

Norwood, Ohio Police Department Background History Statement



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What is expected of you?

You are expected to play an active role during the background investigation. You will be expected to assist your Background Investigator in getting any additional information that he/she may need. You are expected to play an active role by contacting your references and ensuring a quick response. Failure to do so can result in disqualification.

<p>READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING YOUR BACKGROUND HISTORY STATEMENT</p>

These instructions are provided as a guide to assist you in properly completing your Background History Statement (BHS). It is essential that the information be accurate in all respects. It will be used as the basis for your background investigation and any further job related interviews with this department. Be sure to read, sign, and date the BHS Affirmation and Declaration page prior to submitting your BHS.

Avoid errors by reading the directions for each question carefully before making any entries on the form. Be sure everything is correct and in proper sequence before entering the information. It is recommended that you make copies of this statement to use as a rough draft. You can make a copy to keep for your records. We do not make copies.

The BHS must be handwritten and printed legibly in black ink by the applicant. The required signatures on pages 38 and 40 must be in [blue](#) ink.

We will not accept photocopies of the BHS. Do not staple or punch holes in the BHS. Do not change the format of the BHS. Any of these actions can result in disqualification.

The BHS will not be accepted with any blanks. All questions must be answered. If a question is not applicable to you, enter "NA" in the space provided. Failure to comply can result in disqualification.

You are responsible for obtaining correct addresses, phone numbers, and email addresses. If you are not sure of an address, check it. Your local library may have a directory service or copies of phone directories. All addresses must have zip codes. You can also use the internet as a useful source of information.

If there is insufficient space on the form to include all the information required, utilize the SUPPLEMENTAL INFORMATION PAGES provided on pages 35, 36 and 37 of the BHS, or include an addendum using extra sheets of copier paper. Be sure to reference the relevant section, heading and page number before continuing your answer.

Answering all questions accurately will help expedite our investigation. Failure to respond to a question or failure to provide the information requested can result in disqualification.

After the BHS has been submitted, you are responsible for notifying the Recruiting Office of any changes in the information provided within ten (10) days of the change. Residence and job information frequently change. The best way to make notification of changes is by email to admin@norwoodpolice.org.

Family and personal references that are in your BHS must include first and last name with phone number and email address. If for any reason you exhaust all search possibilities and are unable to get this information, you must include an addendum documenting in detail your efforts to attempt to obtain the information.

If you have prior law enforcement experience you should obtain a copy of your personnel file and any internal affairs investigations in which you have been involved and include it with the packet. If for any reason there is a delay, a detailed explanation must be provided, along with the expected date that you will furnish the information. This should be as soon as possible as it could delay your background investigation.

Sections asking about traffic citations and collisions refer to your entire driving history. Be sure that when you list a police department you list the city and state that it was in. Do not rely on state BMV records being accurate; frequently they are not.

In reference to law enforcement agencies to which you have applied, be sure to detail for each one where you are in their process or the outcome if it is finished. Remember to update the information as it changes.

All responses to questions in this application must be those of the person making the application. Read all questions carefully and respond completely as possible.

There are very few ***automatic*** bases for rejection. Even issues of prior misconduct, such as prior illegal drug use, driving under the influence, theft, or even arrest or conviction are usually not, in and of themselves, automatically disqualifying. However, ***deliberate misstatements or omissions*** can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals "fail" background investigations is because they deliberately withhold or misrepresent job-relevant information from their prospective employer.

You are responsible for providing complete, accurate, and truthful responses.

Your completed BHS packet with all required documents must submitted on or before the Written Examination scheduled for June 21st, 2017.

If you have any questions regarding the BHS, please contact the Norwood Police Recruiting Section at (513) 458-4549.

Required documents needed to be included in your Background History Statement Packet

ITEM
Copy of Driver's License
Copy of Social Security Card
Last two earning statements/pay stubs (tax return if unemployed)
Sealed credit report from any of the 3 main credit reporting agencies (Experian, TransUnion, or Equifax) Copies printed from personal computers will not be accepted.
Copy of official birth certificate/naturalization documents
Copy of high school transcript or diploma or GED
Copy of college transcript(s)
Official copy of DD Form 214 long form or official letter from Commanding Officer stating that you are expected to be discharged with an honorable status on your expected separation date.
Official copy of Military Personnel Records. These can be obtained by submitting Standard Form 180 (SF180) to the National Personnel Records center. Go to www.archives.gov/veterans/military-service-records/standard-form-180.html for instructions and forms.

