



INSTRUCTIONS

(read carefully before proceeding)

These instructions are provided to assist you in properly completing this application. It is essential that the information be accurate in all respects. The information will be used in a Background Investigation to assist in determining your suitability for the position for which you have applied.

1. Carefully read the job announcement for the position you are applying for. Pay particular attention to the desired/minimum qualifications to make sure you have included your pertinent education and/or experience in this application.
2. The completion of this application is mandatory, and it must be returned by 4:00 p.m. on the last date to file as stated on the job announcement, in order for you to remain in the employment process. This only applies to applications that have a closing date.
3. Provide all the information requested by handwriting in legible blue ink or printing.
4. Answer all questions. *DO NOT leave any blank spaces.* If a question is not applicable to you, enter N/A in the space provided.
5. Avoid errors by reading the directions carefully before making any entries on the application. Be sure your information is correct and in proper sequence before you begin.
6. You are responsible for obtaining the correct addresses and phone numbers. If you are not sure of an address or phone number, please check it by personal verification. Also, you must keep the background investigator informed if your address or phone number changes during the employment process.
7. If there is insufficient space on the application for you to include all the information required, attach extra sheets to the correct section that it applies to. Be sure to reference the section and question before continuing with your answer.
8. Account for all the time periods in your background.
9. All statements are subject to verification.
10. The Release of Information page (last page) must be notarized, prior to returning the application.
11. If you are unsure about how to answer a particular question, contact the Winlock Police Department at 360-785-3891.

It is to your advantage to respond openly, as deliberate inaccuracies, no matter how insignificant and regardless of the reason for the inaccuracy will cause your name to be removed from the eligibility list.

Any negative factors in your past will be evaluated in terms of frequency, relevance, circumstances surrounding its occurrence and significance to the position for which you are applying (example: being fired from a job, having an arrest or poor traffic record may not be in and of itself grounds for disqualification).

Deception at any stage during the hiring process is automatically disqualifying under the Civil Service Rules.

Reasonable accommodation with the application and examination process are available, upon request, for persons with disabilities.



City of Winlock
Police Department

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Please include copies of the following documents with your completed application:

1. High School Diploma, GED, or college diploma (if applicable).
2. Driver's License.
3. Military Discharge Certificate (DD Form 214-Copy 4).
4. Military Judicial or Non-Judicial Actions.
5. Social Security Card.
6. Birth Certificate (only birth certificates issued by a governmental entity, state, district, city, or county will be acceptable). Birth certificates created by hospitals or other organizations will not be acceptable or a passport.
7. Professional License/Certificates (if applicable).
8. Any documentation that will assist you in explaining any past, unusual situations or problems (example: credit repossessions, civil suits, criminal convictions, etc.).
9. Divorce Decree and related divorce documents (if applicable).
10. Any other documents that you feel are relevant or which would assist us in our investigation in determining your suitability for the position you are applying for (example: college transcript(s), civilian or military job performance evaluations, awards or decorations, civil litigations, or any special qualifications).

Reminder: be sure to sign and date the application and have the Authorization to Release Information, notarized.

RETURN THIS APPLICATION TO:

**Winlock Police Department
323 NE First St, PO Box 777
Winlock, WA 98596-0777
wpdclerk@cityofwinlock.com**



Self-Assessment Checklist

The Winlock Police Department conducts a thorough investigation on all candidates considered for employment. The investigation includes the following: completion of a personal history statement, background investigation, polygraph, psychological, drug screening and physical agility test.

The following checklist of requirements is being provided to assist you in determining your eligibility status:

- You are a citizen of the United States.
- You can read and write the English language.
- You are at least 21 years of age or will be at the anticipated date of hire.
- You have a valid Washington State Driver's License or have a valid driver's license from another state and are eligible to obtain a Washington State Driver's License.
- You have had a good driving record for the past 5 years.
- You have received a high school diploma or G.E.D.
- You have no felony convictions.
- You have no gross misdemeanor or misdemeanor convictions involving moral turpitude.
- You have had no other misdemeanor convictions in the past 5 years.
- You have had no "convictions" for any crime of Domestic Violence in accordance with RCW 9.41.040 since July 1, 1993.
- You have not used any illegal controlled substance in the past 3 years.

