

ABBEVILLE POLICE DEPARTMENT



William "Bill" Spearman

Chief of Police

ABBEVILLE POLICE DEPARTMENT
OFFICE OF THE CHIEF

ABBEVILLE

POLICE DEPARTMENT

APPLICATION FOR EMPLOYMENT

“ONLY TOGETHER, CAN WE KEEP ABBEVILLE SAFE”

ABBEVILLE POLICE DEPARTMENT
OFFICE OF THE CHIEF

The Abbeville Police Department is devoted to recruiting and hiring the best qualified applicants to serve the City of Abbeville, its citizens and property therein.

The department's hiring process is conducted following the rules set by the Louisiana Fire and Police Civil Service Board. These rules require the department to hire from an active list of applicants that have passed an open, competitive entrance examination related to the position the applicant is applying for. As a result, the department may only reject applications for the following reasons:

- The applicant does not meet the established minimum qualifications for the position applied for.

Minimum Requirements

- Must be at least 18 years of age
- Must possess a high school diploma or its equivalent
- Must conform and abide by laws of the United States, State of Louisiana and any subdivisions thereof
- Must possess a valid Louisiana driver's license with a good driving history
- Must have no felony convictions and no misdemeanor convictions which would prohibit you from carrying a firearm
- Must be able to successfully complete all steps within the hiring process
- The applicant makes false statements of any fact; or the applicant practices or attempts to practice deception or fraud in the application for employment.

Police officers are recipients of the public trust, and as a result, their performance is subject to public scrutiny. The Abbeville Police Department conducts an extensive background check where the applicant's involvements in certain activities are questioned. These activities include, but are not limited to:

- Recent or illegal drug use
- Any illegal drug use while employed in a law enforcement capacity
- Sale/Manufacture of illegal drugs
- Traffic crime convictions
- Suspension or revocation of driver's license
- A pattern of moving violations
- A pattern of at-fault accidents
- Any adult criminal convictions, arrests or prosecutions
- Termination or leaving an employer in lieu of termination
- Failure to pay income tax or child support
- Excessive debt or accounts in collections

Any of these activities may be grounds for disqualifying an applicant during the hiring process.

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Applicants interested in a career with the Abbeville Police Department must first successfully pass an open, competitive examination pertaining to the position the applicant is applying for.

Applicants can obtain civil service test applications, test dates and testing locations from the following:

Abbeville Police Department
Attn: Heather Fontenot, Secretary to the Chief
304 Charity Street
Abbeville, LA 70510
(337) 893-2511

Or by visiting the Louisiana Office of State Examiner website at www.ose.louisiana.gov.

All applicants are given careful, fair and equal consideration. The city of Abbeville and the Abbeville Police Department does not discriminate because of race, color, religion, sex or national origin.

“Equal opportunity employer”

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BACKGROUND INVESTIGATION CONSENT FORM

This release constitutes my consent and authority to examine and obtain copies and abstracts of records and to receive statements and information regarding my background.

Specifically, I authorize the release of the following data or records to the Abbeville Police Department: Employment, Educational, Medical, Physiological; Selective Service; Police and Criminal; Motor Vehicle and Driving; Financial and Credit; Polygraph or CVSA Examinations; and the UNDELETED copy of my military separation document and medical records from the appropriate Military Records Center and Department of Veterans Affairs.

This authorization is given in connection with a background investigation being conducted relative to my application for, or continued employment with, the Abbeville Police Department. The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing an investigation, which may provide pertinent data for the Abbeville Police Department, to consider my suitability for employment.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part upon this release authorization, will be considered in determining my suitability for employment by the Abbeville Police Department. I understand that all materials pertaining to this background investigation become the property of the Abbeville Police Department and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his/her agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is disapproved, the confidential information or the source of information will not be revealed to me. I understand that in the event of the investigating agency finds conduct that is illegal or unbecoming of a police officer and I am currently serving in the capacity of a police officer in a jurisdiction, the investigating agency has my permission to disclose the information to my current employer.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

AFFIANT'S SIGNATURE

DATE

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RECRUITING AND EMPLOYMENT INFORMATION

In addition to other standard requirements to becoming a police officer (minimum of 18 years of age, no domestic or felony convictions, valid driver's license, passing the civil service exam, etc.) every potential hire must also successfully complete the following steps to become an Abbeville Police Department officer:

Interview

- Each applicant must pass an interview process in which seasoned officers speak to the applicant, determining if the officers believe that the applicant could be an asset to the police department.