Please note:

All of the above items become a permanent part of the complete packet when turned in with your BHS and are then the property of the Norwood Police Department. Make copies of the items you may want for your own records. We will not make copies for you. All required documents are due by the BHS submission deadline.

Section A. Personal Information

Position Applied For: **Police Officer**

Applicant Biographical Information:

Last Name: _____ First: _____ Middle: _____

Race: _____ Gender: _____

Date of Birth: _____ Age: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

Telephone Numbers:

Home: _____ Work: _____ Cellular: _____

Email address: _____

Personal Web Page URL (Linked-In, Facebook, other Social Media):

_____/_____

Place of Birth - Town: _____ County: _____ State: _____

Nicknames/Alias: _____

Social Security Number: ____/____/_____

Driver's License#: _____ State: _____ Expires: _____

Eyes: _____ Hair: _____ Height: _____ft. / _____in Weight: _____lbs.

Tattoos, Scars, or Distinguishing Marks:

Locations/Descriptions/Explanations or Meanings if applicable:

Are you a United States Citizen by birth? _____

Are you a Naturalized Citizen? _____

Date of Naturalization: _____

Residences:

Beginning with your present address, in chronological order list all addresses where you have lived during the past ten (10) years by month and year.

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

From: _____ To: _____ Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

If there is insufficient space on the form to include all the information required, utilize the SUPPLEMENTAL INFORMATION PAGES provided on pages 35, 36 and 37 of the BHS, or include an addendum using extra sheets of copier paper to the application. Be sure to reference the relevant section, heading and page number before continuing your answer.

Section B. Education History

High School(s):

High School: _____
City: _____ State: _____ Zip: _____
Dates Attended: _____ / _____
Diploma or GED: _____ GPA: _____

High School: _____
City: _____ State: _____ Zip: _____
Dates Attended: _____ / _____
Diploma or GED: _____ GPA: _____

College(s):

College/University: _____
City: _____ State: _____ Zip: _____
Dates Attended: _____ / _____ Hours Completed: _____
GPA: _____ Major/Minor: _____
Degree & Date of Graduation: _____

College/University: _____
City: _____ State: _____ Zip: _____
Dates Attended: _____ / _____ Hours Completed: _____
GPA: _____ Major/Minor: _____
Degree & Date of Graduation: _____

College/University: _____
City: _____ State: _____ Zip: _____
Dates Attended: _____ / _____ Hours Completed: _____
GPA: _____ Major/Minor: _____
Degree & Date of Graduation: _____

College/University: _____
City: _____ State: _____ Zip: _____
Dates Attended: _____ / _____ Hours Completed: _____
GPA: _____ Major/Minor: _____
Degree & Date of Graduation: _____

College/University: _____
City: _____ State: _____ Zip: _____
Dates Attended: _____ / _____ Hours Completed: _____
GPA: _____ Major/Minor: _____
Degree & Date of Graduation: _____

Section C. Work History

Beginning with your present or most recent job, list all periods of employment and non-employment for the past ten (10) years in chronological order. Include part time, temporary or seasonal work, all periods of unemployment, and military service.

If you have additional jobs that cannot fit in the columns below, please make a copy of page 10 and attach as an addendum to your application.

1) Employment/Unemployment Dates: _____
Current or most recent employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Job Title: _____

Duties: _____

Hours per week and hourly wage: _____ / _____

Reason for leaving and any disciplinary action received:

Supervisor: _____

Phone Numbers (home/office): _____ / _____

Phone Numbers (cell / other): _____ / _____

Email Address: _____

Co-Worker: _____

Phone Numbers (home/office): _____ / _____

Phone Numbers (cell / other): _____ / _____

Email addresses: _____

Co-Worker: _____

Phone Numbers (home/office): _____ / _____

Phone Numbers (cell / other): _____ / _____

Email addresses: _____

Co-Worker: _____

Phone Numbers (home/office): _____ / _____

Phone Numbers (cell / other): _____ / _____

Email addresses: _____

2) Employment/Unemployment Dates: _____

Past Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Job Title: _____

Duties: _____

Hours per week and hourly wage: _____ / _____

Reason for leaving and any disciplinary action received:

