

# LAKE PLACID POLICE DEPARTMENT

8 North Oak Street  
Lake Placid, Florida 33852- 5591

Phone: (863) 699-3757  
Website • [www.lppd.com](http://www.lppd.com)  
Fax: (863) 699-3760

## APPLICATION FOR EMPLOYMENT

**POSITION DESIRED** \_\_\_\_\_ **DATE** \_\_\_\_\_

This application must be submitted to the Lake Placid Police Department together with all documentation described on page 11 of this application packet. All documentation must be present for a background investigation to begin. The Lake Placid Police Department conducts polygraph interviews prior to hire, and a background investigation.

### INSTRUCTIONS

Applications must be typewritten or printed legibly in black ink. All questions must be answered. If space provided is not sufficient for complete answer or you wish to furnish additional information, attach sheets of the same size to this application and number answers to correspond with questions.

### PERSONAL HISTORY

1. FULL NAME:

\_\_\_\_\_  
LAST NAME FIRST MIDDLE

\_\_\_\_\_  
RESIDENCE ADDRESS MAILING ADDRESS

\_\_\_\_\_  
CITY COUNTY STATE ZIP

\_\_\_\_\_  
TELEPHONE NUMBER HOME OTHER

2. SOCIAL SECURITY NUMBER: \_\_\_\_\_

3. DRIVERS LICENSE NUMBER: \_\_\_\_\_ STATE ISSUED: \_\_\_\_\_

4. OTHER: LIST ALL OTHER NAMES YOU HAVE USED INCLUDING CIRCUMSTANCES AND TIME PERIODS YOU USED THEM. FOR EXAMPLE; FORMER NAME(S), MAIDEN NAME(S), ALIAS(S), AND NICKNAME(S):

NAMES	CIRCUMSTANCE	DATES FROM - MO. / YR-	DATES TO - MO. / YR.

5. Date of Birth: \_\_\_\_\_

*The Town of Lake Placid is an Equal Employment Opportunity Employer. We consider applicants for all positions without regard to race, color, national origin, sex, age, handicap, marital status, religion or any other legally protected status*

6. Are you a United States citizen?  Yes  No Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No

**OFFICE USE ONLY**  
**DATE SUBMITTED** \_\_\_\_\_

If naturalized, please provide \_\_\_\_\_  
DATE PLACE  
 \_\_\_\_\_  
COURT NATURALIZATION NUMBER

7. Have you ever filed an application with us before?  Yes  No Dates \_\_\_\_\_
8. Have you ever been employed by us before?  Yes  No Dates \_\_\_\_\_

**EDUCATION / TRAINING**

1.

High School Name / Address	Dates Attended - Mo. / Yr.		Years Completed	Did You Graduate?	Type of Diploma
	From	- To			

2.

College / University Name / Address	Dates Attended - Mo. / Yr.		Credit Hours Earned		Did You Graduate?	Type of Degree
	From	To	Qtr.	Sem.		

Major \_\_\_\_\_ Minor \_\_\_\_\_

3. Other Schools (Trade, Vocational, Business, Police Academies or Military):

Name / Address	Dates Attended - Mo. / Yr.		Credit Hours Earned	Area of Study	Did You Graduate?	Type of Degree or Certificate
	From	To				

4. Describe any awards, honors, citations or other special recognition you received while attending school and positions held in school organizations:  
 \_\_\_\_\_  
 \_\_\_\_\_

5. Indicate any law enforcement education / training:  
 \_\_\_\_\_

6. Did you receive a certificate for this training?  Yes  No  
 Certificate number \_\_\_\_\_

6A. Are you currently certified as a Florida Law Enforcement Officer? Yes   
 No

7. Indicate any special skills you possess and equipment you can use which may be related to the position for which you are applying: (i.e., breathalyzer, speed detection equipment, firearms, computers):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. Describe any word processing or computer skills and list all software you are able to use:

9. State approximate number of words per minute: Typing \_\_\_\_\_ Shorthand \_\_\_\_\_

10. On what date are you available for work? \_\_\_\_\_

11. Are you available to work?  Full Time  Part Time

12. Are you available to work rotating shifts?  Yes  No

**EMPLOYMENT HISTORY**

1. List chronologically all employment including current employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, set forth dates of unemployment

Name & Address of Employer	Dates Worked Mo. / Yr.		Salary	Your Title or Position	Name Of Supervisor	Reason for Leaving
	From	To				
NAME						
Address Phone						
City State ZIP						
Name						
Address Phone						
City State ZIP						
Name						
Address Phone						
City State ZIP						
Name						
Address Phone						
City State ZIP						
Name						
Address Phone						
City State ZIP						

2. Have you ever been dismissed or asked to resign or had any disciplinary action taken against you from any employment or position you have held? If yes, please explain in detail.  Yes  No

3. Have you resigned, or left a job by mutual agreement following allegations of misconduct or unsatisfactory job performance?  
 Yes  No If yes, please provide details. \_\_\_\_\_

4. May we contact your present employer?  Yes  No

5. Have you ever had to manage money routinely as a part of your job description ? \_\_\_\_\_  
 Yes  No If yes, please provide name of employer and date of service.

