

**POLICE OFFICER
BOROUGH OF FRANKLIN PARK**

The Franklin Park Borough Police Department is seeking qualified applicants for a FT Patrol Officer position. Starting salary of \$71,926 plus benefits with top pay of \$95,893 reached after five years. Additional benefits include; five year DROP pension, longevity pay, education incentives and military buy back. An application may be picked up at the Franklin Park Police Department at 2344 West Ingomar Rd, Pittsburgh, PA 15237, 412-364-1227, M-F 8am-4:30 pm ONLY, or downloaded from the Franklin Park Borough website:

www.franklinparkborough.us

Completed applications must be returned by 12:00 pm on Friday, March 6th, 2020 IN PERSON. Must show valid photo ID. A \$35 non-refundable fee, cash or money order only (made payable to Borough of Franklin Park) required upon submission of application. Applications submitted via fax or email will not be accepted. No phone inquiries. Equal Opportunity Employer.

The physical agility test will be given on Tuesday, March 10th, 2020 at 9:00 am at the Allegheny County Police Academy located at 700 W Ridge Rd., Allison Park, PA 15101. For those passing the physical agility test, the written exam will be given on Saturday, March 14th, 2020 at 8:30 am at the Ingomar Middle School Cafeteria, 1521 Ingomar Heights Rd, Pittsburgh, PA 15237. Applicants with a passing score of 80% or better will undergo further testing.

NOTICE TO APPLICANTS

Minimum requirements:

1. Valid driver's license
2. At least 21 years of age by the deadline for submitting the application
3. U.S. Citizen
4. Pennsylvania Act 120 Certification
5. Bachelor's degree from an accredited College or University
6. Must not be on **ANY** County District Attorneys "Do Not Call" list
7. Applicants must move within a twenty-five (25) air mile radius of the Borough of Franklin Park Municipal building within one (1) year of completing their probationary period.
8. The Franklin Park Police Department has a strict policy on **exposed tattoos, ornamental body piercings, grooming and jewelry**. You may inquire with questions upon requesting an application.

Essential Functions Police Officer Franklin Park Borough

1. Effect an arrest, forcibly if necessary, using handcuffs and other restraints. Subdue resisting suspects using; maneuvers, weapons, the use of hands and feet, and other approved weapons in self-defense.
2. Prepare investigative and other reports, including sketches, using appropriate grammar, symbols and mathematical computations.
3. Exercise independent judgment in determining: when there is reasonable suspicion to detain; when probable cause exists to search and arrest; when force may be used and to what degree.
4. Operate a law enforcement vehicle: during both the day and night; in emergency situations involving speeds in excess of posted limits; in congested traffic; in unsafe road conditions caused by factors such as fog, smoke, rain, ice and snow.
5. Communicate effectively and coherently over law enforcement radio channels while initiating and responding to radio communications.
6. Gather information in criminal investigations by interviewing and obtaining the statements of victims, witnesses, suspects and confidential informers.
7. Pursue fleeing suspects and perform rescue operations. Which may involve the following: quickly running after a suspect; quickly entering and exiting law enforcement patrol vehicle; lifting, carrying and dragging heavy objects or persons; climbing over and pulling up oneself over obstacles; jumping down from elevated surfaces; climbing through openings; jumping over obstacles, ditches and streams; crawling in confined areas; balancing on uneven or narrow surfaces; and using body force to gain entrance through barriers.
8. Load, unload, aim and fire from a variety of body positions using handguns, shotguns and other agency firearms under conditions of stress that justify the use of deadly force and at levels of proficiency prescribed in certification standards.
9. Perform searches of people, vehicles, buildings and large outdoor areas which may involve feeling and detecting objects, walking for long periods of time, detaining people and stopping suspicious vehicles and persons.
10. Conduct visual and audio surveillance for extended period of time, which may require standing, sitting and confinement in unusual, tight or uncomfortable spaces.
11. Engage in law enforcement patrol functions that include such things as working rotating shifts, walking on foot patrol for extended periods and physically checking the door and windows of buildings to ensure they are secure.
12. Effectively communicate with people, including juveniles, by giving information and directions, mediating disputes and advising of rights and processes.
13. Demonstrate communication skills in court and other formal settings.

