

***EASTON POLICE DEPARTMENT***  
***106 W. Dover Street***  
***Easton, Maryland 21601***  
***410-822-1111***

***APPLICATION FOR EMPLOYMENT***  
***(Police Officer)***



**Please return in a sealed envelope**

**POLICE OFFICER**  
**SALARY INFORMATION**

Starting salary - \$38,500

**SUMMARY OF BENEFITS**

- Clothing maintenance allowance
- Group Health, Dental & Vision Insurance
- 11 Paid Holidays
- Paid Vacation
- Paid Personal Day
- Bereavement Leave
- Time Off to Vote
- Jury Duty
- Witness Duty
- Employment Assistance Program
- Educational Assistance
- Service Awards
- Credit Union
- Blood Bank
- Holiday Bonus
- Perfect Attendance Awards
- Pension Plan
- Deferred Compensation Savings Plan
- Basic Life & Accidental Death & Dismemberment Insurance
- Sick Leave Benefits
- Post - Retirement

**Please keep for your Records.**

## **POLICE OFFICER**

### **HIRING REQUIREMENTS:**

**Applicant must contain the following:**

- U.S. Citizenship
- High School Graduate
- Possess a valid driver's license
- 21 years of age prior to graduation from the Easton Shore Criminal Justice Academy

## **HIRING PROCESS**

### **PHASE 1**

- **Written Examination**
- **Physical Agility and stamina test**

You are to bring a copy of the following documents- your birth certificate, high school/GED/college transcripts, driver's license, Social Security Card and DD214, if applicable.

- **Oral Interview Board- consists of 3 members on the panel**

### **PHASE 2**

- **Extensive Background investigation**

Includes, but not limited to, your criminal history, driving record, credit history, employment history, reference checks and neighborhood canvas.

- **Drug Screening**

### **PHASE 3**

- **Polygraph examination**
- **Psychological and medical examination**

### **PHASE 4**

- **Personal Interview with the Chief of Police**

This process requires several appointments. Failure to attend scheduled appointments **without prior permission** may result in automatic disqualification from the hiring process

# APPLICATION FOR EMPLOYMENT

**PLEASE COMPLETE WITH TYPEWRITER OR INK. RETURN IN A SEALED ENVELOPE TO:  
CPT. GREGORY WRIGHT EASTON POLICE DEPARTMENT, 106 W. DOVER ST., EASTON, MD 21601**

## PERSONAL INFORMATION

POSITION APPLYING FOR \_\_\_\_\_

1. Name (print) \_\_\_\_\_  
(First) (Middle) (Last) Maiden (if applicable)

2. Present address: \_\_\_\_\_  
*(List house number and street; if address is on a Federal route, State or R.F.D. route, also indicate local name of route or nearest intersecting road)*

\_\_\_\_\_  
(City) (County) (State) (Zip)

3. Mailing address, if different from above \_\_\_\_\_

4. Telephone Number: Home \_\_\_\_\_ Office \_\_\_\_\_ Cell \_\_\_\_\_

5. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

6. Social Security No.: \_\_\_\_\_ U.S. Citizen:  Yes  No

7. Driver's License No. \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

## EDUCATION

8. Accredited High School, GED and College information.

(a) High School: Attended: \_\_\_\_\_  
Graduation: \_\_\_\_\_ Year: \_\_\_\_\_

(b) High School Equivalency Test? \_\_\_\_\_ Date \_\_\_\_\_  
Certificate No. (if any) \_\_\_\_\_ State issuing Certificate  
*(A Certificate issued through the Armed Forces is not acceptable unless it meets the standards of the Maryland State Department of Education.)*

(c) College: Attended: \_\_\_\_\_  
Attended Years: From \_\_\_\_\_ To \_\_\_\_\_  
Type of Diploma or Degree Awarded: \_\_\_\_\_  
Major: \_\_\_\_\_

(d) Specialized Qualifications:  
(Include Active Technical/Professional License and Numbers, Academic or Professional Awards, etc.)

---

---

---

(e) Languages Spoken or Read: \_\_\_\_\_

(f) Clerical Skills: Typing: \_\_\_\_\_ wpm

Computer Skills \_\_\_\_\_

---

Other: \_\_\_\_\_

**MILITARY SERVICE**

9. Branch: \_\_\_\_\_

10. Service Dates: From \_\_\_\_\_ to \_\_\_\_\_

11. MOS (Specialty): \_\_\_\_\_

12. Honorably Discharged:  Yes  No

13. Type of Discharge: \_\_\_\_\_

14. Rank at time of Separation: \_\_\_\_\_

**BACKGROUND INFORMATION**

15. List residences you have lived during the past (5) years.

<u>Address</u>	<u>Dates</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

16. Have you ever been convicted of any violation of law , including motor vehicle violations?  Yes  No  
If yes, state details and the disposition of the case(s):

---

---

---

17. List below your work history, starting with your present position and working backward through your jobs. List any periods of unemployment. Use additional pages if necessary.

---

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name and address of employer \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Type of business \_\_\_\_\_ Position held \_\_\_\_\_

Assigned Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

---

---

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name and address of employer \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Type of business \_\_\_\_\_ Position held \_\_\_\_\_

Assigned Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

---

---

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name and address of employer \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Type of business \_\_\_\_\_ Position held \_\_\_\_\_

Assigned Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

---

---

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Name and address of employer \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Type of business \_\_\_\_\_ Position held \_\_\_\_\_

Assigned Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

---



23. *If applying for a Police Officer position, sign 22 (a) and 22 (b) below.*

- (a) It is understood and agreed that I am required to successfully complete the approved Maryland Police Training Commission course (Police Academy). Failure to complete this course may result in the applicant's immediate dismissal from the Easton Police Department.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

- (b) Applicant, if hired, is required to serve a two-year probationary period from date of appointment, during which time his/her services may be terminated at the discretion of the Chief of Police.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**VERIFICATION:**

24. *All applicants must sign below for consideration for employment. Failure to comply may result in the rejection of your application:*

I, the undersigned, certify that I have read and understand this application in its entirety and that the information herein provided is true and complete to the best of my knowledge. I understand that should any statement made by me during the hiring process prove false, misleading or erroneous, may result in the rejection of my application and/or discharge from the Easton Police Department. In submitting this application, I further understand that it becomes the property of the Town of Easton Government and will not be returned.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_