6. Do you own a business, or are you a partner or corporate officer in any business or organization not listed previously as a current or former employer?  Yes  No If yes, please provide name and address of business, corporation or organization and describe your relationship or position.

### ORGANIZATION MEMBERSHIP

1. List all clubs, societies and volunteer organizations of which you are or have been a member:

Name	City & State	Former Member	Present Member List position held (describe activity)

### ARREST HISTORY / COURT DATA

1. Have you ever been arrested, charged or received a notice or summons to appear for any criminal violations?  
 Yes  No

2. Have you ever been convicted of a felony?  Yes  No  
 If yes to question #1, list all such matters even if not formally charged, or no court appearance, or found not guilty, or nolo contendere to any charge for which adjudication was withheld, or matter settled by payment of fine or forfeiture of collateral. (include your juvenile charges and charges which have been sealed, if any.)

Under name	Place & Department	Charge	Court & Place	Date of Charge	Disposition

Provide details on an attached narrative of any past experiences you have had with law enforcement or any investigative agency where you have been investigated, suspected regarding any crime, or where police have been called due to an incident you were involved in. Provide jurisdiction where the event occurred and an approximate date.

---



---



---



---



---



---



---



---

## PERSONAL REFERENCES & ACQUAINTANCES

**1. Personal References: Give three (5) references (not relatives, former or present employer, fellow employees, or school teachers) who are responsible adults of reputable standing in their communities, such as property owners, business or professional men or women, who have known you well for the past five (5) years. If retired, give former occupation.**

<b>Complete Name</b>		Home Address: _____
		City, State & Zip: _____
Yrs. Acq.		Home Phone: (    ) _____
		Business Address: _____
		City, State & Zip: _____
<b>Complete Name</b>		Home Address: _____
		City, State & Zip: _____
Yrs. Acq.		Home Phone: (    ) _____
		Business Address: _____
		City, State & Zip: _____
<b>Complete Name</b>		Home Address: _____
		City, State & Zip: _____
Yrs. Acq.	<b>Occupation</b>	Home Phone: (    ) _____
		Business Address: _____
		City, State & Zip: _____
<b>Complete Name</b>		Home Address: _____
		City, State & Zip: _____
Yrs. Acq.	<b>Occupation</b>	Home Phone: (    ) _____
		Business Address: _____
		City, State & Zip: _____
<b>Complete Name</b>		Home Address: _____
		City, State & Zip: _____
Yrs. Acq.	<b>Occupation</b>	Home Phone: (    ) _____
		Business Address: _____
		City, State & Zip: _____

Occasionally the format of an employment application makes it difficult for an individual to adequately summarize one's complete background. Use the space below to provide any additional information necessary to describe your full qualifications for the position applied. ATTENTION IT IS YOUR RESPONSIBILITY TO MAKE SURE THE POLICE DEPARTMENT CAN CONTACT YOUR REFERENCES WHEN THE BACKGROUND INVESTIGATION IS ACCOMPLISHED.

## APPLICANT'S CERTIFICATION

I understand that, in submitting this application for employment or appointment, I agree to abide by the following terms and conditions :

My appointment or employment will be contingent upon the results of a complete background investigation. Any omission, falsification, omission or misrepresentation may disqualify me as an applicant or cause my dismissal from the Lake Placid Police Department. All statements made by me on this application are true, correct and, complete, to the best of my knowledge.

I consent to a pre-employment drug test.

My employment or appointment will be contingent upon the results of a complete drug test I may be required to take drug tests during the term of my employment or appointment with the Lake Placid Police Department.

I authorize all persons and organizations referenced in this application to furnish the Lake Placid Police Department information, personal or otherwise, regarding my ability and fitness for employment or appointment. I relieve all such parties from any and all liability for any damage that might result from furnishing such information to the Lake Placid

I understand that this employment application shall become the property of the Lake Placid Police Department. The application and information received in response to the background investigation are public records.

If employed by, or appointed to, the Lake Placid Police Department, I accept and agree to abide by the following conditions:

I will obey and abide by all directives, procedures, rules, regulations and General Orders issued by the Lake Placid Police Department and its official representatives.

In the event that I am eligible for, and accumulate, overtime work hours, the Lake Placid Police Department may, at its option, adjust my work schedule, grant me compensation time or reimburse me monetarily.

---

Applicants Signature

---

Date