

*Saginaw Chippewa Tribal
Police Department*



*Dispatch / Corrections
Application Packet*

Saginaw Chippewa Tribal Police Department

Experience and Education Questionnaire

1. **READ ALL INSTRUCTIONS CAREFULLY.**
2. This questionnaire must be filled out in detail. Please complete this form as soon as possible and **RETURN IT TO THE DEPARTMENT.** If selected, you will be contacted by a representative of the *Saginaw Chippewa Tribal Police Department*.
3. Read all statements and questions carefully before answering.
4. All questions **MUST** be answered. In the event that a question does not apply to you, place the letters N/A in the space provided for the answer.
5. This questionnaire must be typewritten or printed in ink.
6. In the event that there is not sufficient space on this form for your answers, additional sheets must be attached.
7. This questionnaire must be completed accurately and honestly. Omission or falsification of information may result in the rejection of your application.
8. Obtain the following documents if applicable and have them available to give to the department representative with this form when you are interviewed.
 - A. High school and College transcripts
 - B. Discharge or separation from military service form DD-214
 - C. Birth Certificate
9. This form will be used to conduct your background investigation. Employers, relatives, neighbors and other associates will be interviewed. The final investigation report will be used in evaluating your suitability for a position with the *Saginaw Chippewa Tribal Police Department*.
10. The report will not be released to any other agency without your written permission. You have the option to review the report prior to release.

READ THE ABOVE INSTRUCTIONS BEFORE
COMPLETING THIS QUESTIONNAIRE

PERSONAL BACKGROUND

1. **Full Name:** _____
(First) (Middle) (Last)

2. **Present Address:** _____
(County) (Street & Number) (City) (State/Zip Code)

3. **Permanent Address:** _____
(County) (Street & Number) (City) (State/Zip Code)

4. **Telephone Number:** _____
(Home) (Business)

5. Have you used any name (including nicknames) other than that listed above to obtain education, employment, finances, or to gain traffic or criminal record?
 Yes* **No**

*If yes, please explain _____
(If a legal change, indicate date, location and authority.)

6. **Date of Birth:** _____ **Age:** _____

7. **Are you a U.S. Citizen?** **Yes** **No**

Note: If hired, you will be asked to produce proof of citizenship (a birth certificate, Certificate of Naturalization or Certificate of Citizenship).

8. Have you ever applied for any similar positions before? **Yes** **No**

If yes, What positions: _____

If yes, Were you... **Accepted** **Rejected** Date _____

If rejected, Reason _____

Have you ever attended a training school for one or more of these positions?

Yes* **No** *If yes, Please list the title of the positions and the dates attended.

Which position? _____

From (date): _____ To (date): _____ If you attended more than one school; please list the same information for each school on an additional sheet.

9. Have you ever made application to another law enforcement agency? **Yes*** **No**

*If yes, list the date, name and address of agency (If you have applied to more than one, list the same information for each agency on an additional sheet.)

Agency/Name: _____ **Date:** _____

Address: _____

Current Status of Application: _____

TRAFFIC & CRIMINAL HISTORY

Michigan Operators License No. _____

Other State(s) Operators License No. _____

10. Have you ever been arrested for anything other than a traffic violation? **Yes*** **No**

*If yes, list date, charge, and disposition, location and the name and address of arresting agency:

Note: The above information is to include **ANY and ALL** arrests other than those for traffic violations. Having been arrested does not mean you cannot be appointed. The seriousness, recency, number, pattern and surrounding circumstances will be considered.

Questions **11-13** concern experiences that might affect your attitude toward law enforcement. **“Yes”** answers do not mean you cannot be appointed.