Select one of the following:

- You were discharged honorably from the Armed Forces.
- You have never been in the Armed Forces.

If you were unable to check all the above-listed requirements, you are not eligible for employment.

Additionally, the following are other reasons why applicants have not been accepted for employment and/or have had their names removed from the Eligibility List – each being based on a case-by-case basis:

- Conduct not compatible with city employment, whether or not it amounts to a crime.
- Credit history, which reflects poor responsibility.
- Work history which reflects poor performance.
- Use of illegal controlled substances beyond the above listed 3-year requirement.
- Alcohol or drug use.
- Unable to pass a Polygraph, Psychological, Drug Screen or Physical Agility Test.
- Unable to pass the Washington State Criminal Justice Training Commission Physical Agility Test (entry-level only)



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POSITION APPLYING FOR (please select) Lateral Police Officer Entry Level Police Officer Police Chief

Date(s) available for work: _____

1. PERSONAL INFORMATION

Name: _____
First Middle Last

Other Names/Aliases (including maiden & nicknames you have used or been known by): _____

Address: _____ City: _____ St: _____ Zip Code: _____
Street/PO Box

Phone Number(s): _____ Home _____ Cell _____ Work _____

Email: _____

Date of Birth: _____ THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO PERSONS WHO ARE AT LEAST 40 BUT LESS THAN 70 YEARS OF AGE.

Place of Birth: _____ THE PLACE OF BIRTH WILL BE USED FOR IDENTIFICATION PURPOSES TO ENSURE PROPER RECORDS ARE OBTAINED. IN ACCORDANCE WITH THE FEDERAL PRIVACY ACT OF 1974, DISCLOSURE IS VOLUNDARY.

Social Security #: _____ THE SSN WILL BE USED FOR IDENTIFICATION PURPOSES ONLY TO ENSURE THAT PROPER RECORDS ARE OBTAINED.

The City of Winlock Civil Service Rules require employees to be U.S. Citizens. Can you provide such documentation?
 Yes No

Height _____ Weight _____ Hair Color _____ Eye Color _____

Scars, Tattoos, or other distinguishing marks: _____

If you wish to claim Veteran's Preference, all the following questions must be answered. Copies of DD214/DD215 (member copy 4) are required at the time of application as proof of eligibility.

Are you receiving any military payments? Yes No

Have you been honorably released from Active Military Service? Yes No

Date of active service: from _____ to _____ Branch of Service: _____

How did you find out about the position for which you are applying for? _____

Were you ever employed in the past by the City of Winlock (excluding law enforcement)? Yes No

If yes, which department and dates employed? _____

Do you have any relative(s) employed by the City of Winlock? Yes No



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2. RESIDENCES

Beginning with your most current residence list all locations you have lived in during the past 10 years. If applicable, provide the name and phone # of the person/agency responsible for the collection of rent.

Address: _____ City: _____ State: _____ Zip: _____

County: _____ Landlord/Mgr.: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

County: _____ Landlord/Mgr.: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

County: _____ Landlord/Mgr.: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

County: _____ Landlord/Mgr.: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

County: _____ Landlord/Mgr.: _____ Phone: _____

List any individual(s) you have lived with during the past 10 years (excluding children).

Name: _____ Cell Phone: _____ Work Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell Phone: _____ Work Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell Phone: _____ Work Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell Phone: _____ Work Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell Phone: _____ Work Phone: _____

Address: _____ City: _____ State: _____ Zip: _____



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3. RELATIVES

Father:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Mother:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Stepfather:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Stepmother:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Sibling:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Sibling:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Step Sibling:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Spouse/ Significant Other:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Former Spouse:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Former Spouse:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Father-in-Law:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Mother-in-Law:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Children:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Children:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____
Children:	Name _____ Address _____	Cell #: _____ City _____	Work #: _____ State ____ Zip _____



4. EDUCATION

___ I possess a High School Diploma ___ I passed the G.E.D. Test. How obtained: _____

List all high schools attended. If no degree or certificate earned list credit hours earned.