Supervisor: _____
Phone Numbers (home/office): _____ / _____
Phone Numbers (cell / other): _____ / _____
Email Address: _____

Co-Worker: _____
Phone Numbers (home/office): _____ / _____
Phone Numbers (cell / other): _____ / _____
Email addresses: _____

3) Employment/Unemployment Dates: _____
Past Employer: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: _____ **Job Title:** _____
Duties: _____
Hours per week and hourly wage: _____ / _____
Reason for leaving and any disciplinary action received:

Supervisor: _____
Phone Numbers (home/office): _____ / _____
Phone Numbers (cell / other): _____ / _____
Email Address: _____

Co-Worker: _____
Phone Numbers (home/office): _____ / _____
Phone Numbers (cell / other): _____ / _____
Email addresses: _____

4) Employment/Unemployment Dates: _____
Past Employer: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: _____ **Job Title:** _____
Duties: _____
Hours per week and hourly wage: _____ / _____
Reason for leaving and any disciplinary action received:

Supervisor: _____
Phone Numbers (home/office): _____ / _____
Phone Numbers (cell / other): _____ / _____
Email Address: _____

Co-Worker: _____
Phone Numbers (home/office): _____ / _____
Phone Numbers (cell / other): _____ / _____
Email addresses: _____

5) Employment/Unemployment Dates: _____
Past Employer: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Job Title: _____
Duties: _____
Hours per week and hourly wage: _____/_____
Reason for leaving and any disciplinary action received:

Supervisor: _____
Phone Numbers (home/office): _____/_____
Phone Numbers (cell / other): _____/_____
Email Address: _____

Co-Worker: _____
Phone Numbers (home/office): _____/_____
Phone Numbers (cell / other): _____/_____
Email addresses: _____

Have you listed all your employment within the last 10 years? _____

Have you ever been terminated or fired, asked to resign, or resigned in lieu of termination at any job?

If yes, explain to include the number of times, employer(s), when and why?

Have you ever quit a job without giving sufficient (2-3 week) notice at any job? If yes, explain to include number of times, employer, when and why.

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Do you have any reason to believe that a former employer(s) may give you a negative job reference? _____

If yes, give the name of the employer(s) and why.

**Have you ever participated in any internship with any law enforcement agency? _____
If so, list the agency, your supervisor's name, phone number, email address and how long you were an intern.**

Have you ever applied with the City of Norwood or the Norwood Police Department, in any capacity? _____ If so, explain to include the date when you applied, if accepted, what department, supervisor and any phone numbers that will assist us in contacting those parties.

If you applied and were not accepted, what part of the process eliminated you?

Have you ever taken a polygraph, CVSA or any type of truth verification test?

- **When?** _____
- **Where?** _____
- **Why?** _____
- **Results?** _____
- **Have you ever failed any type of truth verification test?** _____
- **If yes, explain**

Section D. Military Record

Military Service:

Branch of Service: _____

Dates of Service: _____

Current or last unit: _____

Highest Rank Held: _____

Type of Discharge: _____

Commendations: _____

If you had any disciplinary actions, include the charge, date, disposition and explanation below.

Have you ever served any time in the Reserves/National Guard, if so, how long, what is your present status and are you still in either?

Military Assignments:

List the last five military bases at which you were stationed starting with the most recent, to include the city, state and military base name.

Military Base: _____

City: _____ **State:** _____

Military Base: _____

City: _____ **State:** _____

Military Base: _____

City: _____ **State:** _____

Military Base: _____

City: _____ **State:** _____

Military Base: _____

City: _____ **State:** _____

Military Base: _____

City: _____ **State:** _____

Section E. Applications with other Law Enforcement Agencies

List all law enforcement/corrections agencies to which you have ever applied, prior to this current application with the Norwood Police Department. Begin with your most recent application in chronological order. Include previous applications with the Norwood Police Department as well as any other law enforcement agency.