Background Check

- Each applicant is put through a background check in which the applicant's personal history, employment history, financial history, etc. are investigated by assigned personnel. The results of this background check determine whether or not the applicant will proceed to the next step of the process. The background check also does not stop at this time, and further investigations continue.

Computer Voice Stress Analyzer

- Each applicant must be interviewed by a certified C.V.S.A. Operator. Once the interview is concluded, which includes a 180+ questionnaire, the operator determines whether or not the applicant may take the C.V.S.A.. The results of the test, if given, are then checked by a second certified operator and a specialized computer algorithm. If all three agree that the applicant has not shown deception in the test, he may then move onto the next test.

Psychological Test

- Each applicant is put through a thorough psychological test by Spartan Services, Inc. This includes both a lengthy computer-based test, as well as a face-to-face interview with a licensed psychiatrist. Spartan Services, without any input from the police department, provides a psychological profile of the applicant. This profile includes an assessment which utilizes Wonderlic Cognitive Ability Test, Minnesota Multiphasic Personality Inventory -2, M-Pulse Predictive Uniform Law Enforcement Selection Evaluation Inventory, and the Clinical Interview.
- The results of this psychological evaluation are then submitted to Risk Management, Inc. of Louisiana. Risk Management evaluates the results of the test, then relays via email to the police department whether or not they will approve the subject for coverage. If the applicant is not approved for coverage, the applicant is notified, and their process is stopped. If the applicant is approved, the applicant may move onto the next test.

Physical Agility Test

- Each applicant is put through rigorous physical testing by Precision Rehabilitation, Inc. or other appointed testing facility. The physical testing is designed to determine whether the applicant can physically perform the duties assigned to him as a police officer. If the applicant is unable to pass the

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physical testing by Precision Rehabilitation or other appointed testing facility, the applicant will not be allowed to continue.

Firearms Qualification

- Each applicant must show a proficiency to shoot an issued firearm. The applicant is put through an 8-hour course by a certified range master. The applicant then must pass a minimum score on a POST (Louisiana Peace Officer Standards and Training) test given by the range master. The applicant, if unable to achieve a passing score either on the written or shooting tests, will not be able to move forward in the hiring process.

Pre-Employment Drug Screen

- Each applicant must pass a pre-employment drug screen, conducted by Medxcel. This drug screen is given without prior notice to the applicant. If the presence of any illegal drugs is detected, or if there are any drugs detected that are not prescribed to the applicant, the applicant is removed from consideration.

City Council Interview

- Once the entire application process above has been successfully completed by the applicant, the applicant will be interviewed by the Abbeville City Council, who will, upon successfully passing the interview, vote as to whether the applicant shall be hired.

You are responsible for your own transportation during the entire process

Note: The various testing in the pre-employment process may, at the discretion of the Abbeville Police Department, be altered at any time.

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SALARY / BENEFITS

Police Officer:

- **\$2,221.67** per month (15% increase to **\$2,554.92** per month if Louisiana P.O.S.T. Certified)
- 15% increase after first year (Unless given the increase upon initial hiring)
- 25% increase when promoted to Sergeant
- 50% increase when promoted to Lieutenant

Telecommunications Officer (Dispatcher):

- **\$2,131.67** per month
- 5% increase after first year
- 10% increase after fourth year
- 15% increase after eighth year

***All employees receive a 2% increase in salary on anniversary date. A P.O.S.T. Certified Officer will receive State Supplemental Pay of \$500.00 per month, after one year of employment.

Health Insurance:

- Single Employees: paid for by the City of Abbeville
- Family Rates: \$73.08 per check for unlimited family members

Health Insurance Benefits:

- \$400.00 deductible for single employees (\$800.00 for family)
- \$20.00 co-pay for doctor visits
- \$10.00 for generic prescriptions
- \$20.00-\$40.00 for name brand prescriptions covered by the plan

Major Medical:

- 70% paid by insurance
- 30% paid by employee
- After employee pays \$6,400.00 for individual and \$12,800.00 for family (plus deductible) out of pocket, insurance pays 100% of major medical. **This is per year***

Vacation:

- After one year of employment - 120 hours
- After third year of employment - 144 hours
- After tenth year of employment - 192 hours

Sick Leave:

- 52 weeks (365 days) per year

Gym Membership:

- Employees are provided a gym membership, at no cost to employee, at SNAP Fitness in Abbeville, if a membership slot is available.