Name of School	Location City & State	Dates Attended To – From	Degree/ Cert. Earned	Credit Hours

Have you ever been suspended or expelled from any school? ___ No ___ Yes

If yes, please explain: _____

List all college/universities attended. If no degree or certificate earned list credit hours earned.

College/University	Major	Dates Attended To – From	Full Years Completed	Degree(s) Earned Title – Date	Credit Hours

List any vocational training, on-the-job training or apprenticeships completed. If no certificate earned list credit hours earned.

Name of School	Dates Attended To – From	Certificate Earned Yes/No	Credit Hours

List any licenses or professional/technical certifications you hold, which are necessary or useful for the position you are applying for.

Name of License/Certification	Date Received



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5. EMPLOYMENT

Beginning with your current job. List all jobs held in the last 10 years. Include part-time, temporary, voluntary, and individual military assignments.

Do you have any concerns about your current employer being contacted during the course of the background investigation? No Yes. If yes, please explain _____

Do you have any commitments to another employer that might affect your employment with us? No Yes
If yes, please explain _____

Have you been administered a Psychological Exam within the last 6 months? Yes No
Administered By: _____

Have you been administered a Polygraph Exam within the last 6 months? Yes No
Administered By: _____

From: ____/____/____ To: ____/____/____ Full-Time Part-Time Voluntary Other _____
Month Year Month Year

Employer/Agency: _____ Supervisor: _____

Address: _____ City/St/Zip: _____

Phone Number: _____ Email: _____

Title: _____ Duties: _____

Co-Worker Name: _____ Co-Worker Name: _____

Reason for Leaving: _____

From: ____/____/____ To: ____/____/____ Full-Time Part-Time Voluntary Other _____
Month Year Month Year

Employer/Agency: _____ Supervisor: _____

Address: _____ City/St/Zip: _____

Phone Number: _____ Email: _____

Title: _____ Duties: _____

Co-Worker Name: _____ Co-Worker Name: _____

Reason for Leaving: _____

The City of Winlock is an equal opportunity employer, committed to recruiting and retaining a highly qualified and inclusive work force. Our objective is to offer equal access and opportunity without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, age, genetics, protected veteran status or any other characteristic protected by law.



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5. EMPLOYMENT cont.

From: ____/____/____ To: ____/____/____ ___ Full-Time ___ Part-Time ___ Voluntary ___ Other _____
 Month Year Month Year

Employer/Agency: _____ Supervisor: _____

Address: _____ City/St/Zip: _____

Phone Number: _____ Email: _____

Title: _____ Duties: _____

Co-Worker Name: _____ Co-Worker Name: _____

Reason for Leaving: _____

From: ____/____/____ To: ____/____/____ ___ Full-Time ___ Part-Time ___ Voluntary ___ Other _____
 Month Year Month Year

Employer/Agency: _____ Supervisor: _____

Address: _____ City/St/Zip: _____

Phone Number: _____ Email: _____

Title: _____ Duties: _____

Co-Worker Name: _____ Co-Worker Name: _____

Reason for Leaving: _____

Have you ever had any extended work absences for reasons other than earned vacation? ___ No ___ Yes
If yes, please explain (include employer, dates, and reason): _____

Have you ever been fired or asked to resign from any place of employment? ___ No ___ Yes If yes,
please explain (include employer, dates, and reason): _____

Have you ever applied with this agency or any other law enforcement or corrections agency? ___ No ___ Yes
If yes, please list (include, agency, dates, and details): _____



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6. MILITARY SERVICE

Have you ever served in the Armed Forces, National Guard or Military Reserves? No Yes

Branch of Service: _____

Dates of Service: From / To / Type of Discharge: _____
Month Year Month Year

Are you currently participating in any Military Reserve or National Guard Program? No Yes

Have you ever been subject of any judicial or non-judicial disciplinary action while in the Military, National Guard, or Military Reserves? No Yes If yes, please explain (include branch of service, date and details)

Past commanding officers or military acquaintances are potential sources of relevant information pertaining to your background.