14. Detect and collect evidence and substances that provide the bases of criminal offenses and infractions and that indicate the presence of dangerous conditions.
15. Endure verbal and mental abuse when confronted with the hostile view and opinions of suspects and other people encountered in an antagonistic environment.
16. Perform rescue functions at accidents, emergencies and disasters to include directing traffic for long periods of time, administering emergency medical aid, lifting, dragging and carrying people away from dangerous situations and securing and evacuating people from particular areas.
17. Process and transport prisoners and committed mental patients using handcuffs and other appropriate restraints.
18. Put on and operate a gas mask in situations where chemical munitions are being deployed. Perform essential job functions during deployment.
19. Extinguish small fires by using extinguisher and other appropriate means
20. Read and comprehend legal and non-legal documents, including the preparation and processing of such documents as citations, affidavits and warrants.
21. Process arrested suspects to include taking their photographs and obtaining a legible set of inked fingerprint impressions.
22. Perform all job functions under extreme weather or climate conditions.
23. Effectively manage situations that require the handling and/or disposing of domestic and wild animals. Including euthanizing wounded or injured animals.
24. Filling out written reports in a clear and concise manner.
25. Must be proficient in the use of computers. Utilizing the computer to prepare criminal complaints, warrants, accident reports, etc.
26. Must have the ability to obtain and maintain access to Criminal Justice Information Systems (CJIS) such as NCIC/CLEAN, Penn DOT, etc.
27. Must be able to testify in Court as a witness for the prosecution.

NOTE: The successful applicant must be able to perform ALL of the above essential job functions of a police officer, unassisted, and at a pace and level of performance consistent with the actual job performance requirements. This requires a high level of physical ability to include vision, hearing, speaking, flexibility and strength.

Borough of Franklin Park
Police Officer Essential Job Functions

PERSONAL CHARACTERISTICS

Police officers maintain a position that involves the highest degree of public trust. Therefore, it is imperative and a “business necessity” that officers maintain – and have a history of honesty, reliability, integrity, high moral character, and the ability to manage personal finances and interpersonal skills. The applicant must pass a criminal history background check and be cleared for criminal justice information access and not be on any County District Attorney’s “Do Not Call” list.

Additionally, police officers are frequently placed in a position of physical and mental stress. Therefore, if the applicant poses a significant risk of substantial harm to himself/herself, other officers, and the public and the significant risk of substantial harm cannot be eliminated or reduced the applicant may be at a disadvantage in the hiring process. The applicant must meet the physical, vision and psychological standards set forth by the Municipal Police Officer’s Education and Training Commission and be eligible to receive an Act 120 certification number.

VERIFICATION OF UNDERSTANDING

I have reviewed the above list of essential job functions for the Borough of Franklin Park police officer and believe that:

_____ I can fully perform all duties.

SIGNATURE

DATE

PRINT NAME

CONSENT TO POLYGRAPH

I hereby freely consent to undertake a polygraph test as a part of my application for a law enforcement position with the Borough of Franklin Park. I understand that with this consent I waive any rights I may have to contest this polygraph test under any federal or state law and specifically Section 18 Pa. C.S.A. Section 7321.

I have read the above language and understand that with my consent to said polygraph test. I am waiving any claim I may have to contest this test.

Signature

Date

Print Name

VERIFICATION

I understand that this application has been completed subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Signature

Date

Print Name

NOTIFICATION PROCEDURE RELEASE

In the processing procedure required for applicants, it may become necessary to contact the applicant in the event they are being given further consideration for the position of police officer with the Borough of Franklin Park.

If conventional methods fail in attempting to contact the applicant, a certified letter will be sent to the applicant's address listed on the application. Should the certified letter be returned indicating that it was unclaimed or undeliverable; the applicant will be eliminated from further processing and consideration.

It is the applicant's responsibility to notify the Borough of Franklin Park Police Chief, in writing, of the address change. By affixing your signature to this form, the applicant acknowledges that they have read and understood the contents of this procedure.

Signature

Date

Print Name

SWORN STATEMENT

I hereby swear that all statements made in this questionnaire are true and complete. I also understand that any misstatements of material facts will subject me to disqualification and termination of the application process of employment and could result in criminal prosecution.

