



TAVARES POLICE DEPARTMENT SUPPLEMENTAL EMPLOYMENT APPLICATION

Please provide full and complete responses to the following inquiries:

1. List any law enforcement agency to which you have applied in the last two (2) years. Attach additional sheets if necessary.

Agency Name: _____ Date: _____

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2. Yes _____ No _____

If you served in the military, were you ever reprimanded, convicted or adjudicated guilty for any offense under the Uniform Code of Military Justice? If "Yes", explain in complete detail.

3. Yes _____ No _____

If you have law enforcement work experience, have you ever been or are you currently the subject of an internal affairs investigation? If "Yes", please list the agency, dates, nature of investigation and the final outcome. Please use reverse side if more space is needed.

4. Yes _____ No _____

Have you ever used, tried, tasted, experimented with or possessed any hallucinogenic drug, including but not limited to LSD, PCP or Acid? If "Yes", please give details to include the last date used.

5. Yes _____ No _____

Have you ever used any prescription narcotic or drug illegally (includes non-prescribed use of narcotics or drugs prescribed to you by a doctor or using prescription narcotics or drugs prescribed for someone else)? If "Yes", please give details to include the last date used.

6. Yes_____ No_____

Have you ever used any steroid or other illegal muscle-building drug? If "Yes", please give details to include the last date used.

7. Yes_____ No_____

Have you ever purchased illegal drugs?

8. Yes_____ No_____

Have you ever sold illegal drugs?

9. Yes_____ No_____

Have you ever associated with or do you currently associate with any individual whom you knew or should have known is using and/or selling illegal drugs?

10. Yes_____ No_____

Have you ever associated with or do you currently associate with any individual, including family members, whom you knew to be convicted felon?

11. Yes _____ No _____

Have you ever been arrested or investigated for any misdemeanor criminal offense involving perjury or false statement? If "Yes", please list the offense(s) below and the conviction status of the case(s).

12. Yes _____ No _____

Have you ever been arrested or investigated for any misdemeanor criminal offense? If "Yes", please list the offense(s) below and the conviction status of the case(s).

13. Yes _____ No _____

Have you ever been arrested or investigated for any felony criminal offense? If "Yes", please list the offense(s) below and the conviction status of the case(s).

14. If you answered "Yes" to questions 12 and/or 13, please provide the following information for each arrest on a separate sheet of paper:

- City, County and State where the offense(s) occurred
- Arresting Agency
- Status of Case (dropped, nolle prossed, pled, convicted, etc.)
- Explanation of the offense and circumstances surrounding the arrest

(NOTE: Criminal records sealed under Florida and other state Statutes may be available for inspection by a criminal justice agency for the purpose of prospective employment.)

15. Yes _____ No _____

Can you operate a motor vehicle?

16. Yes _____ No _____

Do you currently possess a valid driver's license? If "Yes", please list the following information:

License Type/Class: _____ License Number: _____

Expiration Date: _____ Issuing State: _____

17. Please list all states in which you have held a driver's license, and the dates during which the license was valid.

18. Yes _____ No _____

Has your driver's license ever been suspended or revoked for any reason? If "Yes", please provide the state and corresponding dates during which your license was suspended or revoked. If your license was restored, please provide the state and corresponding restored license status date(s).

19. Yes _____ No _____

Was your license restored? If "Yes", please provide the state and corresponding restore license date(s). _____

20. Yes _____ No _____

Have you ever been convicted of, or pled to fleeing and/or attempting to elude a police officer as defined in F.S.S. 316.193? If "Yes", please list the arresting agency, date of the offense, and the disposition of the arrest.

21. Yes _____ No _____

Have you ever been arrested for the driving under the influence as defined in F.S.S. 316.193? If "Yes", please list the arresting agency, date of the offense, and the disposition of the arrest.

22. Yes _____ No _____

Have you ever received any other traffic citation(s), other than for parking? If "Yes", please list the issuing agency, date of the offense, charge and the disposition of the case.

23. Please list any gangs, clubs, social groups or organizations in which you have been or are currently a member (i.e., street gangs, motorcycle clubs, civic organizations, hate groups, militias, etc.); and the dates of your association with that group.

24. Yes _____ No _____

Do you now or have you ever had regular association with any person or organization that you knew, or should have known, was under criminal investigation, or had a reputation in the community or with law enforcement agencies for being involved in criminal or terrorist behavior/conduct? If "Yes", please provide details of your association and involvement.

Please list chronologically all residences, including any college or military addresses, for the last ten (10) years. Use exact physical addresses with house number and street name - post office boxes cannot be accepted. Begin with your current residence and work backward.

From	To	Street Address	City	County	State

I affirm that this supplemental application with the City of Tavares contains no misrepresentations, falsifications, omissions or concealment of material fact; and that the information I have provided is true and complete to the best of my

knowledge and belief. I am aware that statements made by me on this application are subject to investigation. I am further aware that should an investigation disclose any such misrepresentation, falsification, omission or concealment of material fact, my application may be rejected and my name removed from consideration; and if already employed by the City of Tavares, I may be discharged.

Applicant Signature

Date Signed

Applicant Printed Name

**STATE OF FLORIDA
COUNTY OF LAKE**

Before me personally appeared _____, who states that he/she has executed the foregoing instrument of his/her own free will and accord, with full knowledge of the purpose therefore.

Sworn and subscribed in my presence this _____ day of _____, 20____.

Notary Public, State of Florida at Large
Commission Expires _____

Date

Personally Known OR Produced _____ as Identification