List any individuals who you know well enough to provide accurate information about you.

Name	Address	Phone	Years Known (from/to)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you registered for Selective Service? No Yes

IF YOU ARE A MALE BORN AFTER 01/01/1960 YOU ARE REQUIRED TO REGISTER FOR SELECTIVE SERVICE.

Registration #: _____ Classification: _____



7. SKILLS & SPECIAL QUALIFICATIONS

Computer Skills: ___ None ___ Beginner ___ Capable ___ Advanced

Programs you are proficient with: ___ Word ___ Excel ___ Acrobat ___ Spillman ___ Sector
 ___ Other: _____

Generally, describe your computer skills: _____

Business machines (other than computers) you can operate: _____

Other office skills: _____

Equipment Skills:

List any light and/or heavy equipment you are qualified to operate: _____

Skill Level: _____

Years of Operating Experience: _____

Do you have any other skills and/or qualifications which may be useful in this position? _____

Foreign Language(s): List any foreign languages (indicate degree of fluency: excellent, good, fair, or poor)

Language: _____
Reading: _____ Speaking: _____ Understanding: _____

Language: _____
Reading: _____ Speaking: _____ Understanding: _____

What do you like to do in your spare time? (hobbies, sports, activities, or any special interest groups or organizations that you are involved in) _____



8. FINANCIAL

The management of personal finances is relevant to an individual's qualifications for the position. Please fill out the financial statement below. Be complete and accurate. The amount of indebtedness in itself will not be used in evaluating your qualifications, but rather the behavior exhibited in meeting your financial obligations.

Current Monthly Income

Monthly Salary \$ _____

Spouse's Salary \$ _____

Other Monthly Income (describe):

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

TOTAL Monthly Income \$ _____

Current Monthly Expenses

Mortgage Payment \$ _____

Rent \$ _____

Other Monthly Payment(s) (describe):

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Estimated monthly cost of living (including utilities, food, fuel, vehicle maintenance, entertainment, etc.) and any other obligations.

TOTAL Monthly Expenses \$ _____

Current Assets

Savings Account \$ _____

Checking Account \$ _____

Real Estate \$ _____

Stocks/Bonds \$ _____

Vehicles \$ _____

Personal Property \$ _____

Other Assets (describe):

_____ \$ _____

TOTAL Assets \$ _____

Current Liabilities

Real Estate in-debtedness \$ _____

Long-Term Loans \$ _____

Charge Accounts \$ _____

Other Liabilities (describe):

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

TOTAL Liabilities \$ _____

Have you ever been delinquent on any installment loans (i.e., mortgage, auto loan, credit cards, etc.)? Yes No

If yes, please explain (include dates, firms involved, circumstances):

Have you ever filed for or declared bankruptcy or filed for the Wage Earner's Plan? No Yes

If yes, please explain (include dates, where and why): _____



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8. FINANCIAL cont.

Have you ever been turned over to a collection agency? ___ No ___ Yes If yes, please explain
(include dates, firms, and circumstances): _____

Have you ever had a repossession? ___ No ___ Yes If yes, please explain (include dates, firms,
circumstances): _____

Have your wages ever been garnished? ___ No ___ Yes If yes, please explain (include dates, where,
why): _____



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9. LEGAL

Have you ever been arrested, cited, or convicted of any crime (i.e., felonies, misdemeanors, criminal traffic offenses, such as DUI, NVOL, DWLS, Reckless Driving, Negligent Driving, Hit & Run etc.)? ___ No ___ Yes

