

DELMAR, DELAWARE-MARYLAND POLICE DEPARTMENT

HAROLD E. SAYLOR
Chief of Police

FAX 410-896-3870
www.delmarpolice.com

STATE
OF
DELAWARE

P.O. BOX 11
DELMAR, DE 19940
302-846-2320



STATE
OF
MARYLAND

400 S. PENN. AVE.
DELMAR, MD 21875
410-896-3131

To All Applicants:

1. Upon Completion please return:

- a. Completed Application and Personal History statement
- b. Copies of Birth Certificate and Social Security Card
- c. Copies of High School Diploma or GED, along with any other degrees or diplomas.
- d. Signed and Notarized Forms including
 - Release of Medical Records Authorization
 - Release of Information
 - Waiver of Liability for Physical Agility Test
 - Statement of Truthfulness

2. In addition all applicants must provide:

- a. Recent photograph of applicant
- b. Certified copy of driving record (available from the Motor Vehicle Administration at a nominal cost)

***Incomplete Applications may be rejected.

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

All applicants are considered without regard to race, color, gender, religion, national origin, age, marital or veteran status, mental or physical disability unrelated to job performance or any other legally protected status.

POSITION APPLYING FOR: _____ DATE: _____

PERSONAL INFORMATION

Legal name: First _____ Last _____ Middle Initial _____

Address: Street _____ City _____ State _____ Zip code _____

Date of Birth: _____ Race: _____ Sex: _____ Social Security # _____

Home Telephone: _____ Work Telephone: _____

Cell Phone: _____ E-mail: _____

Driver's License #: _____ State: _____

Are you legally eligible for employment in the United States? Yes No

Have you been convicted of a felony or misdemeanor? Yes No

If yes, please explain circumstances: _____

Are you at least 18 years old? Yes No

POSITION INFORMATION

Position(s) applying for: _____ Salary desired: \$ _____

Employment status desired: Full Time Part Time Temporary

What hours are you available to work? _____

If hired, when could you start? _____

EDUCATION

Type of school	Name and Location	Dates Attended	Degree Received	Subjects Studied	Did you graduate?
High School					
College / University					
Graduate School					
Tech School					
Other					

Special courses, training or experience acquired, including military experience: _____

SKILLS

Clerical / Office skills		
Computer skills	Name of software:	<input type="checkbox"/> PC <input type="checkbox"/> Mac <input type="checkbox"/> WPM
Languages		
Other special knowledge or skills		

Please describe any other experience, abilities or skills that might be helpful in considering your application: _____

Personal References (Not Former Employers or Relatives)

Name	Address	Phone Number
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1

2

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Applicant Data Record

Qualified applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap.

Solely to help us comply with government record keeping reporting, and other legal requirements, please fill out the Data Record.

This Data is for periodic government reporting and will be kept in a Confidential File separate from the Application for Employment.

Date of Application: _____

Position(s) Applied for _____
(The designation of a specific position will not exclude you from being considered for any other position for which you are qualified.)

Name:

Last	First	Middle
------	-------	--------

Address:

Number	Street	City	State	Zip
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Phone: (____) _____ Social Security No. _____

Referral Source: _____ Advertisement _____ State Employment Office
 _____ Employment Agency _____ Walk-In
 _____ Personal Contact _____ College Placement Service
 _____ Other

Government Agencies require periodic reports on the sex, ethnicity, handicapped, and veteran status of applicants. This data is for analysis only. Submission of information about a handicap is voluntary.

Check one: _____ Male _____ Female

Check one of the Following: _____ White _____ Black _____ Hispanic
 _____ American Indian / Alaskan Native
 _____ Asian / Pacific Islander

Check If Any of the Following Are Applicable:

_____ Veteran _____ Disabled Veteran _____ Handicapped Individual

CERTIFICATION & AUTHORIZATION

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or omissions of facts in this application are grounds for disqualification from further consideration or for dismissal from employment.

I authorize the company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position.

If employed, I agree to conform to the rules, regulations and policies of the company. I understand that I will be an employee "at will" and either the company or I may terminate my employment relationship at any time for any reason not in violation of law.

I hereby acknowledge that I have read and fully understand the forgoing and seek employment under these conditions.

Signature of Applicant

Date

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Authorization For Release of Medical Records (Upon conditional offer of employment)

I, _____ do hereby authorize a review and full disclosure of all medical records or any part thereof, concerning myself, by and to a duly authorized agent of the Delmar Police Department, whether the said records are of a public, private, or confidential nature.

Name: _____

Signature: _____

Date of Birth: _____

Social Security Number: _____

Subscribed and Sworn to Before Me This _____ day of _____, 20__.

Notary Public

My Commission Expires: _____

SEAL

DELMAR, DELAWARE-MARYLAND POLICE DEPARTMENT

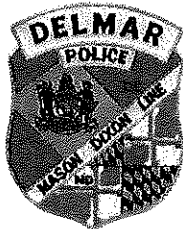
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Authorization for Release of Information

I do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself to any duly authorized agent of the Delmar Police Department, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature. The intent of this authorization is to provide pertinent information which will be utilized for investigative information.

I understand that this investigation will include, but not limited to, records of educational institutions; financial or credit institutions, along with records of commercial or retail mercantile establishments; all medical and psychiatric records of treatment or consultations; any and all work records including any previous background investigations, efficiency reports or evaluations, complaints or grievances filed by or against me; records of a civil nature involving complaints filed by or against me; and records of any violations of criminal or traffic laws.

I also authorize further investigation into my personal life in order to facilitate any decision regarding my suitability for the position of Police Communications Officer / Records Clerk with the Delmar Police Department.

A photocopy of this release form will be valid as an original hereof, even though the photocopy does not contain an original writing of my signature.

Applicant's Signature

Date

Applicant's Social Security Number

Applicant's Printed Name

Date of Birth

On this _____ day of _____, 20____, before a Notary Public, the undersigned individual personally appeared, known to me (or satisfactorily proven) to be the person whose name is subscribed to herein and acknowledged that he/she executed the same in the capacity therein stated and for the purposes therein contained. In witness whereof, I here unto set my hand and official seal.

Notary Seal

Signature of Notary Public

Delmar Police Department
Part-Time Position
Police Communications Officer/Records Clerk

The Delmar Police Department is now accepting applications for the position of Police Communications Officer/Records Clerk. Qualifications for applicants are as follows:

- 18 years old at time of appointment;
- U.S. citizen;
- High school diploma or GED;
- Applicant must pass an extensive background investigation

Required knowledge, skills and abilities, Must be able to work under stressful situations Have exceptional speaking and listening skills; be able to coordinate and concentrate skills in order to successfully complete numerous tasks simultaneously; be able to work both independently and as part of a team; know and understand the communications system with which he/she works; understand FCC rules and regulations which affect his/her job. Know the geography, the operations and procedures and the jurisdictional authority of the agency served by the Communications Center; be able to accurately summarize any source of information, interpret it in correct terminology, and relay it clearly, promptly, and concisely; Basic knowledge of office procedures and equipment; ability to deal courteously but effectively with the public; thorough knowledge of the operation of computers; ability to type 40 WPM. **Must be able to travel for training.**

This position is for 25 hours per week and will be a 3:00p.m. - 11p.m. shift after training

Benefits: Monday thru Friday

Applications and information will be available Monday thru Friday from 9:00 a.m. to 4:00 p.m. Contact:

Delmar Police Department
400 S. Pennsylvania Avenue
Delmar, Maryland 21875

The Town of Delmar is an Equal Opportunity Employer