11. Have you ever been investigated by any law enforcement agency for any reason? **Yes*** **No**

*If yes, list date, location, name and address of agency and reason for investigation: _____

12. Have you ever been convicted of a crime? **Yes*** **No**

*If yes, give particulars: _____

13. List all traffic citations which you have been issued (*include date, charge, location, name and address of issuing agency and disposition.*) _____

14. List **ALL** traffic accidents in which you have been involved. (Include date, location and Police Department.) _____

EDUCATION

15. High School _____

Address _____

Dates Attended _____

(From)

(To)

Did you graduate? **Yes** **No***

*If no, have you completed a General Educational Development Test (GED)? **Yes** **No**

(You must provide High School transcript or GED scores)

16. College _____

Address _____

Dates Attended _____

(From)

(To)

17. Correspondence or Trade School _____

Address _____

Courses _____

Years, Months or hours completed _____

Dates attended _____ Certificate _____

(From)

(To)

18. List any coursework or training which you have completed, which you believe would be directly useful to you for these positions, such as, Police Science, Criminology, Sociology, Psychology, Public Speaking or Law. Include dates and location.

Note: If you have further education, or have attended other high schools, colleges, correspondence or trade schools, use additional sheet(s) and give details.

19. What languages can you read and/or speak? _____

20. List any activities in which you have been involved, which you believe reflect your interest in social service work or community affairs. Include, for example, tutoring, drug treatment or crisis work, correctional program assistance, coaching or counseling.

21. List any honors, awards, or other forms of recognition which you have received for scholarship, athletics or other achievements.

22. List any offices of leadership (elective or appointed), which you have held as part of or apart from school. Give dates and locations.

EMPLOYMENT HISTORY

Social Security No. _____

23. Chronological history or employment for the past ten years. Account for all periods include casual employment. Include all periods of unemployment, and state what you did during these periods. List present or most recent position first.

Note: The investigator may interview Employers, Supervisors and Co-Workers.

Employment discharge or discipline does not mean you cannot be appointed. The seriousness, recency and surrounding circumstances will be considered.

Dates of Employment _____ to _____

Employer _____

Address _____ Phone _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary \$ _____

What were your duties? _____

Reason for leaving? _____

Dates of Employment _____ to _____

Employer _____

Address _____ Phone _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary \$ _____

What were your duties? _____

Reason for leaving? _____

Dates of Employment _____ to _____

Employer _____

Address _____ Phone _____

Type of Business _____ Supervisor _____

Title of Position _____ Monthly Salary \$ _____

What were your duties? _____

Reason for leaving? _____

Employment History (continued)

Dates of Employment _____ to _____
Employer _____
Address _____ Phone _____
Type of Business _____ Supervisor _____
Title of Position _____ Monthly Salary \$ _____
What were your duties? _____
Reason for leaving? _____

Dates of Employment _____ to _____
Employer _____
Address _____ Phone _____
Type of Business _____ Supervisor _____
Title of Position _____ Monthly Salary \$ _____
What were your duties? _____
Reason for leaving? _____

Dates of Employment _____ to _____
Employer _____
Address _____ Phone _____
Type of Business _____ Supervisor _____
Title of Position _____ Monthly Salary \$ _____
What were your duties? _____
Reason for leaving? _____

Dates of Employment _____ to _____
Employer _____
Address _____ Phone _____
Type of Business _____ Supervisor _____
Title of Position _____ Monthly Salary \$ _____
What were your duties? _____
Reason for leaving? _____

MILITARY*

Selective Service No. _____ **Military Serial No.** _____

26. Have you ever served in the military of a foreign government? **Yes*** **No**

*If yes, please answer questions **46-51** regarding that service on an additional sheet.

27. Selective Service Board No. _____ Address _____

28. Draft Classification _____ Draft Lottery No. _____

29. Dates of active service _____ to _____

30. Branch of Service _____ Last Station _____

31. Rank upon discharge _____ Type of Discharge **Honorable** **Other**

32. Were you ever the subject of a Court-Martial or other disciplinary action? **Yes*** **No**

*If yes, please use an additional sheet to give detail.

33. Are you presently or have you ever been a member of any military reserve organization?

Yes* **No**

*If yes, **branch of Service** _____ **Rank** _____

Present Station _____

*You must provide certificate of separation, **DD-214**, if you were separated from **ANY** branch of military service.

