

NOTICE

POLICE OFFICER APPLICANTS

To apply for the POLICE OFFICER position, we must have the following **at the time of application**:

1. Completed Northfield Township Police Officer Application Form
2. Photocopy of Michigan Driver's License
3. Copy of College Transcripts
4. Copy of Police Officer Certification from State of Michigan
OR
Proof of current enrollment in Police Academy
5. Copy of certification of successful completion of MCOLES Reading and Writing Skills Examination and Physical Skills Performance Test.

NORTHFIELD TOWNSHIP POLICE DEPARTMENT APPLICATION

Position you are seeking:		
	Full-Time Police Officer	(Must be M.C.O.L.E.S. Certified or Certifiable)
	Part-Time Police Officer	(Must be M.C.O.L.E.S. Certified or Certifiable)
	Reserve Police Officer	(Non-Certified Position)
	Clerk/Dispatcher	(Non-Certified Position)

FULL NAME				DATE OF BIRTH	
CURRENT ADDRESS					YEARS AT CURRENT ADDRESS
SOCIAL SECURITY NUMBER		HEIGHT	WEIGHT	DRIVER'S LICENSE NUMBER	
U.S. CITIZEN (YES OR NO)	PLACE OF BIRTH (City & State)	IF NATURALIZED CITIZEN -DATE?		LOCATION	CERTIFICATION NUMBER
HOME PHONE NUMBER		WORK PHONE NUMBER	PAGER NUMBER	CELLULAR PHONE NUMBER	

IF LESS THAN SIX (6) MONTHS AT CURRENT ADDRESS, LIST PREVIOUS ADDRESS(ES) BELOW	
DATE (From-To)	ADDRESS (Street and Number, City, State, Zip)

LIST LAST THREE (3) SCHOOLS ATTENDED, <i>STARTING WITH LAST ONE.</i>					
SCHOOL	NO OF YEARS COMPLETED	DEGREE/DIPLOMA	GPA CLASS RANK	MAJOR	MINOR

HAVE YOU EVER SERVED IN THE UNITED STATES ARMED FORCES, INCLUDING GUARD OR RESERVE? YES OR NO: If yes, indicate below all military service.					
DATE		BRANCH	HIGHEST RANK HELD	PRIMARY DUTY	TYPE OF DISCHARGE
FROM (mo/yr)	TO (mo/yr)				

LIST YOUR LAST TWO (2) EMPLOYERS, STARTING WITH YOUR MOST RECENT/CURRENT.

NAME & ADDRESS OF EMPLOYER (STREET, CITY, STATE, ZIP CODE)	PHONE NUMBER	SUPERVISORS NAME	FROM & TO (MO/YR)	POSITION & TYPE OF REPORT	REASON FOR LEAVING
1.					
2.					

Were you ever DISCHARGED or ASKED TO RESIGN from any employment?

YES NO If yes, give details of discharge or forced resignations on an attached piece of paper.
 Include Employer, Employer's Address, Date, and Reason for Discharge.

Have you ever been arrested, detained, or taken into custody by a Federal, State, or Local Law Enforcement agency in the United States or any Foreign land as a juvenile, or as in an adult, for any criminal charge or civil law-related offense?

YES NO If yes, explain in detail, listing date(s), agencies involved, charge, disposition and Sentence on an attached piece of paper.

AFFIDAVIT

Application must be signed in front of a Notary Public:

Applicant's signature

On this _____ day of _____ 2018

Before me personally appeared

Print applicant's name in full

who, being duly sworn, deposes and affirms (s)he has read the forgoing and subscribes that (s)he understands the contents thereof that the information written by the applicant is true to the best of the applicant's knowledge and belief. The applicant is also aware and understands that any material misrepresentation of fact given by the applicant shall be cause for rejection before appointment or dismissal from the department after appointment.

Notary Public	My Commission Expires
---------------	-----------------------

AUTHORITY TO RELEASE INFORMATION

NAME: Last	First	Middle	
Other Names (AKA's, maiden name)			
Date of Birth	Social Security Number	Driver's License Number	State

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

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and to disclosure of records, and I waive those rights with the understanding that the information furnished will only be used by the Northfield Township Police Department for employment purposes.