Agency: _____ State: _____
Month/Year: _____/_____
Status (Tested, Failed Test, Failed Board, Etc.) _____
Explain: _____

Agency: _____ State: _____
Month/Year: _____/_____
Status (Tested, Failed Test, Failed Board, Etc.) _____
Explain: _____

Agency: _____ State: _____
Month/Year: _____/_____
Status (Tested, Failed Test, Failed Board, Etc.) _____
Explain: _____

Agency: _____ State: _____
Month/Year: _____/_____
Status (Tested, Failed Test, Failed Board, Etc.) _____
Explain: _____

Agency: _____ State: _____
Month/Year: _____/_____
Status (Tested, Failed Test, Failed Board, Etc.) _____
Explain: _____

Agency: _____ State: _____
Month/Year: _____/_____
Status (Tested, Failed Test, Failed Board, Etc.) _____
Explain: _____

Did you list every agency you applied with? _____

List all security agencies (security companies) that you have applied for.

Security Agency: _____ Month/Year: _____/_____
Outcome (Hired/Not Hired): _____

Security Agency: _____ Month/Year: _____/_____
Outcome (Hired/Not Hired): _____

Security Agency: _____ Month/Year: _____/_____
Outcome (Hired/Not Hired): _____

Security Agency: _____ Month/Year: _____/_____
Outcome (Hired/Not Hired): _____

Section F. Relationship and Family History

Beginning with present relationship, in chronological order list all relationships of six (6) months or more you have had in the last ten (10) years. Current relationship status: dating/single or divorced, co-habiting or married.

Current Relationship Status: _____
Date of Marriage: _____ Date of Divorce: _____
Dates of Co-habitation/Relationship: _____

Spouse/Partner Name: _____
Date of Birth: _____
Spouse/Partner Maiden Name: _____

Phone Number(s):
Cell: _____ Home: _____ Work: _____
Email Address: _____
Spouse's/Partner's Occupation: _____
Company Name: _____

Past Relationship(s) – Co-habited or Married/Divorced:

Type of Relationship: _____
Date of Marriage: _____ Date of Divorce: _____
Dates: Beginning & Ending of Co-habitation/Dating: _____
Spouse/Partner Name: _____
Date of Birth: _____
Spouse/Partner Maiden Name: _____
Phone Number(s):
Cell: _____ Home: _____ Work: _____
Email Address: _____
Spouse's/Partner's Occupation: _____
Company Name: _____

Type of Relationship: _____
Date of Marriage: _____ Date of Divorce: _____
Dates: Beginning & Ending of Co-habitation/Dating: _____
Spouse/Partner Name: _____
Date of Birth: _____
Spouse/Partner Maiden Name: _____
Phone Number(s):
Cell: _____ Home: _____ Work: _____
Email Address: _____
Spouse's/Partner's Occupation: _____
Company Name: _____

Are you responsible for making child support payments? _____

Are you current on your payments or are your wages being garnished?

Include to whom payments are made, the amount of each payment, name and phone number for the other parent, and name(s) of child/children.

Has an arrest warrant ever been issued for you because of non-support?

If yes, when and what agency issued the warrant? _____

Has any agency, whether governmental or private, contacted you because of delinquent child support payments? _____

If yes, when and what agency contacted you? _____

What was the result? _____

Family Members:

Starting with Parent, Step-Parent, Brother, Sister, Son, Daughter, Adopted Child, Step Child, and Foster Child, list all family members. No other extended family is required. Include email addresses.

Relationship: _____ Name: _____ Age: _____
Address, Contact Numbers & Email Address, Occupation, or if they are Deceased:

Relationship: _____ Name: _____ Age: _____
Address, Contact Numbers & Email Address, Occupation, or if they are Deceased:

Relationship: _____ Name: _____ Age: _____
Address, Contact Numbers & Email Address, Occupation, or if they are Deceased:

Relationship: _____ Name: _____ Age: _____
Address, Contact Numbers & Email Address, Occupation, or if they are Deceased:

Relationship: _____ Name: _____ Age: _____
Address, Contact Numbers & Email Address, Occupation, or if they are Deceased:

Are you currently living with your parents? _____

Were you raised by adults that were not your parents? _____ If so please list:

Relationship: _____ Name: _____

Age: _____ Dates they raised you: _____

Contact Numbers & Email Address or Deceased: _____

Relationship: _____ Name: _____

Age: _____ Dates they raised you: _____

Contact Numbers & Email Address or Deceased: _____

Family Member Arrest(s):

Name/Relationship: _____ Date of birth: _____

Offense: _____ Date: _____

Agency, City & State: _____ Disposition: _____

Name/Relationship: _____ Date of birth: _____

Offense: _____ Date: _____

Agency, City & State: _____ Disposition: _____

Name/Relationship: _____ Date of birth: _____

Offense: _____ Date: _____

Agency, City & State: _____ Disposition: _____

List two roommates with whom you have resided. Do not include family members or people listed elsewhere in this application.

