

# TOLEDO POLICE DEPARTMENT

- The attached application must be filled out completely. Should the application be received incomplete, it will be returned to you for further information.
- If a question is not applicable to you, enter N/A in the space provided.
- This application must be accompanied by a copy of your law enforcement certificate, birth certificate and proof of high school education or equivalent. Any other training you have may also be attached if you feel it might assist us in considering your application.
- If there is insufficient space on the form for you to include all information required, attach extra sheets to the applications. Be sure to reference the relevant section before continuing your answer.

*Please return application to:*

Toledo City Hall  
PO Box 236  
130 N. Second Street  
Toledo, WA 98591  
Email: [cityoftoledo@toledotel.com](mailto:cityoftoledo@toledotel.com)



# TOLEDO POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

Qualified applicants receive consideration for employment with the Toledo Police Department without discrimination on any basis. Conditions for employment are stated at the end of this application. Please read these conditions carefully before signing this application. False statements on this application form shall be considered sufficient cause for non-employment or terminations. Please attach resume.

**PERSONAL** (Please Print clearly or Type)

Name \_\_\_\_\_  
Last First Middle

Other Names/Aliases (including nicknames) you have used or been known by  
\_\_\_\_\_

Address \_\_\_\_\_  
Street/PO Box City State Zip

Contact # (s) \_\_\_\_\_  
Telephone # Cell Phone #

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Month Day Year

THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO PERSONS WHO ARE AT LEAST 40 BUT LESS THAN 70 YEARS OF AGE

Social Security # \_\_\_\_\_  
THE SSN WILL BE USED FOR IDENTIFICATION PURPOSES ONLY TO ENSURE THAT PROPER RECORDS ARE OBTAINED

Proof is required that you are a legal resident in this country. If employed can you provide such documentation? Yes  No

**RESIDENCE** (Please Print clearly or Type)

List all of your residence during the last 5 years. Begin with your most current residence

Address \_\_\_\_\_  
Street City State Zip From     /    /     To     /    /      
Month Year Month Year

Address \_\_\_\_\_  
Street City State Zip From     /    /     To     /    /      
Month Year Month Year

Address \_\_\_\_\_  
Street City State Zip From     /    /     To     /    /      
Month Year Month Year

Address \_\_\_\_\_  
Street City State Zip From     /    /     To     /    /      
Month Year Month Year

Address \_\_\_\_\_  
Street City State Zip From     /    /     To     /    /      
Month Year Month Year

# TOLEDO POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

## EDUCATION (Please Print clearly or Type)

Have you graduated from high school?      Yes       No

If not, do you have GED Certificate?      Yes       No

**List all high schools attended**

NAME	LOCATION	DATES ATTENDED	MAJOR/COURSE OF STUDY	DEGREE OR DIPLOMA

**List all Colleges/Universities attended**

NAME	LOCATION	DATES ATTENDED	MAJOR/COURSE OF STUDY	DEGREE OR DIPLOMA

**List all Business/Trade schools attended**

NAME	LOCATION	DATES ATTENDED	MAJOR/COURSE OF STUDY	DEGREE OR DIPLOMA

**List all other courses/training**

NAME	LOCATION	DATES ATTENDED	MAJOR/COURSE OF STUDY	DEGREE OR DIPLOMA

Have you ever been suspended or expelled from any school?      No       Yes

If YES please explain (include school, date, and circumstances) \_\_\_\_\_

\_\_\_\_\_

Do you have any plans for furthering your education or developing existing skills? If so please explain

\_\_\_\_\_

\_\_\_\_\_

# TOLEDO POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

## EMPLOYMENT (Please Print clearly or Type)

Beginning with your most current employment, please list all jobs (including part-time, temporary and voluntary positions) you have held in the past 10 years. Do not include military service.

