



**Maryland Heights Police Department**  
**Application Form**  
**11911 Dorsett Road**  
**Maryland Heights, Missouri 63043**  
**(314) 298-8700**

---

**Position Applying For**

**Instructions**

Read every question carefully and **answer each question accurately**. An applicant may be disqualified from further processing if he or she intentionally makes a false statement of a material fact, practices, or attempts to practice any deception or fraud in his or her application or interview. **Please type or print legibly with ink.**

**A copy of your birth certificate and a copy of your high school diploma and transcripts** must be attached to this form. This form and documents submitted with it become the property of the Maryland Heights Police Department and will not be returned.

All applications are to be submitted in a sealed envelope to the Maryland Heights Police Department, Office of the Chief of Police, at the above address or emailed with documents attached to [tmanselle@marylandheights.com](mailto:tmanselle@marylandheights.com).

Answer each question fully. The space provided is not intended to limit the length of responses. Use additional sheets as necessary.

**Personal Data**

1. Name \_\_\_\_\_  
(Last, ) (First) (Middle)

2. List all other names you have used.  
\_\_\_\_\_

3. Present address \_\_\_\_\_  
(Address) (Street) (City) (State) (Zip)

4. Telephone number: Home \_\_\_\_\_ Business \_\_\_\_\_

5. Email address: \_\_\_\_\_

6. Are you between the ages of 21 and 45? Yes No

7. Are you a U.S. citizen? Yes No

8. Social security number: \_\_\_\_\_

9. Do you possess a valid license to operate a motor vehicle in the state of Missouri? Yes No

Operator's license number/expiration date: \_\_\_\_\_

**Employment**

List below your complete work history, starting with your present position and working backward to your first employment. List any period of unemployment. Please account for all your time. Include all part-time employment.

	<u>Date</u> <u>Month/year</u>	<u>Employer</u>
A.	From: _____	Name _____ Address _____
	To: _____	Telephone number _____ Supervisor _____ Position _____ Salary _____ Reason for leaving: _____
B.	From: _____	Name _____ Address _____
	To: _____	Telephone number _____ Supervisor _____ Position _____ Salary _____ Reason for leaving: _____
C.	From: _____	Name _____ Address _____
	To: _____	Telephone number _____ Supervisor _____ Position _____ Salary _____ Reason for leaving: _____
D.	From: _____	Name _____ Address _____
	To: _____	Telephone number _____ Supervisor _____ Position _____ Salary _____ Reason for leaving: _____
E.	From: _____	Name _____ Address _____
	To: _____	Telephone number _____ Supervisor _____ Position _____ Salary _____ Reason for leaving: _____

10. Were you ever **discharged** or asked to **resign** from any employment? Yes                      No

If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_

11. May we discuss this application with your present employer? Yes                      No

12. Have you ever applied for employment with this department? Yes                      No

**Arrests and Summonses**

13. Have you ever been convicted of any crime?                      Yes                      No

14. If yes, please provide details below.

Date	Charge	Location	Disposition	Police agency

15. Starting with your present address, please list all addresses where you have lived. Include your address in the military service (if applicable):

Dates from/to	Address	City	County	State	Zip

**Education**

16. List all elementary, high schools, colleges, universities, and/or professional or technical schools that you have attended:

1.     Dates attended \_\_\_\_\_  
        School \_\_\_\_\_  
        Address \_\_\_\_\_ Zip \_\_\_\_\_  
        Years completed \_\_\_\_\_ Degree/diploma \_\_\_\_\_
  
2.     Dates attended \_\_\_\_\_  
        School \_\_\_\_\_  
        Address \_\_\_\_\_ Zip \_\_\_\_\_  
        Years completed \_\_\_\_\_ Degree/diploma \_\_\_\_\_

3. Dates attended \_\_\_\_\_  
 School \_\_\_\_\_  
 Address \_\_\_\_\_ Zip \_\_\_\_\_  
 Years completed \_\_\_\_\_ Degree/diploma \_\_\_\_\_
4. Dates attended \_\_\_\_\_  
 School \_\_\_\_\_  
 Address \_\_\_\_\_ Zip \_\_\_\_\_  
 Years completed \_\_\_\_\_ Degree/diploma \_\_\_\_\_
5. Dates attended \_\_\_\_\_  
 School \_\_\_\_\_  
 Address \_\_\_\_\_ Zip \_\_\_\_\_  
 Years completed \_\_\_\_\_ Degree/diploma \_\_\_\_\_
6. Dates attended \_\_\_\_\_  
 School \_\_\_\_\_  
 Address \_\_\_\_\_ Zip \_\_\_\_\_  
 Years completed \_\_\_\_\_ Degree/diploma \_\_\_\_\_

If you attended a college or university, what was your major and minor?

Major \_\_\_\_\_ Minor \_\_\_\_\_

How many credit hours have you earned, or are presently showing on your college transcript? \_\_\_\_\_

**\*Please attach a certified copy of your college transcript.\***

### **Military Service**

17. Have you ever served active duty in the Armed Services of the United States? Yes  No

If yes, please enclose a copy of your DD214, or equivalent form to verify military service and list below all active military service below:

Branch	serial#	dates to/from	highest rank	primary duty	type discharge

18. Are you currently a member of any Reserve or National Guard organization? Yes  No

**References**

19. Please provide three (3) references, at least one professional in nature who are not relatives and who have known you well during the past five years.

A. Name \_\_\_\_\_  
Address/City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Years known \_\_\_\_\_ Occupation \_\_\_\_\_

B. Name \_\_\_\_\_  
Address/City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Years known \_\_\_\_\_ Occupation \_\_\_\_\_

C. Name \_\_\_\_\_  
Address/City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Years known \_\_\_\_\_ Occupation \_\_\_\_\_

20. The City of Maryland Heights does not discriminate in hiring or employment, on the basis of age, race, color, marital status, political affiliation, religious affiliation, sex, national origin, or handicap status. This form is designed to only obtain information that is necessary to process your application for employment with the City of Maryland Heights Police Department. No question on this form is intended to secure information that will be used for any unlawful discriminatory purpose.

21. Maryland Heights Police Department allows tattoos that **are not visible** in our long sleeve uniform.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant's Printed Name**