Name: _____ Email: _____

Address and Phone Numbers: _____

Dates lived as roommates: _____

Name: _____ Email: _____

Address and Phone Numbers: _____

Dates lived as roommates: _____

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Section G. Personal References

List five (5) persons who have known you for a minimum of two (2) years who are not related to you, and who can provide current information about you. Do not list Norwood Police Department employees or relatives, supervisors or coworkers, or roommates listed previously in this application. You may list Norwood Police Department employees in another area of this application or on a separate page. Email addresses required if known.

1. Reference's Full Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Numbers: _____
Email Address: _____

2. Reference's Full Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Numbers: _____
Email Address: _____

3. Reference's Full Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Numbers: _____
Email Address: _____

4. Reference's Full Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Numbers: _____
Email Address: _____

5. Reference's Full Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Numbers: _____
Email Address: _____

Do you know any past or current Norwood police officers? List any that you may be acquainted with, related to, have been on a ride along with or know as a friend.

Name (First, Last): _____
Agency (City, State): _____ Contact Number: _____
Email Address: _____
Relationship (how you know them) _____

Name (First, Last): _____
Agency (City, State): _____ Contact Number: _____
Email Address: _____
Relationship (how you know them) _____

Section H. Traffic Record and Collisions

Driving History:

List all drivers licenses that you have ever held and whether or not any or all are currently active:

State: _____ Date Surrendered or Expired: _____
License Number/Restrictions or Endorsements: _____

State: _____ Date Surrendered or Expired: _____
License Number/Restrictions or Endorsements: _____

State: _____ Date Surrendered or Expired: _____
License Number/Restrictions or Endorsements: _____

List your vehicle insurance company, policy number and phone number:

For any reason, have you ever failed to pay or legally dispose of any traffic, parking, or any other misdemeanor citation? _____

If so, include the city, state, when, what the citation was for, and by what agency:

Have you ever been arrested or received a ticket for not showing proof of insurance or driving without insurance? _____

If yes, explain (city, state, when, and by what agency):

Has your license ever been suspended, revoked or put on probation in any county or any state? _____

If so, list any and all incidents to include the date, location and reason:

Have you ever been stopped and/or arrested for Driving While Intoxicated or Driving Under the Influence, whether convicted or not? _____

Have you ever pled to a lesser charge? _____

If yes, explain the incident to include when, where, the agency and the outcome of the incident.

List vehicles you own or drive:

Year: _____ Make: _____ Model: _____
Color: _____ License# and State: _____

Year: _____ Make: _____ Model: _____
Color: _____ License# and State: _____

Year: _____ Make: _____ Model: _____
Color: _____ License# and State: _____

Traffic Citations/ Stops:

Starting with your most recent ticket, list in chronological order all moving and non-moving tickets, excluding parking tickets (i.e. speeding, ran red light, unsafe lane change, expired registration, no insurance, etc.), that you have received and the disposition of ticket. "Disposition of ticket" means how you chose to take care of the ticket (i.e. plead guilty, took defensive driving, paid a fine, ticket dismissed by a judge, received deferred adjudication, etc.). **Make sure to include traffic stops during which warnings and/or no citations were issued.**

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Month/Year: _____/_____/_____ Charge: _____
City/State: _____/_____/_____ Agency: _____
Disposition: _____

Vehicle Collisions:

Were you ever involved in a vehicle collision? _____
If yes, please list them.

Month/Year: _____/____ City/State: _____/____
Agency: _____ At Fault/Not at Fault: _____

Month/Year: _____/____ City/State: _____/____
Agency: _____ At Fault/Not at Fault: _____

Month/Year: _____/____ City/State: _____/____
Agency: _____ At Fault/Not at Fault: _____

Month/Year: _____/____ City/State: _____/____
Agency: _____ At Fault/Not at Fault: _____

Explanation of each collision:

Have you ever left the scene of a motor vehicle collision without reporting the incident to a law enforcement entity within the jurisdiction where it happened?