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PERSONAL INFORMATION

LAST	FIRST	MIDDLE	MAIDEN
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PHYSICAL ADDRESS	CITY	STATE	ZIP
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HOME TELEPHONE NUMBER	ALTERNATE TELEPHONE NUMBER
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SOCIAL SECURITY NUMBER	DATE OF BIRTH
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PLACE OF BIRTH

HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR
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ON THE ABOVE LINE, LIST ANY AND ALL DISTINGUISHING MARKS, INCLUDING, BUT NOT LIMITED TO, PHYSICAL DEFECTS, BIRTHMARKS, SCARS, ETC...

ON THE ABOVE LINE, LIST ANY AND ALL ALIASES AND/OR NICKNAMES THAT YOU HAVE...

<input type="checkbox"/> YES ARE YOU A CITIZEN OF THE UNITED STATES?	<input type="checkbox"/> NO	<input type="checkbox"/> YES ARE YOU A REGISTERED VOTER OF THIS STATE?	<input type="checkbox"/> NO
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RACE / SEX INFORMATION

THE FEDERAL GOVERNMENT OFTEN REQUIRES THAT THE FOLLOWING RACE AND SEX INFORMATION BE REQUESTED FOR STATISTICAL REPORTING PURPOSES. COMPLETION OF THIS SECTION IS VOLUNTARY AND YOUR APPLICATION WILL NOT BE REJECTED IF YOU CHOOSE NOT TO PROVIDE THIS INFORMATION...

<input type="checkbox"/> MALE	<input type="checkbox"/> WHITE	<input type="checkbox"/> AM. INDIAN	<input type="checkbox"/> ASIAN
<input type="checkbox"/> FEMALE	<input type="checkbox"/> BLACK	<input type="checkbox"/> HISPANIC	<input type="checkbox"/> OTHER

IF YOU ARE APPLYING FOR A JOB WHICH REQUIRES THE ABILITY TO DRIVE A VEHICLE, PLEASE PROVIDE YOUR DRIVER'S LICENSE NUMBER AND STATE ISSUED...

DRIVER'S LICENSE NUMBER	STATE ISSUED
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TITLE OF POSITION IN WHICH YOU ARE APPLYING FOR? EX. (RESERVE OFFICER, POLICE OFFICER, TELECOMMUNICATIONS OFFICER OR SECRETARY TO THE CHIEF)

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MARITAL STATUS

MARRIED

ENGAGED

DIVORCED

SINGLE

SEPARATED

WIDOWED

SPOUSE'S INFORMATION

LAST	FIRST	MIDDLE	MAIDEN
PHYSICAL ADDRESS	CITY	STATE	ZIP
HOME TELEPHONE NUMBER	ALTERNATE TELEPHONE NUMBER		
SOCIAL SECURITY NUMBER	DATE OF BIRTH		
<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE		
SEX			

RELATIVES

FILL OUT ALL INFORMATION ABOUT RELATIVES, ALIVE OR DECEASED
CHILDREN / STEP-CHILDREN / ADOPTED CHILDREN

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS

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IMMEDIATE FAMILY

FATHER:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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MOTHER:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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STEP
FATHER:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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STEP
MOTHER:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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SIBLING:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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SIBLING:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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SIBLING:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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SIBLING:

FULL NAME	DATE OF BIRTH	PRIMARY ADDRESS
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LIST ANY RELATIVES EMPLOYED BY THE
ABBEVILLE POLICE DEPARTMENT

FULL NAME	RELATIONSHIP	DEPARTMENT
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FULL NAME	RELATIONSHIP	DEPARTMENT
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FULL NAME	RELATIONSHIP	DEPARTMENT
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MISCELLANEOUS INFORMATION

LIST ALL RESIDENCES FOR THE PAST TEN YEARS, BEGINNING WITH YOUR PRESENT ADDRESS
INCLUDE OFF BASE RESIDENCES IF BEEN IN SERVICE AND OR DORMITORIES IF IN COLLEGE

