

MILLSBORO POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT

John K. Murphy, II
Chief of Police



307 Main Street
P.O. 1773
Millsboro, DE 19966
302-934-8174
302-934-5455 FAX

Date of Application: _____ Applicants Date of Birth _____

Name _____
Last First Middle Social Security Number

Address _____
Street Address City State Zip Code

Phone Numbers _____
Home Work Cell Phone

How much education do you have? _____

Are you a certified police officer in this state or any other state? _____

Have you applied with the Millsboro Police Department before? ___ Yes ___ No If yes, When? _____

EMPLOYMENT HISTORY – Start with the most recent. List any periods of unemployment lasting more than three months. Attach additional sheets if necessary.

From _____ to _____ Employer _____

City & State _____ Phone Number (____)-_____

Title of Your Position _____ Average Number of Hours Worked Weekly _____

Supervisors Name _____ Supervisors Title _____

Reason for Leaving or Considering a Change _____

From _____ to _____ Employer _____

City & State _____ Phone Number (____)-_____

Title of Your Position _____ Average Number of Hours Worked Weekly _____

Supervisors Name _____ Supervisors Title _____

Reason for Leaving or Considering a Change _____

From _____ to _____ Employer _____

City & State _____ Phone Number (____)-_____

Title of Your Position _____ Average Number of Hours Worked Weekly _____

Supervisors Name _____ Supervisors Title _____

Reason for Leaving or Considering a Change _____

EMPLOYMENT HISTORY (cont.)

From _____ to _____ Employer _____
City & State _____ Phone Number (____)-_____
Title of Your Position _____ Average Number of Hours Worked Weekly _____
Supervisors Name _____ Supervisors Title _____
Reason for Leaving or Considering a Change _____

From _____ to _____ Employer _____
City & State _____ Phone Number (____)-_____
Title of Your Position _____ Average Number of Hours Worked Weekly _____
Supervisors Name _____ Supervisors Title _____
Reason for Leaving or Considering a Change _____

From _____ to _____ Employer _____
City & State _____ Phone Number (____)-_____
Title of Your Position _____ Average Number of Hours Worked Weekly _____
Supervisors Name _____ Supervisors Title _____
Reason for Leaving or Considering a Change _____

PERSONAL REFERENCES – LIST FIVE (other than relatives and former employees)

NAME	OCCUPATION	HOME PHONE	WORK PHONE

List any additional knowledge or skills that make you eligible to be a police officer: _____

I hereby certify that to the best of my knowledge the answers made hereon are true. I understand that if employed, any misrepresentation of facts on this application constitutes sufficient cause for my immediate dismissal. Furthermore, I authorize the Millsboro Police Department to do inquiries into my criminal history, medical history, driver's license history, and credit history.

Printed Name _____ Signature _____