SIGNATURE OF APPLICANT

INVESTIGATOR

DATE

DATE

NOTARY PUBLIC

PERSONAL DATA

1. Full Name: _____

LAST NAME
FIRST NAME
MIDDLE NAME
2. Date of Birth: _____
3. Social Security Number: _____
4. Contact phone number: _____
5. Contact email: _____
6. Driver's License Number: _____ State: _____
7. Are you currently employed as a Police Officer. ____ yes. ____ no.
8. If yes to question 7, department. _____
9. Police Certification Number. _____ State. _____
10. Veteran: Yes: _____ No: _____
11. Address: _____
STREET ADDRESS

CITY
STATE
ZIP CODE
12. Cell phone number: _____
AREA CODE AND TELEPHONE NUMBER
 Home telephone number: _____
AREA CODE AND TELEPHONE NUMBER
 Other telephone number: _____
AREA CODE AND TELEPHONE NUMBER
13. Place of birth: _____

CITY
COUNTY
STATE/COUNTRY
14. Have you ever used another name or had your name changed: YES NO

NOTE: This includes, but is not limited to, maiden names, former names, former married names, adopted names, nicknames, etc. If yes, fill in the information in the table below.

PREVIOUS NAME	DATE OF CHANGE	LOCATION OF CHANGE	REASON FOR CHANGE

MARITAL / FAMILY DATA

20. Are you currently: SINGLE () MARRIED () DIVORCED ()

21. If married, what is the full name of your spouse (include maiden name)

FIRST NAME MIDDLE NAME MAIDEN NAME LAST NAME

22. If married, are you living with your spouse?

YES NO If no, please explain on page 34 .

23. List the following information about your current and former spouses:

NAME OF SPOUSE	ADDRESS OF SPOUSE	DATE OF MARRIAGE	LOCATION OF MARRIAGE (CITY/STATE)	DATE OF DIVORCE	LOCATION OF DIVORCE (CITY/STATE)

24. List the following information for all of your dependents (not your current spouse):

NAME	DATE OF BIRTH	PLACE OF BIRTH	CURRENT RESIDENCE

NOTE: CERTIFIED COPIES (RAISED SEAL) OF ALL DOCUMENTS RELATING TO NAME CHANGES, MARRIAGES, AND DIVORCES ARE REQUIRED BEFORE APPLICATION FOR EMPLOYMENT WILL BE PROCESSED. THIS INFORMATION CAN BE OBTAINED FROM THE COURT IN WHICH THE PROCESS WAS COMMENCED.

EDUCATION

26. If you graduated from high school, complete the following information:

NAME OF HIGH SCHOOL	DATES ATTENDED FROM/TO
COMPLETE MAILING ADDRESS	CITY/STATE ZIP CODE
AREA CODE AND TELEPHONE NUMBER	DATE GRADUATED

27. If you received a GED certificate, complete the following information:

NAME OF SCHOOL (IF SCHOOL NO LONGER EXISTS, LIST THE ADDRESS OF THE LOCAL BOARD OF EDUCATION)	
COMPLETE MAILING ADDRESS OF SCHOOL (IF SCHOOL NO LONGER EXISTS, LIST THE ADDRESS OF THE LOCAL BOARD OF EDUCATION)	
YEAR GED OBTAINED	STATE GED OBTAINED

28. List any degrees that you have obtained (A.A., A.A.S., B.S., M.P.A., etc.)

TYPE OF DEGREE	GPA	YEAR RECEIVED
TYPE OF DEGREE	GPA	YEAR RECEIVED
TYPE OF DEGREE	GPA	YEAR RECEIVED

29. Since high school, have you ever been expelled or suspended from any school or been disciplined by any school official?

YES NO If yes, explain on page 34.

EDUCATION CONTINUED

30. List below any Colleges, Universities, Vocational/ Technical schools, and/or Graduate Schools that you have attended.

NAME OF SCHOOL	COMPLETE ADDRESS	DATES ATTENDED	MAJOR COURSE OF STUDY	DID YOU GRADUATE?

NOTE: APPLICANT IS RESPONSIBLE FOR FURNISHING THE POLICE DEPARTMENT WITH **SEALED** HIGH SCHOOL AND COLLEGE TRANSCRIPTS AT THE APPLICANT'S OWN EXPENSE.

POLICE CERTIFICATION INFORMATION

31. Have you ever attended a basic state, federal, local, or military mandate school for Police Officer, Deputy Sheriff, Correctional Officer, Military Police Officer, etc.?

YES If yes, answer the below listed questions.

NO If no, go on to the next question.

