

Name: _____



**ENTRY LEVEL POLICE OFFICER
BACKGROUND INVESTIGATION
SUPPLEMENTAL PERSONAL HISTORY STATEMENT**

Dear Applicant,

You have received a Background Investigation Supplemental Personal History Packet for the City of Everett Police Department. **All Entry Level Police Officer candidates are required to complete the Background Investigation Supplemental Personal History Statement.** The Background Investigation Supplemental Personal History Statement may be either delivered or mailed to the City of Everett Human Resources Department located at: 2930 Wetmore Avenue, Suite 5A, Everett, WA 98201. Please refer to the deadline instructions listed in the e-mail in which this form was attached.

Please carefully read the instructions on each page and have the Waiver and Authorization to Release Information notarized when completed (each of the last two pages). Applicants can take their Waiver and Authorization to Release Information to a Notary Public of their choosing. Notary services are also available at the City of Everett Clerk's office. The City of Everett Clerk's office is located on the first floor at 2930 Wetmore Avenue, Everett, WA 98201. It is recommended that all applicants make a copy of their Background Investigation Supplemental Personal History Statement for future reference. **Applicants who have questions regarding the Background Investigation Personal History Statement should contact the Everett Police Department's Office of Professional Standards at (425) 257-8425, Monday – Friday, from 8:00 a.m. – 3:00 p.m.**

Instructions to the Applicant

- The information you provide in this Personal History Statement Supplement will be used as part of the background investigation to assist in determining your suitability for the position of Everett Police Officer.
- Type or neatly print, in ink, responses to all items and questions. If a question does not apply to you, write "N/A" (not applicable) in the space provided for your response. If you cannot obtain or remember certain information, indicate so in your response.
- If you need more space for any response, attach additional pages and identify the additional information by the question number.

Disqualification

Deliberate misstatements or omissions can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals "fail" background investigations is because they deliberately withhold or misrepresent job-relevant information from their prospective employer.

BOTTOM LINE: Be as complete, honest and specific as possible in your responses.

Disclosure of Medically-Related Information

In accordance with the U.S. Americans with Disabilities Act, at this stage of the hiring process applicants are not expected or required to reveal any medical or other disability-related information about themselves in response to questions on this form, or to any other inquiry made prior to receiving a conditional offer of employment.

PERSONAL HISTORY STATEMENT SUPPLEMENT

Everett Police Department
 3002 Wetmore Ave
 Everett, WA 98201
 425-257-8400

Partner/Significant Other				
NAME	HOME ADDRESS (NUMBER / STREET / APT)	CITY	STATE	ZIP
HOME PHONE ()	WORK ADDRESS (NUMBER / STREET / APT)	CITY	STATE	ZIP
WORK PHONE ()	CELL PHONE ()	EMAIL		
YEARS OF DATING	Is there, or has there been, a restraining or stay-away order in effect for this individual? <input type="checkbox"/> YES <input type="checkbox"/> NO			

Supplemental questions	
1) Do you participate in social media? If so, list: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
2) Have you ever committed a crime as a juvenile or adult that went undetected? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
3) Have you ever received or accepted property you know or thought may have been stolen? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
4) Have you ever taken anything belonging to an employer without permission? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
5) Have you ever allowed or helped anyone steal from an employer? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
6) Have you ever cheated on an expense account? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
7) Have you ever given away employers property? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
8) Have you ever falsified an official government document (DSHS, L&I claims, etc) or lied in an official hearing (court testimony, employment hearing, etc.)? <input type="checkbox"/> YES <input type="checkbox"/> NO IF SO, EXPLAIN: _____	
9) Have you or anyone in your family ever been a member of, or attended meetings for, any extremist or subversive group(s)? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
10) Have you ever participated in any illegal sexual activity? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
11) Have you ever had any sexual contact with a child under the age of 16? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
12) Have you ever been arrested or detained on a morals or decency charge? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
13) Have you ever engaged in nude modeling, dancing or participated in any form of sex related entertainment to include attending strip clubs? <input type="checkbox"/> YES <input type="checkbox"/> NO IF SO, EXPLAIN: _____ For strip clubs list date of last visit and location of strip club. _____	
14) Have you ever viewed someone in a private place without their knowledge? IF SO, EXPLAIN: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO

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15) Have you ever photographed or filmed anyone without their knowledge or permission?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		
16) Have you ever participated in a sexual act with an animal?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		
17) Have you ever been involved in a pursuit in which you evaded or attempted to evade the police?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		
18) Have you ever used physical force against anyone or been in a fight at any point in your lifetime?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		
19) Have you ever damaged property during an argument with a spouse, significant other, roommate or anyone else?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		
20) Have you ever used physical force against your spouse/partner/significant other/roommate?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		
21) Have you ever been arrested for domestic violence?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		
22) Are you now or have you ever been employed in law enforcement?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If so, please answer the following:		
A) Have you ever accepted a gratuity?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
B) Have you ever accepted anything for overlooking a violation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
C) Have you ever used your official position for personal gain?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
D) Have you ever withheld any evidence seized in the course of your official duties?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
E) Have you ever been the subject of an internal investigation by your department?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF SO, EXPLAIN: _____		

CURRENT ASSETS

Savings _____

 Checking _____

 Real Estate Equity _____

 Other Assets – Describe _____

Total Assets \$ _____

CURRENT LIABILITIES (BALANCE DUE)

Real Estate Indebtedness _____

 Charge Accounts _____

 Auto Loans _____

 Personal Loans _____

 Other Liabilities – Describe _____

Total Liabilities \$ _____

POLICE OFFICER
WAIVER AND AUTHORIZATION TO RELEASE INFORMATION

To Whom it May Concern:

I am an applicant for a police officer position with the Everett Police Department. I do hereby authorize you to release to the Everett Police Department any and all records and/or information which you may have concerning me, including, but not limited to, information/records related to my reputation, employment and attendance records, school transcripts, military service records and financial status. Information of a confidential or privileged nature may be included. Your reply will be used to assist the Everett Police Department in determining my qualifications and fitness for the position I am seeking with the Department.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974 and waive those rights with the understanding that information furnished will be used by the Everett Police Department in conjunction with employment procedures. _____initials

I understand that any information obtained by the Everett Police Department for its personal history background investigation that is developed directly or indirectly, in whole or in part, upon this release authorization becomes the property of the Everett Police Department and I will not have access to any of the background investigation. *I further understand and acknowledge that the Everett Police Department may provide certain types of information that is obtained in the course of its background investigation to my current employer, such as information about criminal activity or serious policy violations.* _____initials

I hereby waive and release you, your organization, employees, and agents from any and all claims, liability, personal injuries, damages or losses, of any nature, which may result from furnishing the requested information.

I hereby waive, release and hold harmless the City of Everett, its officers, employees, agents, and any current or former employers, any schools or educational and technical institutions and their employees or agents, and the employment references specifically named from any and all claims, lawsuits, personal/bodily injuries, damages or losses, of any nature, resulting from the release of any information requested by the City of Everett in connection with my application for employment by the City. My authorization and release from liability are voluntary acts and shall be effective only for employment investigations by the City of Everett.

Print Applicant Name

Signature of Applicant

Subscribed and sworn to before me on the _____ day of _____, 20_____.

Notary Public for State of WA

Note: A photocopy reproduction of this request form shall be, for all intent and purposes, as valid as the original. You may retain this form in your files.

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