MONTH & YEAR	ADDRESS	CITY	STATE	ZIP
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MONTH & YEAR	ADDRESS	CITY	STATE	ZIP
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MONTH & YEAR	ADDRESS	CITY	STATE	ZIP
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MONTH & YEAR	ADDRESS	CITY	STATE	ZIP
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MONTH & YEAR	ADDRESS	CITY	STATE	ZIP
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MONTH & YEAR	ADDRESS	CITY	STATE	ZIP
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REFERENCES

LIST THREE (3) PERSONS, NOT RELATED, NOR EMPLOYERS / EMPLOYEES WHO HAVE CURRENT OR FORMER INFORMATION ABOUT YOU

FULL NAME	TELEPHONE NUMBER	OCCUPATION	
ADDRESS	CITY	STATE	ZIP
FULL NAME	TELEPHONE NUMBER	OCCUPATION	
ADDRESS	CITY	STATE	ZIP
FULL NAME	TELEPHONE NUMBER	OCCUPATION	
ADDRESS	CITY	STATE	ZIP

EDUCATION

LIST YOUR EDUCATION. INCLUDE HIGH SCHOOL AND ALL COLLEGES, BUSINESS AND TECHNICAL SCHOOLS

SCHOOL NAME	CITY	STATE	FROM	TO	GRADUATE
					<input type="checkbox"/> YES <input type="checkbox"/> NO
SCHOOL NAME	CITY	STATE	FROM	TO	GRADUATE
					<input type="checkbox"/> YES <input type="checkbox"/> NO
SCHOOL NAME	CITY	STATE	FROM	TO	GRADUATE
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ON THE LINES ABOVE, LIST ANY BUSINESS MACHINE KNOWLEDGE OR TRAINING

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EMPLOYMENT HISTORY

LIST ALL EMPLOYMENT HELD WITHIN THE PAST TEN (10) YEARS, BEGINNING WITH YOUR PRESENT EMPLOYMENT

01.

COMPANY NAME		TELEPHONE NUMBER	SUPERVISOR		
ADDRESS		CITY	STATE	ZIP	
				<input type="checkbox"/> HOUR	
			\$	PER	<input type="checkbox"/> WEEK
					<input type="checkbox"/> MONTH
FROM	TO	JOBTITLE	SALARY		
DESCRIPTION OF DUTIES			REASON FOR LEAVING		

02.

COMPANY NAME		TELEPHONE NUMBER	SUPERVISOR		
ADDRESS		CITY	STATE	ZIP	
				<input type="checkbox"/> HOUR	
			\$	PER	<input type="checkbox"/> WEEK
					<input type="checkbox"/> MONTH
FROM	TO	JOBTITLE	SALARY		
DESCRIPTION OF DUTIES			REASON FOR LEAVING		

03.

COMPANY NAME		TELEPHONE NUMBER	SUPERVISOR		
ADDRESS		CITY	STATE	ZIP	
				<input type="checkbox"/> HOUR	
			\$	PER	<input type="checkbox"/> WEEK
					<input type="checkbox"/> MONTH
FROM	TO	JOBTITLE	SALARY		

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DESCRIPTION OF DUTIES

REASON FOR LEAVING

04.

COMPANY NAME

TELEPHONE NUMBER

SUPERVISOR

ADDRESS

CITY

STATE

ZIP

HOUR

WEEK

MONTH

\$

PER

FROM

TO

JOBTITLE

SALARY

DESCRIPTION OF DUTIES

REASON FOR LEAVING

05.

COMPANY NAME

TELEPHONE NUMBER

SUPERVISOR

ADDRESS

CITY

STATE

ZIP

HOUR

WEEK

MONTH

\$

PER

FROM

TO

JOBTITLE

SALARY

DESCRIPTION OF DUTIES

REASON FOR LEAVING

06.

COMPANY NAME

TELEPHONE NUMBER

SUPERVISOR

ADDRESS

CITY

STATE

ZIP

HOUR

WEEK

MONTH

\$

PER

FROM

TO

JOBTITLE

SALARY

DESCRIPTION OF DUTIES

REASON FOR LEAVING

07.

COMPANY NAME

TELEPHONE NUMBER

SUPERVISOR

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ADDRESS	CITY	STATE	ZIP
		\$	<input type="checkbox"/> HOUR <input type="checkbox"/> WEEK <input type="checkbox"/> MONTH
FROM	TO	JOB TITLE	SALARY
DESCRIPTION OF DUTIES		REASON FOR LEAVING	

08.