List the dates you attended basic mandate school: / / / /
FR MO/YR TO MO/YR

Did you receive a certification number: YES ____NO ____

If yes, please list your certification number: _____

Number of years and months experienced as certified law enforcement officer:

YEARS ____ MONTHS _____

List the agency, department, or organization, which sponsored you for mandate school:

AGENCY NAME

LOCATION OF AGENCY (STATE)

COMPLETE MAILING ADDRESS OF SPONSORING AGENCY

AREA CODE AND TELEPHONE NUMBER

CONTACT PERSON

32. If you are not presently working as a law enforcement officer, list the date and agency you last worked as a certified law enforcement officer:

DATE LAST WORKED AS A LAW ENFORCEMENT OFFICER

AGENCY

COMPLETE MAILING ADDRESS OF AGENCY

AREA CODE AND TELEPHONE NUMBER

CONTACT PERSON

33. Have you ever been placed on a "Do not call" list which prevented you from being called as a witness in any criminal cases? ____No ____ Yes (If yes please explain on page 34).

34. Have you ever had your Criminal Justice Information System (CJIS, CLEAN/NCIC) access suspended or revoked? ____No ____Yes (If yes please explain on page 34).

EMPLOYMENT HISTORY

35. What is your present occupation? _____
36. How did you find out about this job? _____
37. Have you ever worked for Franklin Park? YES NO
 If yes, what department? _____ If yes, when? _____
38. Have you ever applied with Franklin Park? YES NO
 If yes, fill in the information on the table below.

DATE	POSITION	DEPARTMENT	WHAT HAPPENED

39. Do you have any relatives that are employed with Franklin Park? Relatives include, but are not limited to, brothers, sisters, parents, grandparents, cousins, aunts, uncles, in-laws, etc.

YES NO If yes, fill in the information on the table below. If you need more space use page 34.

NAME OF RELATIVE	RELATIONSHIP TO YOU	DEPARTMENT IN WHICH THEY WORK

EMPLOYMENT HISTORY

List **ALL** jobs, positions or appointments you have held in the last ten years to include temporary, part-time, paid or not paid employment, active or inactive reserve, and internships. Put your present or most recent job first. List a **Reason for Leaving** for each job. Include military service in proper time sequence and temporary part-time jobs. If there are gaps in your employment please provide an explanation for each period of unemployment.

Name of Employer:	Address:
Position(s) Held:	Phone Number:
Employment Dates: From: To:	Supervisor:
Reason for Leaving:	Duties:

Name of Employer:	Address:
Position(s) Held:	Phone Number:
Employment Dates: From: To:	Supervisor:
Reason for Leaving:	Duties:

Name of Employer:	Address:
Position(s) Held:	Phone Number:
Employment Dates: From: To:	Supervisor:
Reason for Leaving:	Duties:

Name of Employer:	Address:
Position(s) Held:	Phone Number:
Employment Dates: From: To:	Supervisor:
Reason for Leaving:	Duties:

Name of Employer:	Address:
Position(s) Held:	Phone Number:
Employment Dates: From: To:	Supervisor:
Reason for Leaving:	Duties:

EMPLOYMENT HISTORY CONTINUED

40. If you answer YES to any of the following questions, please explain fully on page 34.

	YES	NO
a. Have you ever been terminated, forced to resign or otherwise involuntarily separated by a previous employer?		
b. Have you ever been reprimanded by a supervisor for misconduct or for not doing your job properly?		
c. Have you ever been reprimanded for being late or absent?		
d. Have you ever been disciplined by a supervisor (including verbal or written reprimands, suspensions, fines, etc.)		
e. Have you ever left a job without giving two weeks notice?		
f. Have you ever been engaged in any business as an owner, partner, or corporate member?		
g. Have you ever taken anything of value, goods or service, from an employer without their permission?		
h. Have you ever taken any cash money from an employer?		
i. Have you ever accepted a bribe to perform or not perform your duty?		

41. Figure out a dollar amount of how much you have taken from all employers combined during the last five years and circle the amount below that comes closest to the total dollars in merchandise, goods, or services you have taken. This can include, but is not limited to, paper, pens, clips, etc.

\$0 \$10 \$25 \$50 \$75 \$100 \$200 \$500 \$750 \$1000 \$2500 \$5000

Other: _____ Explain any amounts on page 34.

42. In the last five years, have you submitted an application for employment with any other law enforcement agency or department?

YES NO If yes, fill in the information in the following table. If you need more space use page 34.