Not Employed From Month Year \_\_\_/\_\_\_/\_\_\_ To Month Year \_\_\_/\_\_\_/\_\_\_

Dates of Employment	Name & Address of Employer	Reason for Leaving
<b>From</b> <b>To</b> ___/___/___                      ___/___/___ <small>Month Year                      Month Year</small>	Supervisor _____ Telephone # _____ Email _____	
Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Voluntary <input type="checkbox"/>		
<b>Title and/or Duties</b> _____ _____ _____		

Not Employed From Month Year \_\_\_/\_\_\_/\_\_\_ To Month Year \_\_\_/\_\_\_/\_\_\_

Dates of Employment	Name & Address of Employer	Reason for Leaving
<b>From</b> <b>To</b> ___/___/___                      ___/___/___ <small>Month Year                      Month Year</small>	Supervisor _____ Telephone # _____ Email _____	
Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Voluntary <input type="checkbox"/>		
<b>Title and/or Duties</b> _____ _____ _____		

Not Employed From Month Year \_\_\_/\_\_\_/\_\_\_ To Month Year \_\_\_/\_\_\_/\_\_\_

Dates of Employment	Name & Address of Employer	Reason for Leaving
<b>From</b> <b>To</b> ___/___/___                      ___/___/___ <small>Month Year                      Month Year</small>	Supervisor _____ Telephone # _____ Email _____	
Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Voluntary <input type="checkbox"/>		
<b>Title and/or Duties</b> _____ _____ _____		

# TOLEDO POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

## EMPLOYMENT Cont... (Please Print Clearly or Type)

Not Employed From Month Year \_\_\_\_/\_\_\_\_ To Month Year \_\_\_\_/\_\_\_\_

Dates of Employment	Name & Address of Employer	Reason for Leaving
<p><b>From</b>                      <b>To</b></p> <p>____/____                  ____/____</p> <p><small>Month Year                  Month Year</small></p> <p>Full-Time <input type="checkbox"/></p> <p>Part-Time <input type="checkbox"/></p> <p>Voluntary <input type="checkbox"/></p>	<p>Supervisor _____</p> <p>Telephone # _____</p> <p>Email _____</p>	
<b>Title and/or Duties</b>		

Not Employed From Month Year \_\_\_\_/\_\_\_\_ To Month Year \_\_\_\_/\_\_\_\_

Dates of Employment	Name & Address of Employer	Reason for Leaving
<p><b>From</b>                      <b>To</b></p> <p>____/____                  ____/____</p> <p><small>Month Year                  Month Year</small></p> <p>Full-Time <input type="checkbox"/></p> <p>Part-Time <input type="checkbox"/></p> <p>Voluntary <input type="checkbox"/></p>	<p>Supervisor _____</p> <p>Telephone # _____</p> <p>Email _____</p>	
<b>Title and/or Duties</b>		

Not Employed From Month Year \_\_\_\_/\_\_\_\_ To Month Year \_\_\_\_/\_\_\_\_

Dates of Employment	Name & Address of Employer	Reason for Leaving
<p><b>From</b>                      <b>To</b></p> <p>____/____                  ____/____</p> <p><small>Month Year                  Month Year</small></p> <p>Full-Time <input type="checkbox"/></p> <p>Part-Time <input type="checkbox"/></p> <p>Voluntary <input type="checkbox"/></p>	<p>Supervisor _____</p> <p>Telephone # _____</p> <p>Email _____</p>	
<b>Title and/or Duties</b>		

# TOLEDO POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

## EMPLOYMENT Cont... (Please Print Clearly or Type)

Have you ever received any disciplinary action, suspension, been fired, or been asked to resign from any place of employment? No  Yes  If YES, please explain (include employer, when, where and circumstances) \_\_\_\_\_

Have you ever been a successful or unsuccessful candidate for another position requiring peace office powers? No  Yes  If YES, please explain (include agency, when, where and circumstances) \_\_\_\_\_

## MILITARY SERVICE (Please Print clearly or Type)

Have you ever served in the military? Yes  No

Dates of Service	Branch of Service	Draft Classification
<b>From</b> <b>To</b> _____ / _____      _____ / _____ <small>Month    Year                      Month    Year</small>		
<b>Related skills/experience applicable to civilian employment</b>		

Are you currently participating in any military reserve or National Guard Program? Yes  No

Have you ever been the subject of any judicial or non-judicial disciplinary action while in the military, National Guard or military reserves? No  Yes  If YES, please explain (include branch of service, when, where and circumstances) \_\_\_\_\_

