CITY OF BANGOR
POLICE DEPARTMENT

240 Main Street
Bangor, Maine 04401
www.bangormaine.gov

APPLICATION FOR EMPLOYMENT

The City of Bangor is an Equal Opportunity Employer.
Applicants are considered for all positions without regard to race or color, sex, sexual orientation, physical or mental disability, religion, age, ancestry or national origin

CITY OF BANGOR, MAINE POLICE DEPARTMENT- APPLICATION FOR EMPLOYMENT

Please fill out all questions. Use fourth page if more space is required for any item.

PERSONAL

NAME: _____ DATE: _____
Last First Middle

ADDRESS: _____
Street City State Zip code

HOME TELEPHONE: _____ HOURS YOU MAY BE REACHED: _____

CELL TELEPHONE: _____

E-MAIL ADDRESS: _____

Were you ever convicted by a court of an offense other than a traffic violation? ❑ YES ❑ NO If yes, give details.

_____

_____

Are you age 18 or older? ❑ YES ❑ NO

Have you ever worked for the City of Bangor? ❑ YES ❑ NO If yes, what year and department/division did you work?: _____

Are you eligible to be lawfully employed in the United States? ❑ YES ❑ NO
(Proof of citizenship or immigration status will be required upon employment)

Driver's License? ❑ YES ❑ NO Class: _____ Endorsements: _____

Have you ever committed an illegal or immoral act that would have been unlawful if caught? ❑ YES ❑ NO
If yes, explain: _____

_____

Have you ever failed a police background investigation in the past? ❑ YES ❑ NO If yes, When? _____

To whom did you apply? _____

List any court action to which you have been a party, including divorce: _____

_____

_____

_____

List any family members presently employed by the City of Bangor (including spouse, parents, children, siblings, uncles, aunts, nephews, nieces, and any of the same related as in-laws, step-relations, or half-relations.

NAME: _____ DEPARTMENT: _____

MILITARY

Military Record:
Are you a Veteran? ❑ YES ❑ NO
Honorable Discharge? ❑ YES ❑ NO
Branch of Service: _____
Dates of Service: _____
If you belong to the reserves, indicate branch or unit: _____

OTHER

How did you learn of this position?

❑ Advertisement ❑ Employment Agency ❑ Walk-in ❑ Friend/relative

❑ Other: _____

EDUCATION

Name of High School: _____

Did you Graduate? ❑ Yes ❑ No

College or University: _____

Major Courses: _____

Did you Graduate? ❑ Yes ❑ No If Yes, with what Degree? _____

Graduate Study, Business, Correspondence or Trade School Courses:

Describe: _____

Major Courses: _____

Did you Graduate? ❑ Yes ❑ No If yes, with what Degree? _____

Have you passed an Alert Test from MCJA? ❑ Yes ❑No If yes, date taken: _____

Have you passed the Physical Fitness Test from MCJA? ❑Yes ❑No If yes, date taken: _____

Have you completed the 100 hour school? ❑ Yes ❑No If yes, date taken: _____

Are you a MCJA BLETP graduate? ❑ Yes ❑No If yes, date taken: _____

EMPLOYMENT HISTORY

List all current and previous jobs and activities including part-time employment. Begin with your present or most recent position.

FIRST or PRESENT:

Business Name: _____ Supervisor's Name/Title: _____

Employer's Address: _____

Address City State Telephone

Dates of Employment:

From: _____ / _____ To: _____ / _____

Month Year Month Year

Position Title: _____ Salary _____

Duties Performed: _____

_____

_____

_____

Reasons for Leaving: _____

_____

May we contact your current employer? ❑ Yes ❑ No

SECOND:

Business Name: _____ Supervisor's Name/Title: _____

Employer's Address: _____

Address City State Telephone

Dates of Employment:

From: _____ / _____ To: _____ / _____

Month Year Month Year

Position Title: _____ Salary _____

Duties Performed: _____

_____

_____

_____

Reasons for Leaving: _____

_____

_____

May we contact? ❑Yes ❑No

Continued on next page

EMPLOYMENT HISTORY CONT.

THIRD:

Business Name: _____ Supervisor's Name/Title: _____

Employer's Address: _____

Address City State Telephone

Dates of Employment:

From: _____ / _____ To: _____ / _____

Month Year Month Year

Position Title: _____ Salary _____

Duties Performed: _____

_____

_____

_____

Reasons for Leaving: _____

_____

_____

May we contact? ❑Yes ❑No

REFERENCES

Give names and contact information of three persons thoroughly acquainted with your abilities.

Name Telephone Business/Profession

_____

_____

_____

_____

DISCLOSURE

DISCLOSURE AGREEMENT

I hereby certify that the facts set forth above in my employment application are true and complete to the best of my knowledge. I authorize the City of Bangor to investigate all information set forth in my application, by contacting my prior employers and other references set forth above, and by any and all other means authorized or permitted by law. I understand that if I am hired, omissions or false or misleading statements in this application or interviews will be grounds for immediate termination of my employment.

_____ _____

Print Full Legal Name Date

ADDITIONAL SPACE

Send Via Email

Print Form

Reset Form