed?

YES NO If yes please give details (include when, firms involved, and circumstances for each occurrence).

Have you ever been delinquent on child support, alimony, or income or other tax payments?

YES NO If yes, please give details (include when, where, name and location of court, circumstances).

LEGAL

Have you ever been convicted of a crime?

YES NO If yes, please give details

Have you ever been convicted in a Juvenile Court for an act which would have been a crime if committed by an adult?

YES NO If yes, please give details (include when, where, name and location of court, circumstances).

Are you now or have you ever been involved as a plaintiff or a defendant in any civil action except for divorce? YES NO If yes, please give details

MOTOR VEHICLE OPERATION

Have you ever been refused a motor vehicle operator's license by the State of Utah or any other state?

YES NO If yes, please give details

Has your motor vehicle operator's license ever been suspended or revoked?

YES NO If yes, state when, where and why.

Has your motor vehicle operator's license ever been placed on probation? If yes, please give details.

Please list all traffic citations (excluding parking citations) you have received within the last **five years** (for Reckless Driving or Driving Under the Influence of Alcohol, please list all and explain below regardless of date).

| Nature of Violation | Location | Approx. Date | Result |
|---------------------|----------|--------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Have you ever been arrested for driving under the influence of alcohol and/or drugs or reckless driving?

YES NO Date: _____

Arresting Agency: _____

Agency Case #: _____ Court Docket #: _____

Details and Disposition: _____

Have you ever been involved, as a driver, in a motor vehicle accident within the last five years?

YES NO If yes, please give details for each accident.

Date: _____ Police Agency: _____

Location: _____ Injury: _____ Non-Injury: _____ Police Investigation: YES NO

Details and Disposition: _____

Date: _____ Police Agency: _____

Location: _____ Injury: _____ Non-Injury: _____ Police Investigation: YES NO

Details and Disposition: _____

ALCOHOL AND DRUG USE

Do you drink alcoholic beverages?

YES NO If yes, how often do you drink? _____

Have you participated in a "supervised rehabilitation program" for drugs or alcohol?

YES NO If yes, give the name and address of the program and dates of attendance/participation.

Program: _____ Phone: _____

Beginning: _____ Ending: _____

Have you used alcohol since your last rehabilitation program?

YES NO

Have you used illicit drugs since your last rehabilitation program?

YES NO

What, if any, drugs were you addicted to?

Have you used any of the following drugs Illegally within the last five years? YES NO

If yes, mark which drug was used, state the approximate date you last used the drug, and how many times you used the drug.

| X | TYPE | APPROXIMATE LAST DATE OF USE | HOW MANY TIMES |
|---|----------------------|------------------------------|----------------|
| | Heroin | | |
| | Cocaine | | |
| | PCP | | |
| | Percodan | | |
| | Tai Sticks | | |
| | Quaaludes | | |
| | Crank | | |
| | Morphine | | |
| | LSD | | |
| | Crack | | |
| | Mescaline | | |
| | Peyote | | |
| | Opium | | |
| | Demerol | | |
| | Methadone | | |
| | Psilocybin/Mushrooms | | |
| | Amphetamine injected | | |

Have you used any of the following drugs within the last **two years**?

YES NO If yes, mark which drug was used, state the approximate date you last used the drug, and how many times you used the drug.

| X | TYPE | APPROXIMATE LAST DATE OF USE | HOW MANY TIMES |
|---|---|------------------------------|----------------|
| | Marijuana | | |
| | Hashish | | |
| | Amyl Nitrates | | |
| | Anabolic Steroids | | |
| | Amphetamines not injected | | |
| | Prescription medication not prescribed to you | | |
| | Other (please identify) | | |

Under what circumstances were any of the above substances used?

PEACE OFFICER CERTIFICATION AND TRAINING

Are you currently or have you in the past been Peace Officer Standards and Training (POST) certified in Utah or elsewhere?

YES NO If yes, please give details (include when, where, category or kind of status).

If certified, please attach a detailed copy of your in-service training received since POST training, as well as any other information you wish to include with this application.

DISCLAIMER AND SIGNATURE

*I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature _____ Date _____

Return to: **UNIFIED POLICE DEPARTMENT HR, 3365 S. 900 W. #121, Salt Lake City, UT 84119**

Application Check List

(failure to submit the listed items will result in disqualification or denial of preference points)

| Item | Check List | Due Date |
|--|---|-------------------------|
| Completed and signed UPD Application | <input type="checkbox"/> (Mandatory) | Sept. 19, 2019 @ 5:00pm |
| Copy of High School diploma or GED (College Degree can be substituted) | <input type="checkbox"/> (Mandatory) | |
| Copy of DD-214/enlistment paperwork | <input type="checkbox"/> (if claiming Veteran or Disabled Veteran Preference) | |
| Copy of Utah POST Certification(s) | <input type="checkbox"/> (If claiming POST Certification Preference) | |
| Copy of Degree or Official Transcripts | <input type="checkbox"/> (if claiming Education Preference) | |
| NPOST Exam Scores (must score 80% or better) | <input type="checkbox"/> (Mandatory) | Sept. 19, 2019 @ 5:00pm |

Please return completed applications with attachments to the Unified Police Department Human Resources Division located at:

UPD Human Resources
3365 S. 900 W.
SLC, UT 84119

If you are mailing your application, please send it to the following address:

UPD Human Resources
Attn: Sergeant Jeff Andreason
3365 S. 900 W.
SLC, UT 84119

If you have any questions, please contact Sergeant Jeff Andreason at email: jandreason@updsl.org or phone: (385) 468-9667.

****Application and Attachments received after the deadline of September 19, 2019 at 5:00pm will not be accepted.**

****NPOST Results may be submitted up until September 19, 2019 at 5:00pm. Any received after that time will not be accepted.**