Were you the driver of the vehicle, whether or not there was an injury, or whether or not the event occurred on private or public property?

If your answer is yes, or you are unsure whether your particular incident fits the criteria enumerated, list below and explain any and every incident.

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Section I. Criminal History

Have you ever committed or been involved in any of the following, whether you were arrested, suspected, or a victim, even if the police were not involved.

Crime	Yes/No	Approximate Date	Role / Involvement
Arson			
Assault			
Auto Theft			
Burglary			
Credit Card Abuse			
Criminal Mischief			
Child Endangering			
DWI/DUI			
Evading			
Family Violence			
Forgery			
Impersonating a Police Officer			
Illegal Possession of a Weapon			
<i>Specify weapon from above</i>			
Kidnapping			
Perjury			
Possession of Child Pornography			
Possession of Illegal Drugs			
Selling Illegal Drugs			
Selling Prescription Drugs			
Resisting Arrest			
Robbery			
Sexual Assault			
Theft			
Other			

If yes to any crime/question above, explain each incident in detail:

Did you commit any criminal violation in which the victim was legally defined as a juvenile? _____

Have you ever made any false report or statement to any law enforcement officer, law enforcement employee, or any other governmental employee?

Have you ever been detained, questioned, or arrested as a juvenile? _____

If yes list and explain (include month and year):

Have you ever engaged in any illegal activity that to your knowledge was not reported to any law enforcement agency? _____

Explain in detail to include whom, what, where, when and why for each occurrence. Do not include traffic violations.

**Have you ever been a suspect in a crime? _____
(This includes being listed in an official police report as a suspect in a crime.)**

If yes, explain and list why you were a suspect:

List any and all cash and/or items that you have ever stolen or taken without permission. Include items you purchased that you knew or suspected to be stolen as well as any items you were given or received.

**Item: _____ Quantity: _____ When (Month/Year): _____/_____
Original Value: _____ From Whom or Amount Paid: _____**

**Item: _____ Quantity: _____ When (Month/Year): _____/_____
Original Value: _____ From Whom or Amount Paid: _____**

**Item: _____ Quantity: _____ When (Month/Year): _____/_____
Original Value: _____ From Whom or Amount Paid: _____**

**Item: _____ Quantity: _____ When (Month/Year): _____/_____
Original Value: _____ From Whom or Amount Paid: _____**

**Item: _____ Quantity: _____ When (Month/Year): _____/_____
Original Value: _____ From Whom or Amount Paid: _____**

In your opinion, what is the worst thing that you have ever done?

Section J. Financial History and Obligations

- | | |
|---|----------|
| A. Applicant Current Monthly Net Salary | A. _____ |
| B. Spouse/Partner Monthly Net Income | B. _____ |
| C. Applicant Other Monthly Income
Source of income: _____ | C. _____ |
| Applicant Other Monthly Income
Source of income: _____ | C. _____ |
| D. Total Monthly Net Income (Add A, B & C) | D. _____ |
| E. Total Monthly Debts/Payments | E. _____ |
| F. Income Remaining (Subtract line E from Line D) | F. _____ |

List any and all accounts or property that you had that has been repossessed or charged off:

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Account/Property _____ **Date Contacted:** _____
Explanation: _____

Financial Obligations:

List financial obligations: Give the names of individuals, companies, or others to whom you are indebted and the extent of your debt. Include payments for rent, mortgages, vehicles, charge accounts, credit cards, utilities, food, gas, any loans, any insurance, child support and any other debts that are paid monthly and/or payments made. The monthly payment total should match E. on page 28.

Round off dollar amounts to the nearest whole dollar.

Creditor	Reason	Monthly Payment	Balance
Total		\$	\$

Have you ever written any checks which were returned for insufficient funds, account closed and/or been notified by a bank or business that your account was overdrawn? _____

If yes, explain to include date, bank name, the payee and the amount of the check:

Have you ever completed or attended any programs or classes in reference to insufficient funds check written? _____

If yes, explain reasons and circumstances of any class attended:

Are you currently or have you ever been behind on any accounts?