AGENCY	DATE APPLIED	DISPOSITION OF APPLICATION

EMPLOYMENT HISTORY CONTINUED

43. Have you ever taken a polygraph examination for any reason?

YES NO If yes, fill in the information on the table below. If you need more space use page 34.

DATE	AGENCY/COMPANY	CITY/STATE	REASON FOR POLYGRAPH	RESULT

44. Have you ever been rejected for cause from a public safety job?

YES NO If yes, please explain fully. Be specific.

45. At the present time, do you have any pending applications with any other law enforcement agency?

YES NO If yes, please list the agency, the position and the current status.

46. Are you being urged or paid by any person or organization to work for this department?

YES NO If yes, fully explain on page 34.

FINANCIAL HISTORY

47. If you answer YES to any of the following questions, please explain fully on page 34.

	YES	NO
a. Do you have any bills that are past due?		
b. Are any creditors currently pressing you for payment?		
c. Have you EVER had any credit accounts in collections?		
d. Have you EVER had any item repossessed?		
e. Within the last five years, have you filed for bankruptcy?		
f. Within the last five years, have you had your wages garnished?		
g. Is there currently an action pending to have your wages garnished?		
h. Within the last five years, have you been evicted or dispossessed from a residence or business?		
i. Have you EVER been involved in a civil suit of any kind? (This can include, but is not limited to, custody proceedings, divorces, etc.)		
j. Are you currently involved in any type of civil suit?		
k. Have you ever intentionally written a bad check?		
l. Have you ever misused a credit card or forged a check?		
m. Have you ever attempted to obtain credit by using another name or another social security number?		

NOTE: CREDIT HISTORIES OF ALL APPLICANTS ARE CHECKED. CERTIFIED COPIES (RAISED SEAL) OF ALL PAPERWORK REGARDING BANKRUPTCIES, GARNISHMENTS, CONSUMER CREDIT COUNSELING SERVICES, ETC. ARE REQUIRED UPON REQUEST.

MILITARY SERVICE

48. If you answer YES to any of the following questions, please explain fully on page 34.

	YES	NO
a. Have you ever <u>attempted</u> to enlist in any branch of the United States Armed Forces? (including Reserves, National Guard, and Coast Guard).		
b. Have you ever served in any branch of the United States Armed Forces? (Including Reserves, National Guard, and Coast Guard).		
c. Have you ever served in any branch of a foreign military?		
d. Have you ever been involved in a subversive act against the United States Government, or any other government, such as mutiny, treason, sabotage, espionage, etc.?		

APPLICANTS WHO HAVE SERVED IN THE MILITARY, ANSWER THE FOLLOWING QUESTIONS.

49. Complete the following table regarding your military service. If you need additional space use page 34.

BRANCH OF SERVICE	ENLISTMENT PERIOD	SERVICE NUMBER	HIGHEST RANK HELD

50. What is the type of your military discharge? (Honorable, Dishonorable, General, Under Honorable Conditions, Entry Level Separation, Medical, etc.) **BE SPECIFIC**

51. What was your military occupation specialty (MOS)? _____

CRIMINAL HISTORY / ACTIVITY

54. Have you EVER been arrested and/or convicted for a misdemeanor or felony offense (excluding minor traffic offenses)?

YES NO If yes, fill in the information on the table below and explain the incident fully on page 34.

POLICE/COURT JURISDICTION	CHARGE	FELONY/MISDEMEANOR	DATE	DISPOSITION

55. Circle any of the following activities you have ever committed; whether detected or undetected, and fully explain on page 34, including dates. If none, write none under item aa.

ACTIVITY/CRIME	ACTIVITY/CRIME	ACTIVITY/CRIME
a. Arson	j. Extortion	s. Theft from Employer
b. Assault	k. Auto Theft	t. Vandalism
c. Battery	l. Theft by Taking	u. Rape
d. Burglary	m. Kidnapping	v. Child Molestation
e. Cruelty to Animals	n. Murder	w. Incest
f. Drug Sales	o. Bad Checks	x. Sodomy
g. Drug Possession	p. Robbery	y. Peeping Tom
h. DUI / DWI	q. Shoplifting	z. Other Sex Crime
i. Entering Auto	r. Steal Anything	aa. Other

CRIMINAL HISTORY / ACTIVITY CONTINUED

56. Have you ever been fingerprinted for any reason?

YES NO If yes, fill in the information on the table below.

