



PITTSBURG POLICE DEPARTMENT

Beard-Shanks Law Enforcement Center
201 North Pine, P.O. Box 611
Pittsburg, Kansas 66762
(620) 235-0400

BRENT NARGES
Chief of Police

Supplemental Information for Police Department Applicants

Due to the sensitive nature of information shared on a daily basis within the police department, all applicants for positions within the police department are required to provide the following information to be considered for employment by the Pittsburg Police Department.

Driver's License number and State of Issue: _____

Social Security Number: _____

Past Incidents

Have you pleaded guilty, no contest to, or been convicted of 1) a felony, or 2) a lesser crime which involved theft, dishonesty or violence in the past seven (7) years?

_____ Yes _____ No

If YES, describe the nature of the offense(s) and the County and State where convicted.

Have you had your driver's license suspended or revoked within the past five (5) years?

_____ Yes _____ No

If YES, list the State which suspended or revoked the license and the reason(s) for each suspension or revocation. _____

Have you been disciplined or fired by a previous employer in the past five (5) years?

_____ Yes _____ No

If YES, please explain. _____



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Hours Available to Work

_____ Sunday _____ Monday _____ Tuesday _____ Wednesday
_____ Thursday _____ Friday _____ Saturday

What Shift are you available for?

_____ Days _____ Evenings _____ Midnights

Please read carefully and sign

AUTHORIZATION

I hereby authorize the City of Pittsburg Police Department to investigate all statements made in this application, review my driving and criminal records, and to contact my previous employers. I understand that any false statements made herein may eliminate my application from employment consideration, or if discovered after hire, may result in my discharge from employment.

If hired, I will conform to the policies, rules and regulations of the City of Pittsburg, and the Pittsburg Police Department, as described in the Employee Handbook and Policy Manual.

I agree to submit to a complete physical examination including drug testing if requested by the City of Pittsburg. I also agree to sign the "Authorization to Release Information" form if so requested by the City,

And

ACKNOWLEDGMENT OF AT WILL EMPLOYMENT

I acknowledge that both my employment and compensation CAN BE TERMINATED AND/OR CHANGED AT WILL, without prior notice and at the sole option of the City of Pittsburg. I understand that no representative of the City of Pittsburg has any authority to enter into any agreement hiring me for a specified period of time, or to make any agreement contrary to this acknowledgment.

Print Name: _____

Signed: _____

Date: _____