

Please mail or bring your completed application to:

Machias Police Department

(207)255-8558 (Phone)

P.O. Box 418 (17 Stackpole Drive)

(207)255-0779 (Fax)

Machias, ME 04654

Resumes may be attached, but will not be accepted in lieu of a completed application.

Job Data

Job Title:	Date you will be available for employment:
Job Posting No.:	

Personal Data

Name: Last:	First:	Middle:
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Address:		
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City:	State:	Zip:
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Phone #:	Days:	Evenings:	Alternate:
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All applicants who are offered employment must provide documents which establish their identity and employment eligibility for authorization to work in the U.S.

Do you have the legal right to work in the U.S.? Yes No

Date of birth (if less than 18 years of age):

Have you ever worked or volunteered for this Municipality? Yes No

If yes, please give the dates:

Do you have any relatives employed with this Municipality? Yes No

If yes, please list:

Name:	Division:	Relationship:
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Name:	Division:	Relationship:
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Name:	Division:	Relationship:
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Driver's License No. & State:	Class:	Expiration:
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Have you had any traffic convictions or accidents in the last three years? Yes No

If yes, please list:

Conviction or Accident:	Date:
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Conviction or Accident:	Date:
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Conviction or Accident:	Date:
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Conviction or Accident:	Date:
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Please list other names you have used:

Have you been convicted of a crime? Yes No

If yes, please give details including dates, charges, and disposition. Convictions are not an absolute bar to employment. Consideration is given to the offense and its relationship to the position for which you are applying.

Education

Did you graduate from High School or do you have a G.E.D.?

Yes

No

High School Name:

Location:

Name of School, College(s) or University	Major	Credit Hours	Degree*

* Proof of degrees from College/University will be required upon hire.

Name of Trade/Technical/Business or Other School(s) Attended	Course of Study	Diploma

List other licenses held (date & #), professional registrations (date), certificates and professional memberships:

List Honors, Awards, Fellowships:

Skills Overview

Approximate typing speed in words per minute:

List computer software with which you are familiar:

Fluent in a language other than English?

Yes

No

Language(s):

Speak:

Read:

Write:

Please summarize relevant skills and experience that exemplify your qualifications for the above position:

Tools and machines you can use and operate:

Light or heavy motor vehicle equipment you can operate:

Summarize volunteer services work, including dates:

Summarize leadership roles:

Employment Application

We are an Equal Opportunity Employer

Employment

Current or most recent employer:

Phone #:

Address:

Your title:

Employment dates:

From

To:

Supervisor's name/title:

Starting Salary:

Ending:

Hours per week:

Work Performed:

Reason for leaving:

May we contact this employer if you are considered for the position?

Yes

No

Employer:

Phone #:

Address:

Your title:

Employment dates:

From

To:

Supervisor's name/title:

Starting Salary:

Ending:

Hours per week:

Work Performed:

Reason for leaving:

May we contact this employer if you are considered for the position?

Yes

No

Employer:

Phone #:

Address:

Your title:

Employment dates:

From

To:

Supervisor's name/title:

Starting Salary:

Ending:

Hours per week:

Work Performed:

Reason for leaving:

May we contact this employer if you are considered for the position?

Yes

No

Employment Application

We are an Equal Opportunity Employer

Employment

Employer:		Phone #:
Address:		
Your title:		
Employment dates:	From	To:
Supervisor's name/title:		
Starting Salary:	Ending:	Hours per week:
Work Performed:		
Reason for leaving:		
May we contact this employer if you are considered for the position?		Yes No
Employer:		Phone #:
Address:		
Your title:		
Employment dates:	From	To:
Supervisor's name/title:		
Starting Salary:	Ending:	Hours per week:
Work Performed:		
Reason for leaving:		
May we contact this employer if you are considered for the position?		Yes No

Military

Have you ever served on active duty in the U.S. armed forces?		Yes No
If yes, dates:	From:	To:
Branch:		
Primary Duties:		

In order to be admitted to the Basic Law Enforcement Training Program, an applicant who is employed as a law enforcement officer must meet the standards listed below in bullets A through N. In the case of a person not yet employed as a law enforcement officer, the applicant must meet the standards set forth below, listed in bullets A through N, as determined by the Selection Committee established by the Board of Selectmen.