AGENCY	DATE	PURPOSE

57. Have you ever been charged, whether or not you were convicted, because of any domestic violence related incident?

YES NO If yes, explain fully in the space below. Please include the appropriate police jurisdiction and the disposition of the case.

58. Have any criminal warrants ever been taken out against you? (This can include, but is not limited to, bad check citations, domestic violence, interference with custody, etc.)

Yes NO If yes, please fill out the information on the table below.

CHARGE(S)	DATE	JURISDICTION	DISPOSITION

MOTOR VEHICLE / DRIVING HISTORY CONTINUED

64. If you answer YES to any of the following questions, please explain fully on PAGE 34.

	YES	NO
a. Has your driver's license (including out of state, foreign, or military) ever been suspended, canceled or revoked in any state or country?	<input type="checkbox"/>	<input type="checkbox"/>
b. Have you ever been refused a driver's license by any state, military, or foreign entity?	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you ever obtained or attempted to obtain a driver's license under an assumed name?	<input type="checkbox"/>	<input type="checkbox"/>

65. Do you have any pending traffic citations or parking tickets? If yes, complete information in the table below.

CHARGE	JURISDICTION	DATE RECEIVED	COURT DATE

66. In the table below, list all traffic citations you have received in the last TEN (10) years. If you need more space use page 34. If none, write NONE in the table below.

CHARGE	JURISDICTION	DATE RECEIVED	COURT DATE	DISPOSITION

MOTOR VEHICLE / DRIVING HISTORY CONTINUED

67. Have you been involved in any motor vehicle accidents in the last TEN (10) years? This can include, but is not limited to, single car accidents, accidents which were not reported, hit and run accidents, whether or not you were at fault, private property accidents, on duty, off duty, etc.

YES NO If yes, fill in the information on the table below.

DATE	POLICE REPORT YES / NO	LOCATION CITY / STATE	CAUSE OF ACCIDENT	INJURIES YES / NO	DRIVER AT FAULT	CITATIONS YES / NO

68. If you answer YES to any of the following questions, please explain fully on page 34.

	YES	NO
a. Have you ever been charged with driving under the influence of alcohol or drugs?		
b. Have you ever been convicted of or pled nolo contendere to the charge of driving under the influence of alcohol or drugs?		
c. Have you ever been involved in any hit and run accident?		
d. Have you ever been involved in any serious traffic offense? (Including, but not limited to, reckless driving, laying drags, DUI/DWI, vehicular homicide, etc.)		
e. Have you ever left the scene of an accident without giving assistance?		
f. Have you ever been involved in any traffic-related lawsuits, whether you were the plaintiff or the defendant?		
g. Have you ever been involved in a traffic accident which resulted in a serious injury or fatality?		

DRUG USE

69. Please answer each line truthfully. The use of, or experimentation with, a particular drug(s) may not necessarily mean automatic disqualification. In the table provided, indicate when you first tried the drug(s) listed, when you last used the drug(s) listed, and the approximate number of times used.

DRUG	DATE FIRST USED	DATE LAST USED	NUMBER OF TIMES USED
Marijuana			
Hashish			
Angel Dust/PCP			
Ice			
Ecstasy/MDMA			
Cocaine			
Crack Cocaine			
Heroin			
LSD/Acid/Blotter			
Crank			
Mushrooms/Peyote			
Morphine			
Mescaline/Cactus			
Opium			
Psilocybin			
Quaaludes			
Speed (specify type)			
Downers/Barbiturates			
Valium			
Steroids			
Crystal Methadone			
STP			
Any other illegal drug (specify)			

DRUG USE CONTINUED / ALCOHOL USE / GAMBLING

70. If you answer YES to any of the following questions, please explain fully on page 34.

	YES	NO
a. Have you ever been involved in the sale, distribution, or growing of marijuana?		
b. Have you ever been involved in the sale, distribution, or manufacture of cocaine or any other illegal drug?		
c. Have you ever been involved in the manufacture of any type of drug or narcotic? (Including prescription drugs)		
d. Have you ever taken a drug prescribed for another person?		

ALCOHOL USE

71. Do you drink alcoholic beverages?

YES NO If yes, how much and how often? _____

72. List the approximate date you were last intoxicated (drunk): _____

73. Since the age of seventeen, have you ever been arrested because of an alcohol-related offense? This includes, but is not limited to, DUI/DWI, Public Drunk/Intoxication, Disorderly Conduct, Minor in Possession of Alcohol, etc.?

