

**GARY POLICE DEPARTMENT RESERVE DIVISION
PERSONAL HISTORY FORM**

NAME _____
(Last) (First) (MI)



INSTRUCTIONS PLEASE READ CAREFULLY

The following instructions are furnished as a guide to assist you in filling out the personal history form. This form must be completed and detailed in all respects. It is the basis for your background investigation which will be conducted to determine your suitability for volunteering as a Reserve Officer with the City of Gary's Police Department Reserve Division.

All questions must be answered completely and accurately. If a question does not apply, enter N/A in the space provided. Falsification or failure to include information as directed will be considered grounds for refusing to allow you to volunteer as a Reserve Officer. Avoid errors by reading the directions carefully before making any entries on the form. Make sure your information is correct and in the proper sequence before you begin.

When a report of an incident is required, be sure that you give all facts pertaining to it. Present the information in such a manner that any person unfamiliar with the situation will be provided with enough details and facts in the order in which they occurred. Include the approximate dates or times the events took place and the names of persons or organizations involved.

If there is not sufficient space on the form for you to include all the information required, it should be placed on a blank sheet of paper (make sure to include the number you are answering).

Remember, every item will be checked and must be verified. A careful, accurate and complete form will help to expedite your examination. All answers are to be legible and printed in ink. You will be administered an examination to determine the authenticity of the information provided by you.

Submit with your application LEGIBLE COPIES of the following documents:

- **High school diploma or G.E.D. Certificate;**
- **Proof of birth (Birth certificate, passport or baptismal certificate;**
- **Driver's license; and**
- ***Passport photo (Required).**

Your completed application and all legible copies of the necessary documents, along with the required passport sized photograph (*taken and purchased at Walgreens, Wal-Mart, CVS, etc.), **must be submitted in person.**

OPEN APPLICATIONS

PLEASE TEXT OR E-MAIL to make arrangements for submission.

219.895.3417(C) – abrown@gary.gov

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II. EMPLOYMENT HISTORY

Begin with your present or most recent job and list your complete work record. List dates in proper sequence. When listing military service, give name and rank of last immediate superior.

Employer's Name	Address	Phone
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Start Date/End Date of Employment	Reason for Leaving	Supervisor's Name
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Duties: _____

Employer's Name	Address	Phone
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Start Date/End Date of Employment	Reason for Leaving	Supervisor's Name
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Duties: _____

Employer's Name	Address	Phone
-----------------	---------	-------

Start Date/End Date of Employment	Reason for Leaving	Supervisor's Name
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Duties: _____

Employer's Name	Address	Phone
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Start Date/End Date of Employment	Reason for Leaving	Supervisor's Name
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Duties: _____

Name _____

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II. EMPLOYMENT HISTORY (continued)

Have you ever been discharged or asked to resign from any position or employment? ____ Yes ____ No

If "Yes", explain in detail. (Include the name of the employer). _____

List below every civil service or public agency competitive examination you have taken. Include any other law enforcement agencies or previous application with the Gary Police Department.

Agency	Date of Examination	Accepted
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you were not employed by any of the above agencies, give reason, if known: _____

III. EDUCATIONAL HISTORY

List all high schools, colleges, universities, trade and business schools you have attended. Begin with the most recent and continue in sequence.

Name of School	Address	Dates Attended	Graduated (Y/N)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

College/Number of Credits	Major	Minor	Degree (Y/N)
_____	_____	_____	_____

College/Number of Credits	Major	Minor	Degree (Y/N)
_____	_____	_____	_____

Were you ever suspended or expelled from any school? ____ Yes ____ No

If "Yes", explain: _____

List any courses or training that you feel have a bearing on your qualifications for the position. _____

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IV. MEDICAL HISTORY

Do you have or have you ever had any of the following:

- Heart Condition Yes No
- Diabetes Yes No
- High Blood Pressure Yes No
- Low Blood Pressure Yes No
- Spinal difficulties or injuries Yes No
- Hernia(s) Yes No
- Communicable Diseases Yes No

If you answered “Yes”, to any of the above, please explain: _____

Do you have or have you had any injury or illness which may prevent you from doing a particular job?
 Yes No

If “Yes”, please explain: _____

Do you wear glasses or contact lenses? Yes No

Vision without correction: _____

Do you have any hearing impairment? Yes No

Name and address of family doctor: _____

Have you ever been insane, or had any other mental or nervous disorder? Yes No

Have you ever undergone a psychiatric examination or treatment? Yes No

If any of the above questions are answered “Yes”, provide a detailed explanation of each on a blank sheet of paper, including names and dates of each examination or treatment.