The intent of this authorization is to give my consent for the full and complete disclosure of the records of educational institutions, financial or credit institutions, including records of deposits, withdrawals and balances of checking and savings accounts, and loans, and also the records of commercial or retail credit agencies (including credit reports and/or ratings); public utility companies, insurance companies, rental agents and landlords; employment and pre-employment records, including background reports, efficiency ratings, internal investigations, complaints or grievances filed by or against me, and salary records; income, real and personal property tax statements and records, and other financial statements and records wherever filed. I also authorize the release of records of complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal, civil and/or traffic records, as well as records that have been sealed, expunged, set aside, or filed under the Holmes Youthful Trainee Act, including records of complaint of a civil nature made by or against me, wheresoever located, and to include records and recollections of attorneys at law, or of other counsel, whether representing another person in any case in which I presently have, or have had an interest.

I understand that the intent of this authorization is to provide full access to my background and personal history for the specific purpose of a background investigation to provide data to the Northfield Township Police Department to determine my suitability for employment by that department. It is my specific intent to provide access to information, whether personal or confidential.

I understand that any information obtained by personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Northfield Township Police Department. I understand that all materials and information pertaining to this background investigation become the property of the Northfield Township Police Department and will not be returned or disclosed to me. I understand that the information you release is for official use by the Northfield Township Police Department; and may be re-disclosed to a third party if said party has a Release authorized by me or as provided by law.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. This authorization shall continue in effect until revoked by me in writing. Should there be any question as to the validity of this Release, you may contact me at the address listed on this form. I agree to pay any and all charges or fees concerning this request and can be billed for such charges at the address listed below. I further understand that in the event that my application is disapproved, all information including confidential information and confidential sources shall not be revealed to me.

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

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

	SIGNATURE OF APPLICANT	DATE
Current Address		
Subscribed and sworn before me on this _____ day of _____ 20____		
Notary	My Commission Expires	Telephone Number

WAIVER & AUTHORIZATION FOR RELEASE OF INFORMATION

Sections A & B to be completed by all applicants (non-licensed, currently licensed, or previously licensed law enforcement officers)

Section A - Type or print only:

Last Name:	First Name:	Middle Name:	Suffix (Jr, Sr, III):	
Social Security No.*:	Date of Birth:	Phone No.:	Gender [‡] :	Race [‡] :
Residence Address (Street, City, State, Zip):			Highest Degree:	
Drivers License No.:	Issuing State:	E-Mail:		

Section B – Authorization for release of information:

I hereby authorize any individual, agency or organization to furnish to the Michigan Commission on Law Enforcement Standards, the Northfield Township Police Department¹, their representatives and/or agents (including, but not limited to, academies or contractors) any and all information pertaining to my background and ability to comply with the standards for selection, employment, training and licensing as a law enforcement officer. Such information includes, but is not necessarily limited to: employment, criminal, academic, military, and personal histories; academic, attendance, and driving records; and medical records (includes medical/psychological, including diagnosis and prognosis, if any).

I hereby authorize any individual, agency or organization to release such information upon request. This authorization is executed with the full knowledge and understanding that the information is for official use by the Michigan Commission on Law Enforcement Standards and the Northfield Township Police Department¹.

Further, I hereby authorize the Michigan Commission on Law Enforcement Standards to release any and all records collected pursuant to this authorization to any individual, agency or organization for the legitimate purposes of fulfilling the Commission's statutory and administrative objectives.

I hereby release any individual, agency or organization, including its officers, employees and related personnel, both individually and collectively, from any and all damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this Authorization for Release of Information, or any attempt to comply with it.

This Authorization shall continue in effect until revoked by me in writing. A photostatic copy of this Authorization shall have the same force as the original.

Applicant Signature:	Today's Date:
----------------------	---------------

*****Section C to be completed by current or previously licensed law enforcement officers only*****

Section C – Former Michigan employing law enforcement agency authorization:

I hereby authorize any and all of my former employing Michigan law enforcement agencies to provide the Northfield Township Police Department¹, with a copy of the record regarding the reason or reasons for, and circumstances surrounding, my separation of service created by any former employing law enforcement agency or agencies. ***(Under 2017 PA 128, MCL§28.561, et seq. a hiring law enforcement agency shall not hire a law enforcement officer unless the hiring law enforcement agency receives the record regarding the reason or reasons for, and circumstances surrounding, a separation of service from each prior employing law enforcement agency.)***

Applicant signature:	Today's Date:
----------------------	---------------

AUTHORITY:	1965 PA 203; 2017 PA 128
COMPLIANCE:	Voluntary
PENALTY:	No License Activation/ Employment/ Academy Enrollment

* This information is confidential. Confidential information is protected by the Federal Privacy Act.

‡ This information is for the purposes of EEO reporting only.

¹ Type or print the name of the hiring law enforcement agency or the enrolling academy.