

GREYBULL POLICE DEPARTMENT

24 South 5th Street
P.O. BOX 271
Greybull, WY 82426
(307) 765-2308

APPLICATION FOR EMPLOYMENT

The Greybull Police Department offers a smoke free environment; smoking is prohibited in all buildings and vehicles.

Prospective employees will receive consideration for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, handicap, or any other legally protected status.

PRINT LEGIBLY IN DARK INK

COMPLETE ENTIRE APPLICATION, DO NOT WRITE "SEE RESUME"

Position Applied For: _____

Name: _____ **Date Of Birth** _____

Address: _____

CITY **STATE** **ZIP**

Preferred Contact #: _____

E-mail Address: _____

(Please Note: Updates regarding this position will only be sent to this email address).

Are you legally eligible for employment in the United States? _____ *(proof of citizenship or immigration status will be required upon employment)*

If previously employed by the Town of Greybull, list job(s) and date(s): _____ .

Do any relatives by blood, marriage, or adoption work for the Town of Greybull or serve in an elected or appointed position for the Town of Greybull? _____ If yes, list name(s): _____ .

Are you willing to work: Overtime _____ Shifts _____ Part-time _____ Weekends _____ Temporary _____

Are you at least 18 years of age? _____ If under 18 years of age, can you provide proof of your eligibility to work? _____

Have you been convicted of a felony within the past 7 years? _____ *(conviction will not automatically disqualify an applicant from employment)* If yes, please give type of felony, in what State it occurred and punishment received: _____ .

EDUCATION

SCHOOL	NAME AND LOCATION	COURSE OF STUDY	ATTENDANCE DATES	DEGREE OR DIPLOMA
HIGH SCHOOL				
COLLEGE				
GRADUATE				
OTHER				
OTHER				

Scholarships / Academic Honors / Awards: _____.

Do you have any language abilities that might help you perform the job for which you are applying? _____ If yes, please explain: _____.

Typing Speed _____ wpm Computer Software: _____.

List equipment or office machines you can operate _____
_____.

List professional licenses you hold: _____.

Do you have a valid Wyoming Drivers License? _____ Number: _____ Class: _____

Is your driving privilege suspended or driver's license revoked by any state? _____ If yes, which state? _____

List any other volunteer and/or community work you feel might be helpful in determining your eligibility for employment: _____

What date would you be available for work? _____

EMPLOYMENT EXPERIENCE (Attach Additional Sheets if Necessary)

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Name of Employer – Most Recent		Telephone
Address Code	City, St.	Zip Employed (mo/yr) From To
Title	Name of Last Supervisor	Pay Start \$ Final \$
Reason for Leaving		How Many Supervised?
Duties:		

Name of Employer		Telephone
Address Code	City, St.	Zip Employed (mo/yr) From To
Title	Name of Last Supervisor	Pay Start \$ Final \$
Reason for Leaving		How Many Supervised?
Duties:		

Name of Employer		Telephone
Address Code	City, St.	Zip Employed (mo/yr) From To
Title	Name of Last Supervisor	Pay Start \$ Final \$
Reason for Leaving		How Many Supervised?
Duties:		

CERTIFICATION OF APPLICANT

Read carefully and initial each paragraph before signing.

By my signature and initials placed below, I affirm under the penalty of perjury, that the information provided in this employment application (and accompanying resume, if any) is provided voluntarily, is true and complete, and I understand that any false information or significant omissions may disqualify me from further consideration for employment, and may be justification for my dismissal from employment, even if the omission or falsehood does not directly relate to my job or is not discovered for many years.

_____Initials

I give permission for a complete post-offer/pre-employment physical examination, including a drug screening exam and x-rays, and I consent to the release to the Greybull Police Department of any and all medical information, as may be deemed necessary by the Greybull Police Department, in judging my capability to do the work for which I am applying.

_____Initials

I authorize the investigation of all statements contained in this application. I also authorize the Greybull Police Department to contact my present employer, past employers, and any listed references.

_____Initials

I authorize a search of my criminal justice record and, if required for the position for which I am applying, consent to a polygraph test and/or credit check.

_____Initials

I authorize any persons, schools, current employers and organizations named in this application form to provide the Greybull Police Department with relevant information and opinions that may be useful to the Greybull Police Department in making a hiring decision, and I release such persons and organizations from any legal liability for any such information furnished.

_____Initials

I understand that this application does not, by itself, create a contract of employment. I understand and agree that, if hired, my employment is for no definite period of time, and may, regardless of the date of payment of my wages or salary, be terminated at any time subject to the provisions of the Personnel Policy Manual as the same may be amended. I understand that no person is authorized to change any of the terms mentioned in this employment application form.

_____Initials

Date: _____

Signature: _____

THIS APPLICATION FOR EMPLOYMENT WILL REMAIN ACTIVE FOR ONE YEAR