Name of Account: _____ **Month/Year:** _____
Amount Behind: _____ **Number of days behind:** _____

Name of Account: _____ **Month/Year:** _____
Amount Behind: _____ **Number of days behind:** _____

Name of Account: _____ **Month/Year:** _____
Amount Behind: _____ **Number of days behind:** _____

Name of Account: _____ **Month/Year:** _____
Amount Behind: _____ **Number of days behind:** _____

Do you have any open/pending civil litigation? _____ **If so, what court was it filed in? (Court, Case Number, County & State)**

Have you ever been referred to a collections agency? _____

If yes, explain -- include how many times, dates, the outcome and how much did you owe to each account:

Have you had any foreclosures? _____ **Have you made attempts to resolve debt with a creditor without the debt being referred to collection or used a debt consolidation company?** _____

If yes to either, explain -- include the amount of debt each time, number of times and/or the agreement reached:

Have you ever had a monetary judgment entered against you by a court of law? _____ **Have you ever had a lien filed against you?** _____ **Were you ever a party to any pending or past lawsuit?** _____

If yes to any, explain the reasons why – include amount, County & State of Court, and the names of the plaintiffs:

Section K. Special Qualifications and Skills

Language(s): List all in which you are fluent: _____

Other licenses - Concealed Handgun License, Peace Officer License, Pilot's License, etc.:

Weapons owned / Familiar with / Qualifications:

Memberships in organizations or volunteer (Former / Present memberships):

Are you currently or have you ever been a member of an organization which advocates the overthrow of the United States government or any government entity in the United States by force or violence? _____

If yes, explain your involvement:

Are you currently or have you ever been in or associated with a gang (street, motorcycle, etc.)? _____

If yes, explain your involvement or association with any gang:

Hobbies/Interests: _____

What are the reasons you are considering a career in law enforcement and when did you decide to pursue it?

Police work includes working weekends, changing hours, rotating shifts, short time turnaround for call backs to court, emergency activation & report to duty. Would this be a problem for you? Explain your answer, whether Yes or No.

Section L. Personal Declarations

Explain your use of alcohol including the type used.

Define in your own words the difference between tipsy and intoxicated.

List the last time you were tipsy and last time you were intoxicated.

**When was the last time (month/year) anyone used illegal drugs in your presence?
How many times have you been in a situation or location when someone was using an
illegal drug in your presence?**

**What was the illegal drug and under what circumstances did you see the illegal drug
used?**

**Does anyone in your household currently use illegal drugs or abuse prescriptions? If
yes, please explain.**

Section N. Signature Confirmation Form

Background History Statement Affirmation & Declaration

Applicant Name Printed

Date

I understand that my appointment as a Police Officer will be contingent upon the results of a complete character and fitness investigation. I also understand that all personnel appointed as a Norwood Police Officer must serve a probationary period of at least twelve months (12) from time of appointment or academy graduation during which time the employee must demonstrate his or her fitness for continued employment by the Norwood Police Department. (This probationary time does not include time in the academy).

I hereby certify that there are no willful misrepresentations, omissions or falsifications in all the statements and answers to questions contained herein. I further certify that all statements and answers are mine and are accurate and correct to the best of my knowledge. I am aware that should the investigation disclose such misrepresentations, falsifications or inaccuracies, my application will be rejected and **I will be disqualified for a minimum of two (2) years.**

Furthermore, should I be offered employment as a Police Officer, I understand that my employment may be terminated at a future date should it be discovered that I willfully misrepresented, omitted, or falsified any statements or answers within this background history statement.

Lastly, I understand that should I be disqualified from eligibility to the position of Police Officer for any reason, there is no right of appeal concerning this decision. The reason(s) for disqualification is private information pertaining to the Norwood Police Department in regards to the hiring standards of the agency and therefore not subject to disclosure to the applicant or other public/private entities.

Signature of the Applicant

Date

Section O. Physical Agility Test Information/Waiver Form

The Norwood Police Department administers a Physical Agility Test during the application process. A pre-test exercise program may include progressive resistance training, flexibility exercises, muscular strength, endurance and a cardiovascular program. As with all physical assessments, risks are involved. The Norwood Police Department recommends that you consult a physician before attempting a pre-test exercise program or the Physical Agility Test.