- A. Shall be a high school graduate, or have scored as follows on the General Education development test:
 - 1. not lower than 35 on any one of the 5 parts, and
 - 2. an average not lower than 45 for all 5 parts.
- B. Shall be at least 21 years of age unless the applicant has an Associates Degree or 60 credit hours of post secondary education, in which case the Applicant must be at least 20 years of age.
- C. Shall submit the medical certificate provided by the Academy, signed by a licensed physician indicating that the applicant is physically and medically fit to undergo physical training at the Academy.
- D. Shall meet the physical fitness standards as established by the Board of Selectmen.
- E. Should have no convictions for Murder, Class A, Class B, Class C, or Class D crimes; or convictions for any violation of the Maine Criminal Code, chapter 15, 19, 25, or 45, or a conviction for any equivalent crime in another jurisdiction outside the State of Maine. A person may make application to the Board of Selectmen for a waiver of this provision.
- F. Should not have engaged in any conduct that is penalizing in this state as Murder, Class A, Class B, Class C, or Class D crime, or any provision of the Maine Criminal Code, chapters 15, 19, 25, or 45; or engaged in such conduct in another jurisdiction outside of the State of Maine, unless that conduct is not punishable as a crime under the laws of that jurisdiction. A person may make application to the Board of Selectmen for a waiver of this provision.
- G. Shall complete a state and federal criminal records check through the submission of fingerprints to the State Bureau of Identification and the Federal Bureau of Investigation.
- H. Shall possess a valid motor vehicle operator's license. If such license is not a Maine license at the time of admission to the Academy, the applicant shall obtain a State of Maine license within the time limits prescribed by Maine law.
- I. Shall be able to read and write at a level necessary to master the law enforcement basic training course as determined by the use of a reading and writing test.
- J. Shall be of good moral character, as determined by a thorough background investigation by the hiring agency; or in the case of a person not yet employed, by the Academy Selection Committee, after review of the background investigation conducted by a licensed investigator approved by the Board of Selectmen.

- K. Shall complete to the satisfaction of the employer, or in the case of a person not yet employed, to the Academy Selection Committee, a polygraph examination conducted by a polygraph examiner who is either licensed in the State of Maine or has been previously approved by the Board. The examination shall follow the guidelines in the "Police Applicant Polygraph Testing" manual as approved by the Board.
- L. Shall undergo, and complete to the satisfaction of the employer, or in the case of a person not yet employed, to the Academy Selection Committee, an evaluation of the applicant's suitability to work as a law enforcement officer by a licensed psychologist or licensed psychological examiner with experience in psychological screening in the field of law enforcement. The evaluation shall be subject to the approval of the Board of Selectmen and shall include, at a minimum, an evaluation of the following characteristics: anxiety, mood, anger, anti-social characteristics, ability to get along with others, judgment, and verbal skills.
- M. Shall complete an oral interview by the hiring agency or in the case of a pre-employment candidate, by a panel appointed by the Chair of the Board of Selectmen representing state , municipal, and county law enforcement agencies.
- N. Shall not falsify or misrepresent any information during the application process, background investigation, or polygraph examination.

Background Check Authorization Form
Town of Machias, Maine

I, _____ (type/print full name) understand that in order to assess my qualifications for the position of Patrol Officer a full background investigation is necessary. I, therefore, authorize the Town of Machias, Maine or its Police Department to conduct an investigation in order to obtain information concerning my background, which may include but no be limited to:

- Verification of information provided on my application for employment;
_____ (Initials) _____ (Date)
- contacting employers (past/present), clients, business associates, professional organizations, or other institutions, regarding work performance and character;
_____ (Initials) _____ (Date)
- verification of licensure and/or educational attainment;
_____ (Initials) _____ (Date)
- criminal background check;
_____ (Initials) _____ (Date)
- driver's license check.
_____ (Initials) _____ (Date)

I understand that a consumer report **may be prepared** summarizing the above information. I may request a copy of any report that is prepared regarding myself from the consumer-reporting agency and may also request the nature and substance of all information about myself contained in the files of the consumer-reporting agency. I understand that proper identification will be required and that I should direct my request to:

Keith Mercier, Machias Police Chief

I hereby release any individual, entity, and the Town of Machias from all claims of liabilities that might arise from the inquiry into or disclosure of such information, including claims under any federal, state, or local civil rights law and any claims for defamation or invasion of privacy.

All the information and materials I have provided the Town of Machias, as part of the employment process are accurate and truthful. I realize that providing the Town of Machias with false information or intentionally withholding relevant information regarding my application may be grounds for dismissal.

Applicant Name (Print): _____

Applicant Signature: _____

Social Security Number: _____

Date: _____