Date _____ LE Agency _____

Offense(s) _____

Date _____ LE Agency _____

Offense(s) _____

Date _____ LE Agency _____

Offense(s) _____

Have you ever been placed on diversion, court probation or deferred prosecution? ___ No ___ Yes
If yes, please explain (include dates, where and circumstances): _____

Have you ever been required to appear before a juvenile court for any reason? ___ No ___ Yes If yes,
please explain (include dates, where and circumstances): _____

Aside from a marriage dissolution, are you now or have ever been a plaintiff or defendant in any civil court action?
___ No ___ Yes If yes, please explain (include dates, where, names, court location, circumstances):



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10. MOTOR VEHICLE OPERATION

Operation of a motor vehicle is an integral part of the position. An investigation of your driving history will be made through a records check. To expedite this procedure, please supply the following information.

Washington State Driver's License #: _____ Expiration Date: _____
Name under which license was granted: _____

Please list any other states you have been licensed to operate a motor vehicle and license number(s).
State: _____ License Number: _____
Name under which license was granted: _____

State: _____ License Number: _____
Name under which license was granted: _____

Have you ever been denied a driver's license by any state? ___ No ___ Yes If yes, please explain
(include dates, states, and circumstances): _____

Automobile Liability Insurance

Company: _____ Policy #: _____ Exp. Date: _____
Agent's Name: _____ Phone: _____
Address: _____ Email: _____

Please list all traffic infractions (excluding parking tickets) you have received within the last 7 years. List amount over speed limit for speeding tickets.

Date: _____ Infraction: _____ Location: _____
Disposition: _____

Date: _____ Infraction: _____ Location: _____
Disposition : _____

Date: _____ Infraction: _____ Location: _____
Disposition: _____

Date: _____ Infraction: _____ Location: _____
Disposition: _____

Date: _____ Infraction: _____ Location: _____
Disposition: _____

The City of Winlock is an equal opportunity employer, committed to recruiting and retaining a highly qualified and inclusive work force. Our objective is to offer equal access and opportunity without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, age, genetics, protected veteran status or any other characteristic protected by law.



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10 MOTOR VEHICLE OPERATION cont.

Have you ever been involved (as a driver) in a motor vehicle accident within the last 7 years? No Yes
If yes, please explain each accident.

Date: _____ Location: _____ Injury Non-Injury

Police Investigation? No Yes LE Agency: _____ At Fault Not At Fault

Date: _____ Location: _____ Injury Non-Injury

Police Investigation? No Yes LE Agency: _____ At Fault Not At Fault

Date: _____ Location: _____ Injury Non-Injury

Police Investigation? No Yes LE Agency: _____ At Fault Not At Fault

Do you have any restrictions placed on your current driver's license? No Yes If yes, please
explain (include date, restriction, and circumstances) _____

Has your license ever been suspended, revoked, or placed on negligent operator's probation? No Yes
If yes, please explain (include date, where, and reason) _____



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11. PERSONAL HABITS

Have you ever used, possessed, or experimented with any of the following (be specific with number of times):

	No	Yes	# of Times	Date Last Used (month/year)
Marijuana	___	___	_____	_____
Hash	___	___	_____	_____
Amphetamines "uppers"	___	___	_____	_____
Speed	___	___	_____	_____
Methamphetamine "crank"	___	___	_____	_____
Barbituates "downers"	___	___	_____	_____
Valium (other than prescribed)	___	___	_____	_____
Pain Killers (other than prescribed)	___	___	_____	_____
Cocaine	___	___	_____	_____
Crack	___	___	_____	_____
Herion	___	___	_____	_____
LSD "acid"	___	___	_____	_____
PCP "angel dust"	___	___	_____	_____
Hallucinogenic Mushrooms	___	___	_____	_____
"Designer" Drugs (STP, ICE)	___	___	_____	_____
Steriods	___	___	_____	_____
Any other drugs not listed above	___	___	_____	_____
List names and describe: _____				

Have you ever been involved in the sale or trafficking of illegal drugs? ___ No ___ Yes If yes, please explain: _____