The purpose of this test is to ensure the applicant has sufficient endurance, speed, agility, coordination, power, and muscular strength to successfully pursue a suspect on foot or to perform other police duties.

The entire run and obstacle course is approximately $\frac{3}{4}$ to 1 mile. Although the obstacle course is a continuous event, the candidate must successfully complete each component before going on to the next obstacle. The candidate will start the test by first running one lap ($\frac{1}{4}$ mile) around the track, then entering the obstacle portion, completing same, and exiting to run a final lap ($\frac{1}{4}$ mile) completing the test. Applicants will be allowed to walk through the course for familiarization before the test begins. This test will be graded as pass or fail.

The following are examples and suggestions on how to train for the agility test. The City of Norwood only recommends the following training exercises. The City holds no liability for any injury incurred while preparing for the tests as recommended.

Agility Test Event	Related Police Task	Pre-Test Exercise
Running	Police Officers must be able to run to catch suspects and be able to run to help other police officers or citizens. Officers must have aerobic energy to control suspects that are resisting or attacking the officer	Jog two miles Run 440 Run 220 Run 10-40 yard sprints Shuttle Run
Obstacle 1- Fence Climb	Police Officers must be able to climb a fence to chase a suspect or get to a victim.	Practice climbing a tall fence, do push-ups and pull-ups
Obstacle 2- Cones	Police Officers must be able to negotiate turns while running in a search or foot chase.	Uphill sprints, run in a zigzag pattern, play basketball or soccer
Obstacle 3- Culvert	Police Officers must be able to jump over obstacles when chasing a suspect, to get to a victim, or to save themselves in dangerous situations.	Power Jump- squat down and jump as far as you can
Obstacle 4- Barricades	Police Officers must be able to climb over or go under obstacles, and roll to save themselves in a dangerous situation, or to catch a suspect or reach a victim.	Various calisthenics, push-ups, pull-ups and power jumps, side bends and hip twists
Obstacle 5- Window	Police Officers must be able to enter or exit a window to chase a suspect, get to a victim, or to save themselves in dangerous situations.	Various calisthenics, push-ups, pull-ups and power jumps, side bends and hip twists
Obstacle 6- Dummy Drag	Police officers must be able to drag a person to safety that is a victim of a fire or another officer that is injured.	Push-ups, pull ups, lift weights for your arms and shoulders like curls, overhead press and upright rows

Obstacle 7- Push-ups	Police Officers must have upper body strength for various duty related tasks.	Bench press, triceps extensions
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The push-up module measures the muscular endurance of your upper body. You will place your hands on the ground approximately shoulder width apart. Your feet must be touching. Your body should be in a straight line from your shoulders through your ankles and must remain that way throughout the test. On the "GO" signal, you will lower your body by bending your elbows until your upper arms (triceps) are parallel to the ground. Then return to the starting position by straightening your arms. You may rest in the up position, if necessary, as long as your body remains in a straight line.



You must complete the minimum number of proper push-ups in accordance with the age and gender minimum requirements listed below.

Males aged 21 - 29
16 push-ups

Females aged 21 - 29
9 push-ups

Males aged 30 -39
13 push-ups

Females aged 30 -39
7 push-ups

Males aged 40 -49
10 push-ups

Females aged 40 -49
5 push-ups

Obstacle 8- Dry Fire	Police Officers must have sufficient strength in both hands to control and accurately fire their weapon in a gunfight.	Weight lifting, wrist curls, squeeze a tennis ball or hand ball
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After completing Obstacle 8- Dry Fire, the candidate will be directed back onto the track to run the final 1/4 mile lap around the track. The applicant's course time will end when they cross the finish line. **All candidates will have 7 minutes to complete the entire course.**

WAIVER STATEMENT

I acknowledge, agree, and represent that I understand the nature of the activity and that I am qualified, in good health, and in proper physical condition to participate in such activity. I further agree and warrant that if, at any time, I believe the conditions to be unsafe, I will immediately discontinue further participation in the activity. I fully understand that these activities involve risks and dangers and agree to consult a physician before attempting.

Applicant's Name: _____ Date: _____

Applicant's Signature: _____

If you have any questions regarding the Physical Agility Test, please contact the Norwood Police Recruiting Section at (513) 458-4549.