## SPECIAL QUALIFICATIONS (Please Print clearly or Type)

List any professional memberships, certificates, licenses (such as pilot's license, radio operator etc.) \_\_\_\_\_

List any other special skills or qualifications that you may possess (include hobbies/sports and other special interest groups or organizations that you are involved in) \_\_\_\_\_

Can you speak any foreign language? No  Yes

Indicate degree of fluency (excellent, fair, good, poor)

Language	Reading	Speaking	Comprehension

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## OFFICE OR ADMINISTRATIVE (Please Print clearly or Type)

List any special training or skills \_\_\_\_\_

Typing Speed \_\_\_\_\_ wpm      Office Machines \_\_\_\_\_

## LEGAL (Please Print clearly or Type)

If you have ever been arrested or convicted for any crime (excluding traffic citations) please provide the following information

Arrest/Conviction	Approximate Date(s)	Police Agency

Were you ever required to appear before a juvenile court for an act which would have been a crime if committed by an adult?    No       Yes     If YES, please explain (when, where, circumstances)

\_\_\_\_\_

\_\_\_\_\_

## MOTOR VEHICLE OPERATION (Please Print clearly or Type)

Operation of a motor vehicle is an integral part of law enforcement. An investigation of your driving history will be made through a records check.

Do you possess a Washington State driver's license?      Yes       No   
 Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Exp. Date \_\_\_\_\_

Have you ever been licensed to operate a motor vehicle in any other state than Washington?  
 Yes  No  State \_\_\_\_\_ State \_\_\_\_\_ State \_\_\_\_\_

Have you ever been refused a driver's license by any state?    No       Yes     If YES, please explain

\_\_\_\_\_

\_\_\_\_\_

Has your license ever been suspended or revoked?      No       Yes     If YES, please explain

\_\_\_\_\_

\_\_\_\_\_

Do you have current auto insurance?      Yes       No   
 Have you ever had your auto insurance cancelled or refused?    No       Yes     If YES, please explain

\_\_\_\_\_

\_\_\_\_\_

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**MOTOR VEHICLE OPERATION Cont....** (Please Print clearly or Type)

Have you ever had high risk auto insurance? Yes  No

List all traffic citations (excluding parking citations) you have received within the last 7 years

Violation	Location (city)	Approximate Date	Fined or action taken on driver's license

Have you ever been involved as a driver in a motor vehicle accident? No  Yes

If YES, please provide the following information for each accident

Date	Location	<input type="checkbox"/> Injury <input type="checkbox"/> Non-Injury
Police Investigation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Police Agency	
Date	Location	<input type="checkbox"/> Injury <input type="checkbox"/> Non-Injury
Police Investigation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Police Agency	

**REFERENCES – list people not related to you** (Please Print clearly or Type)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_  
Street/PO Box
City
State
Zip

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_  
Street/PO Box
City
State
Zip

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_  
Street/PO Box
City
State
Zip

Phone # \_\_\_\_\_ Email \_\_\_\_\_





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## AGREEMENT

I certify that all statements made by me on this application are true and complete to the best of my knowledge. I understand that misrepresentation or falsification of statements made in this application constitute grounds for immediate dismissal.

I authorize the release of all high school, college and other educational records pertaining to my attendance, course work and other school activities.

I further consent to the disclosure of any and all information about me contained in private and government files relevant to this application for employment or relating to my present and former employment history, and I request all former employers and federal, state and local government agencies to supply said information to you on your request. You are authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

To my former employers named in this application, please furnish the City of Toledo and or Toledo Police Department, Washington with personnel information requested by the City of Toledo and or Toledo Police Department, Washington. I release you, my former employers, from any liability that may arise as a result of your providing such information to the City of Toledo and or Toledo Police Department, Washington.

I furthermore agree to the following terms and conditions of employment:

1. A pre-employment health evaluation (psychological evaluation, polygraph and physical).
2. Meeting minimum or maximum age requirements of applicable law, rules and regulations.
3. Submitting proof of citizenship or U.S. work permit, upon employment, **if required**.
4. Meeting job attendance and performance requirements.
5. Conforming to the City of Toledo and the Toledo Police Department personnel rules, regulations and instructions

Applicant for Position of \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_