Are you receiving an allowance for any type of disability? Yes No

If “Yes”, nature of disability: _____

Name of agency providing benefits: _____

Name _____

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V. MILITARY HISTORY

Have you ever served in a military or naval organization of the United States? Yes No

If “Yes”, list all periods of active service in the armed forces of the United State.

Dates of Service	Branch of Service	Unit Designation
Military Service No.	Highest Rank Held	Type of Discharge

If you received a discharge other than honorable, give complete details: _____

Military Reserve Status Commitment Date

Branch of Service Unit Address of Unit

Are you required to attend a period of active duty annually? Yes No
If “Yes”, how many days? _____

Have you ever asked for or received a deferment from military services? Yes No
If “Yes”, give draft board number and location, dates and full details _____

Address of present draft board

Draft Board Number	Selective Service Number	Classification
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Name _____

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VI. ARREST INFORMATION

Have you ever been arrested, detained by Police or summoned into court? Yes No

If "Yes", complete the following (list juvenile as well as adult occurrences):

<u>Crime Charged</u>	<u>Police Agency (City & State)</u>	<u>Date</u>	<u>Disposition of Case</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Were you ever disciplined while in the military service (include court marshals, captain's mast, company punishment, or other)? Yes No If "Yes", complete the following:

<u>Charge</u>	<u>Agency</u>	<u>Date</u>	<u>Age</u>	<u>Disposition</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

VII. TRAFFIC HISTORY

Do you possess a valid operator's license? Yes No From What State? _____

License Number _____ Type (Operator, Chauffeur, etc.) _____

Expiration Date _____

Has your license ever been suspended or revoked? Yes No

If "Yes", give date, location and reasons. _____

List all driving citations you have received as an adult or juvenile, excluding parking tickets.

<u>Month/Year</u>	<u>Charge</u>	<u>City & State</u>	<u>Disposition</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe in a brief narrative any traffic accidents in which you have been involved, giving approximate dates and locations. _____

Name _____

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VIII. LIQUOR AND NARCOTICS

Describe in your own words your use of intoxicating liquors _____

Have you ever used marijuana? Yes No If "Yes", what were the circumstances?

Have you ever used any form of drugs or narcotics other than those prescribed by your physician?
 Yes No If "Yes", what were the circumstances?

Have you ever sold or furnished drugs or narcotics to anyone? Yes No
If "Yes", explain in detail. _____

IX. MISCELLANEOUS

If it became necessary in the course of your duties to take a human life, would you have any reluctance due to religious or other beliefs? Yes No If "Yes", explain. _____

Are there any features about police work which would be distasteful to you? _____

What phases of police work are you most interested in (patrol, investigation, juvenile, etc)? _____

Do you know of anything that would disqualify you for police appointment or prevent you from fully discharging official duties of said position? Yes No
If "Yes", explain. _____

List your reasons for applying for this position: _____

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X. CERTIFICATION

RESERVE OFFICER APPLICATION REPRESENTATION

I hereby certify that there are no willful misrepresentations, omissions or falsifications in the foregoing statements and answers to the questions that I provided. I understand that to falsify information is grounds for refusing to allow me to volunteer or be released, if necessary.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment.

I authorize the Gary Police Department to conduct an extensive background check based on the information provided in this Personal History Form.

I also agree to abide by the rules and regulations of the Gary Police Civil Service Commission, which may be changed, withdrawn, added or interpreted at any time and acknowledge that my volunteer status may be withdrawn with cause.

I also hereby certify that I meet the following basic requirements:

- I am at least twenty-one (21) years of age.
- I am a United States Citizen.
- I have never been convicted of a Class A Misdemeanor or Felony.
- I am a licensed driver.
- I have never been terminated as a Gary Police Officer.
- I have never been de-commissioned as a Gary Reserve Police Officer.

Signature of Applicant

Date

RECEIVED BY:

Angela Brown, Administrator
Gary Police Civil Service Commission

Date

Name _____