



FREMONT POLICE DEPARTMENT

425 Main Street
Fremont, NH 03044
(603) 895-2229
FAX: (603) 895-1116

Chief Jon Twiss

APPLICATION

This application must be typewritten or neatly printed.

Applications not properly completed will not be accepted.

Any questions, which cannot be answered in the space available, may be answered on the back of the page or a separate piece of paper.

Forward your completed application to:

Chief Jon Twiss
Fremont Police Department
425 Main Street
Post Office Box 1
Fremont, New Hampshire 03044

ANY FALSE STATEMENTS MADE IN THIS APPLICATION MAY BE CAUSE FOR REJECTION OF THE APPLICANT.

All applications will be kept on file from the date received and will be considered for future positions.

Name of Applicant: _____

Position Applied For: _____

Date of Application: _____

TOWN OF FREMONT, NEW HAMPSHIRE

FREMONT POLICE DEPARTMENT

11: List all places of employment during the past ten years:

EMPLOYER	ADDRESS	FROM-TO	REASON FOR LEAVING

12. If currently a police officer, are you certified in New Hampshire? _____ If yes, are you employed full or part-time? _____

13. Are you certified in any other state? _____ If yes, what state(s): _____
Full or part-time? _____

14. Have you ever been arrested or convicted of a crime? _____

15. List personal skills and level (firearms; typing; radios; etc.): _____

NOTE: ANY PERSON HIRED FOR THE POSITION OF POLICE OFFICER OR ANY SWORN POSITION IS HIRED SUBJECT TO CERTIFICATION BY THE NEW HAMPSHIRE POLICE STANDARDS AND TRAINING COUNCIL PURSUANT TO RSA 105.

THE FREMONT POLICE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER

Signature of Applicant



Fremont Police Department
425 Main Street, PO Box 1, Fremont, NH 0344

PERSONAL HISTORY STATEMENT

Name _____
(last) (first) (middle)

Address _____
(number) (street) (city/town) (state) (zip)

Telephone _____
(home) (work)

Residences: List all addresses where you have lived during the past ten (10) years, beginning with present address. List dates by month and year. Attach extra page if necessary.

1. _____
(number) (street) (city/town) (state) (zip code)

From _____ To _____
(date) (date)

2. _____
(number) (street) (city/town) (state) (zip code)

From _____ To _____
(date) (date)

3. _____
(number) (street) (city/town) (state) (zip code)

From _____ To _____
(date) (date)

4. _____
(number) (street) (city/town) (state) (zip code)

From _____ To _____
(date) (date)

Experience & Employment: Beginning with your present or most recent job, list all employment held for the past ten (10) years, including part-time, temporary or seasonal employment. Include all periods of unemployment. Attach extra pages if necessary.

1. Employer _____

Employer address _____
(number) (street) (city/town) (state) (zip code)

Employer telephone # _____ Job Title _____

Supervisor _____ Title _____

Name of Co-worker _____

Date Started _____ Date Left _____

Reason for leaving this position: _____

2. Employer _____

Employer address _____
(number) (street) (city/town) (state) (zip code)

Employer telephone # _____ Job Title _____

Supervisor _____ Title _____

Name of Co-worker _____

Date Started _____ Date Left _____

Reason for leaving this position _____

3. Employer _____

Employer address _____
(number) (street) (city/town) (state) (zip code)

Employer telephone # _____ Job Title _____

Supervisor _____ Title _____

Name of Co-worker _____

Date Started _____ Date Left _____

Reason for leaving this position _____

4. Employer _____

Employer address _____
(number) (street) (city/town) (state) (zip code)

Employer telephone # _____ Job Title _____

Supervisor _____ Title _____

Name of Co-worker _____

Date Started _____ Date Left _____

Reason for leaving this position _____

5. Employer _____

Employer address _____
(number) (street) (city/town) (state) (zip code)

Employer telephone # _____ Job Title _____

Supervisor _____ Title _____

Name of Co-worker _____

Date Started _____ Date Left _____

Reason for leaving this position _____

6. Employer _____

Employer address _____
(number) (street) (city/town) (state) (zip code)

Employer telephone # _____ Job Title _____

Supervisor _____ Title _____

Name of Co-worker _____

Date Started _____ Date Left _____

Reason for leaving this position _____

Education:

High School _____

Address _____
(number) (street) (city/town) (state) (zip)

From _____ To _____ Graduated Yes [] No [] GED Yes [] No []
(year) (year)

College/University _____ From _____ To _____
(year) (year)

Town & State _____ Degree Received – Yes [] No []

Units Completed _____ Major/Minor _____

College/University _____ From _____ To _____
(year) (year)

Town & State _____ Degree Received – Yes [] No []

Units Completed _____ Major/Minor _____

College/University _____ From _____ To _____
(year) (year)

Town & State _____ Degree Received – Yes [] No []

Units Completed _____ Major/Minor _____

List all other schools attended with dates of attendance (trade, vocational, business, etc.)

Special Qualifications and Skills

List any special licenses you hold (pilot, scuba, etc.). List any special skills or qualifications you may have.

Legal:

Have you ever been convicted, arrested, detained by police or summonsed into court?

Yes [] No [] If yes, complete the following:

Police Agency _____
(city) (state)

Crime(s) Charged _____

Disposition(s) _____

Police Agency _____
(city) (state)

Crime(s) Charged _____

Disposition(s) _____

References :

Name _____ Telephone # _____

Address _____
(number) (street) (city/town) (state) (zip)

Years known _____

Name _____ Telephone # _____

Address _____
(number) (street) (city/town) (state) (zip)

Years known _____

Name _____ Telephone # _____

Address _____
(number) (street) (city/town) (state) (zip)

Years known _____

When would you be available for employment? _____

How did you learn about the position for which you are applying? _____

The Town of Fremont Supports the Americans with Disabilities Act. Are you able to perform specific job functions, with or without reasonable accommodations, of the job for which you are applying (yes or no)? _____

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers to questions. I am fully aware that any such misrepresentations, omissions, or falsifications will be grounds for immediate rejection or termination of employment.

Signature of Applicant _____ Date _____