IMPORTANT: describe each specific incident of your drug or marijuana usage. Include the nature of incidents (i.e., party, social event, private usage etc.), extent of usage (i.e., one "puff", # of joints, # of pills etc.), the approximate date(s) (i.e., month, year), and how substance was obtained. _____

In accordance with the duties of a Winlock Police Officer, do you have any beliefs which would preclude you from using physical force to the extent of causing bodily harm or death if the circumstances so dicated? ___ No ___ Yes If yes, please explain: _____

Regarding the job description for the postion you have applied for, do you have any beliefs which would prevent you from fully performing the duties assigned to you (including working weekends, holidays, or nights)? ___ No ___ Yes If yes, please explain: _____

Are there any incidents in your life or details not mentioned herein which may influence our evaluation or your suitability to be employed with the Winlock Police Department? ___ No ___ Yes If yes, please explain: _____



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13. REFERENCES

List 3 to 5 professional contacts/associates who know about you and your qualifications.

Name: _____ Cell #: _____ Work #: _____
Address: _____ City: _____ State: _____ Zip: _____
Occupation: _____ Years Known: _____

Name: _____ Cell #: _____ Work #: _____
Address: _____ City: _____ State: _____ Zip: _____
Occupation: _____ Years Known: _____

Name: _____ Cell #: _____ Work #: _____
Address: _____ City: _____ State: _____ Zip: _____
Occupation: _____ Years Known: _____

Name: _____ Cell #: _____ Work #: _____
Address: _____ City: _____ State: _____ Zip: _____
Occupation: _____ Years Known: _____

Name: _____ Cell #: _____ Work #: _____
Address: _____ City: _____ State: _____ Zip: _____
Occupation: _____ Years Known: _____

List 3 to 5 friends/aquaintances who you know socially.

Name: _____ Cell #: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell #: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell #: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell #: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Cell #: _____ Years Known: _____
Address: _____ City: _____ State: _____ Zip: _____



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RELEASE OF INFORMATION

Name: _____

Last

First

Middle

I do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and too any duly authorized agent of the Winlock Police Department, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions, including records of deposits, withdrawals and balances of checking, savings, and loan accounts, and also the records of commercial or retail credit agencies (including credit reports and/or rating); public utility companies; employment and pre-employment records, including background reports; efficiency ratings, complaints or grievances filed by or against me, and salary records; trial and/or convictions for alleged or actual violations of law, including criminal, civil and/or traffic records; the results of any polygraph or psychological examinations; records of complaint of a civil nature made by or against me, wherever located.

Additionally, I also authorize and consent to a complete and full disclosure of Internal Affairs Records (or other internal disciplinary records regardless of their title) including, but not limited to, Internal Affairs complaints, investigations, findings, records of disciplinary action, and disciplinary hearings. I also hereby authorize the full and complete disclosure of these records whether they are unsealed, sealed, purged, or otherwise confidential due to previous agreements between myself and the entity holding the records.

I reiterate and emphasize that 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 a background investigation which may provide pertinent information for the Winlock Police Department to consider in determining my suitability for employment by that department. It is my specific intent to provide access to personal information, including all personnel files and documents, and the sources of information specifically identified herein.

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 by suitability for employment by the Winlock Police Department. I understand that all materials pertaining to this background investigation become the property of the Winlock Police Department, Personnel Division, and will not be returned to me.

I hereby release and hold harmless any person, corporation, company or other entity from any and all possible damages, direct or consequential, immediate or remote, of all forms or types, that I may sustain or allege to sustain by virtue of that person, corporation, company or other entity complying with my request to fully and completely comply with the investigation, inquiry or interests of the City of Winlock, to whom I have made an application of employment and is the bearer of this authorization.

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

Applicant Signature: _____ **DOB:** _____
month/day/year

Date: _____

Must be signed in the presence of a notary

Subscribed and sworn before me on this:

_____ day of _____ 20 _____

My Commission Expires: _____

Notary: _____