34. List five character references, other than employers or supervisors, who you know intimately (Must live within the State of Michigan).

1. _____ Business Address _____

Phone _____ Residence Address _____

2. _____ Business Address _____

Phone _____ Residence Address _____

3. _____ Business Address _____

Phone _____ Residence Address _____

4. _____ Business Address _____

Phone _____ Residence Address _____

5. _____ Business Address _____

Phone _____ Residence Address _____

References (continued)

List the name(s) and address of any law enforcement official that you know personally.

Name _____ Address _____

Agency employed by _____

Name _____ Address _____

Agency employed by _____

RESIDENCE RECORD

35. List **ALL** residences since age of 16.

Dates _____ to _____ Address _____

Dates _____ to _____ Address _____

Dates _____ to _____ Address _____

Dates _____ to _____ Address _____

Dates _____ to _____ Address _____

RECREATION

36. List any recreational activities which you participate in: _____

OTHER INFORMATION

37. In the area below, you may furnish any information which you feel will be of value to the investigator, or you may further explain anything you wish regarding your application for these positions. _____

READ CAREFULLY BEFORE SIGNING

I certify that all answers to the above questions are true and complete to the best of my knowledge, and I agree and understand that any misstatement of material facts contained in this questionnaire may cause forfeiture upon my part of all rights to any employment in the service of the *Saginaw Chippewa Tribal Police Department*.

Signature

Date

Saginaw Chippewa Tribal Police Department

A division of the

Saginaw Chippewa Indian Tribe

Release of Information

To Whom It May Concern:

I hereby authorize any representative of the *Saginaw Chippewa Tribal Police Department*, bearing this release, to obtain information from your files or other sources pertaining to my personal background including, but not limited to, academic, athletic, achievement, attendance, personal history, disciplinary action, medical, credit or any other records you may have regarding me. I hereby direct you to release such information upon the request of the bearer. This release is executed with the knowledge and understanding that the information is for the official use of the *Saginaw Chippewa Tribal Police Department*. Consent is granted for the *Saginaw Chippewa Tribal Police Department* to furnish such information as is described above, to third parties in the course of the Tribal Police fulfilling its official responsibilities with regard to my application for employment. I hereby release you, the institution or establishment which you represent, including it's officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below:

Full Name (typed or printed)		Social Security No.	
Current address:		City	State/Zip Code
County	Telephone No. ()	Date of Birth	
Signature		Date	

Saginaw Chippewa Tribal Police Department
Employment Reference Report

Applicant:		Employer (business):	
Date:	<input type="checkbox"/> Request Confidential Status	Employer Address:	
City:		State:	Zip Code:
Person Interviewed:		Title:	

		<input type="checkbox"/> Supervisor	<input type="checkbox"/> Co-Worker
1. Applicant's Job Classification:		2. Length of Service:	
		From:	To:
3. Examples of work performed:		4. Annual Salary:	
5. If no longer employed, reason for separation:			

Any ratings of "**MARGINAL**" or "**UNACCEPTABLE**" or responses marked by an asterisk (*) require the investigator to explain in narrative form on reverse side.

6. Quality of Work	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
7. Quantity of Work	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
8. Dependability	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
9. Attendance	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
10. Injury Record	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
11. Accepts Supervision	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
12. Works w/ Others	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
13. Initiative	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
14. Integrity	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
15. Attitude	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
16. Respects Others	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
17. Appearance	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
18. Overall Rating	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal	<input type="checkbox"/> Unacceptable
19. Indication of any biases?	20. Illegal drug use?		21. Would you rehire?	
<input type="checkbox"/> Yes* <input type="checkbox"/> No	<input type="checkbox"/> Yes* <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No*	

22. How would you rate this person's ability to be a Tribal Police Officer?

<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Marginal*	<input type="checkbox"/> Unacceptable*	<input type="checkbox"/> Don't Know
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Signature: Investigator's Name & Rank