YES NO If yes, explain fully on page 34.

GAMBLING

74. Circle any of the following you have gambled on in the last TEN (10) years.

CARDS	NUMBERS	DOGS	SPORTING EVENTS	LOTTO
DICE	HORSES	LOTTERY	SLOT MACHINES	OTHER

List the extent of your gambling on any of the above you have circled or listed.

75. Do you have any gambling debts?

YES NO If yes, explain fully on page 34.

76. Have you ever borrowed money to gamble?

YES NO If yes, explain fully on page 34.

MISCELLANEOUS QUESTIONS

77. Have you ever had a pilot's license? YES NO
 If yes, is it current? YES NO
 If no, explain:

78. Is your F.A.A. physical current? YES NO
 If no, explain.

79. List your total fixed wing flight time hours: _____

80. List your total rotary flight time hours: _____

81. Have you ever been involved in an air-related incident?
 YES NO If yes, explain fully page 34.

82. Have you ever been charged with Flying an Aircraft Under the Influence of Alcohol or
 Drugs, or have a violation of any federal aviation regulation (FAR), or any federal or
 state statute pertaining to the ownership, maintenance, or operation of an aircraft?
 YES NO If yes, explain fully on page 34.

83. Have you ever applied for a permit to carry a weapon? YES NO
 If yes, was the permit granted? YES NO

Date permit granted: _____

Which agency granted the permit? _____

Location of agency granting permit: _____

If permit to carry a weapon was not granted, explain fully your answer on page 34.

84. Do you possess any other professional license?
 YES NO If yes, complete table below:

TYPE OF LICENSE	DATE RECEIVED	STATE OF LICENSE	STATUS OF LICENSE

MISCELLANEOUS QUESTIONS CONTINUED

85. Do you object to wearing a uniform?
YES NO
86. Do you object to working nights?
YES NO
87. Do you object to working rotating shifts?
Yes No
88. Do you object to working 12 hour shifts?
YES NO
89. Do you object to occasionally being away from home overnight and for other periods of time attending meetings, acquiring training and otherwise performing official duties?
YES NO
90. If you possess a professional license, has it ever been revoked or suspended for any reason?
YES NO If yes, explain fully on page 34.
91. Do you know of anything that might prevent you from obtaining the position you have applied for?
YES NO If yes, explain fully on page 34.
92. Is there any reason why you cannot work flexible, rotating shifts as they are related specifically to your job assignment or duties?
YES NO If yes, explain fully on page 34.
93. Have you purposely omitted any information from your employment application, resume, this document, or any other document you have submitted?
YES NO If yes, explain fully on page 34.
94. Were you able to understand all of the questions in this document?
YES NO If no, explain fully on page 34.

REFERENCES

Give the names of five responsible persons, other than relatives or past employers, who could provide information about your character, ability, experience, personality, and other qualities.

NAME	ADDRESS	TELEPHONE	YRS. KNOWN

SOCIAL MEDIA ACKNOWLEDGEMENT AGREEMENT

Social media websites such as Facebook, Myspace, Twitter, Yahoo, LinkedIn, YouTube, and similar other Internet platforms are used by millions of people worldwide. Based on this fact, such social media platforms might contain information, photographs, videos, and text based posts or blogs which may violate the Franklin Park Police Department's Policies and Regulations as well as State mandated ethical guidelines. Therefore, to protect other Franklin Park Borough employees, the Franklin Park Police Department, its designated employees, and authorized agents, we conduct searches of social networking platforms, blogs, and all other social media means.

List all email addresses that you have used or are currently using:

Based on the safety and operational needs mentioned above I, the undersigned, clearly understand the reason Franklin Park Borough, The Franklin Park Police Department, its designated employees, and authorized agents conduct social media searches. Thus, I consent that all my social media usage may be reviewed at any time and in the future during my employment.

_____ I consent and agree, without force, persuasion or coercion, freely and openly to allow any representing agent of the Franklin Park Police Department or their designee to review my social networking sites.

_____ I do not consent or agree to this social media acknowledgement agreement.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

_____/_____/20____

Print Sign Date

SOCIAL MEDIA ACKNOWLEDGEMENT AGREEMENT

Name: _____ Date: _____

Address: _____

Phone: _____

Please list **ALL** social media sites that you use:

Sign: _____ Date: _____