COMPANY NAME	TELEPHONE NUMBER	SUPERVISOR
ADDRESS	CITY	STATE
		\$
FROM	TO	JOB TITLE
DESCRIPTION OF DUTIES		REASON FOR LEAVING

QUESTIONNAIRE

ATTACH ADDITIONAL PAPER, IF NECESSARY, TO THOROUGHLY ANSWER THE FOLLOWING QUESTIONS

1.) Have you ever previously applied for a position with the Abbeville Police Department?

YES NO Date:

MM/DD/YYYY

EXPLAIN

2.) Have you ever previously applied for a position with other law enforcement or government agencies?

YES NO Date:

MM/DD/YYYY

EXPLAIN

YES NO

ACCEPTED

IF NO, EXPLAIN REASON FOR REJECTION

3.) Have you ever been charged with a criminal offence, misdemeanor or felony or violation either by arrest, indictment, summons or bill of information, in Louisiana or any other state, country or jurisdiction, regardless of the disposition or final outcome of the criminal charge or violation? *(All convictions must be included, even if the conviction has been expunged or set aside through either articles 893, 894 or R.S. 44.0, furthermore, DWI's must be included.)*

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YES NO

IF YES, COMPLETE CHART BELOW
USE ADDITIONAL PAPER IF NECESSARY

DATE AGENCY CITY & STATE CHARGE DISPOSITION

4.) Have you ever been found guilty of, or entered a plea of guilty or nolo contendere to, operating a vehicle while intoxicated?

YES NO

EXPLAIN

5.) Have you ever received a pardon or expungement for a criminal offense?

YES NO

EXPLAIN

6.) Are you currently on probation or parole for a criminal offense?

YES NO

EXPLAIN

7.) Are there any immediate civil or criminal action pending against you or your spouse?

YES NO

EXPLAIN

8.) Have you ever received a traffic citation or been involved in a traffic accident?

YES NO

EXPLAIN

9.) Have you or your spouse ever had your wages garnished?

YES NO

EXPLAIN

10.) Have you or your spouse ever been a party to small claims or court action?

YES NO

EXPLAIN

11.) Have you ever been committed or voluntarily admitted to any treatment facility, institution or hospital for the abuse of a controlled dangerous substance as defined in R.S. 40:961 – 40:964, or for the abuse of alcoholic beverages?

YES NO

EXPLAIN

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12.) Have you ever been hospitalized in an institution for any form of mental illness or infirmity?

YES NO

EXPLAIN

13.) Have you ever received medical treatment for a mental disorder of any kind by a licensed medical practitioner?

YES NO

EXPLAIN

14.) List all hospitalizations within the past ten (10) years.

DATE HOSPITAL CITY & STATE REASON

15.) List all health care providers you have seen within the past five (5) years.

HEALTH CARE PROVIDER ADDRESS TELEPHONE NUMBER

16.) If employed by the Abbeville Police Department, do you anticipate any income other than this department's income?

YES NO

EXPLAIN

17.) If it became necessary, in the course of your police duties, to take a life, would you have any reluctance to do so because of religious beliefs?

YES NO

EXPLAIN

18.) Due to the rising cost of training, do you think you would be reluctant to entering into a three year agreement / contract with the Abbeville Police Department?

YES NO

EXPLAIN

19.) Have you ever served in the Army, Navy, Air Force, Marine Corps, R.O.T.C., Military Reserves or other military or semi military organizations?

YES NO

EXPLAIN

20.) Are you required to attend active duty? How long and where must you attend?

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YES NO

EXPLAIN

21.) List any and all special skill or training:

22.) List all organizations, clubs and social groups that you are currently or have been a member of:

24.) Within the past five years, have you been terminated or resigned in lieu of termination from any position for reasons other than a reduction in force?

YES NO

EXPLAIN

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CHECKLIST

- _____ Application (**Completely** filled out)
- _____ Copy of Driver's License
- _____ Copy of Birth Certificate
- _____ Copy of Social Security Card
- _____ Copy of Diploma or GED Equivalent
- _____ Copy of Degree (If applicable)
- _____ Copy of DD214 (If applicable)
- _____ Copy of Divorce Decree (If applicable)
- _____ Signed Background Investigation Consent Form
- _____ Civil Service Test Score

Prior to turning in application, please use this checklist to assure that you have all required paperwork signed and turned in. Any part of this checklist that is not turned in may result in the delay in processing your application or the refusal of your application.



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