

**HIGHLAND POLICE DEPARTMENT  
BOARD OF POLICE AND FIRE COMMISSIONERS  
TESTING APPLICATION FORM**

**INSTRUCTIONS:** Fill out this application form completely and accurately. All statements in your application are subject to verification. Incorrect statement(s) will bar or remove you from employment and/or consideration.

(Please *print* or *type*)

Name: \_\_\_\_\_

Last

First

Middle

**Current Address:**

\_\_\_\_\_  
Street Address Apartment City State Zip code

\_\_\_\_\_  
County ( ) Work Phone ( ) Home Phone E-mail Address

\_\_\_\_\_  
Driver's License No. State Issued Issuing Date

\_\_\_\_\_  
Expiration Date Valid Driver's License: ( ) Yes ( ) No Citizen of the United States: ( ) Yes ( ) No

( ) Age 35 or over? Check here if Age Limit Extension is requested for Military Service \_\_\_\_\_ Number of years served

**Education** (Please check ALL that will apply by January 2025)\*\*:

- ( ) 60 semester hours in Admin. of Justice or similar \_\_\_\_\_  
( ) Associate's Degree \_\_\_\_\_  
( ) Associate's Degree in Law Enforcement \_\_\_\_\_  
( ) 16+ yrs., Bachelor's Degree \_\_\_\_\_  
( ) 17+ yrs., Graduate Degree \_\_\_\_\_

**In lieu of education requirement:**

- ( ) 24+ months of honorable active duty in the US Armed Forces  
( ) 180 days of honorable active duty in US Armed Forces Combat Duty recognized by the US Dept. of Defense

**In addition to the education/military service requirement:**

- ( ) Completed an IL full-time LE Academy or another state's transferrable equivalent  
( ) Have a minimum 24 consecutive months of full-time law enforcement experience  
( ) Hold a full-time LE officer certificate in the state of IL or be able to become certified within 6 months of hire

**\*\* If you will complete any of the above requirements by the end of the Fall Semester 2024, you will be eligible for this test cycle. Please check the requirement that you expect to obtain by or before January 2025.**

I understand that omissions, misrepresentations or false statements on my application form will be basis for no further employment consideration. I certify that there are no misrepresentations, omissions or false statements in my application form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# BACKGROUND DATA SHEET

## Highland Police Department Board of Police and Fire Commissioners

NAME \_\_\_\_\_

Last 4 of Social Security Number \_\_\_\_\_

Today's date \_\_\_\_\_

**1. Are you currently a certified police officer?**

( ) Yes→ What municipality or accredited law enforcement training center? \_\_\_\_\_

( ) No→ Have you been an officer within the past 3 years?  
( ) Yes  
( ) No

**2. Do you plan to submit a DD214 (re: military service)**

( ) Yes  
( ) No  
( ) N/A

**3. What is the highest level of education you will have completed by January 2022?**

( ) 60 semester hours of college  
( ) Associate's Degree  
( ) Associate's Degree in Law Enforcement  
( ) 16+ yrs., Bachelor's Degree  
( ) 17+ yrs., Graduate School  
( ) N/A

**4. Are you currently taking classes at a college?**

( ) Yes; Name of Institution: \_\_\_\_\_  
( ) No

**5. If you have taken college courses but not yet earned a degree, indicate the number of semester hours you will complete by January of next year. Note: you do not need to answer this question if you have earned a college degree.**

\_\_\_\_\_

**6. If you have 2 or more years full-time law enforcement experience with a municipal, county, state or federal agency, please list the details below.**

\_\_\_\_\_  
Department Name

\_\_\_\_\_  
Dates: From To

\_\_\_\_\_  
Department Name

\_\_\_\_\_  
Dates: From To

\_\_\_\_\_  
Department Name

\_\_\_\_\_  
Dates: From To

**Applicant Signature:**

**Date:**

## **AUTHORITY FOR RELEASE OF INFORMATION AND RECORDS**

I, \_\_\_\_\_, do hereby authorize a review of all records concerning myself to any duly authorized agent of the Highland Police Department, whether the said records are of a public, private or confidential nature, including, but not limited to, applicant background information.

I authorize you to furnish the Highland Police Department with any and all information that you have concerning my: work record, salary, attendance, reputation, medical records, criminal history, credit history, loan history, driving history, and military service records. Information of a confidential or privileged nature may be included. Your reply will be used to assist the Highland Police Department in determining my qualifications and fitness for the position I am seeking with the department.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Highland Police Department. I understand that all materials pertaining to this background investigation become the property of the Highland Police Department and will not be returned to me.

I hereby release you and your organization from any and all liability or damages which may result from furnishing the information requested. I further release the Highland Police Department and its agents from any and all liability which may be incurred or as a result from the collection of such information. I further understand that in the event my application is disapproved, the sources of confidential information cannot be revealed to me.

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Applicant's Signature

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Date of Birth

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Print Name

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Date

---

Witness

---

Date

APPLICATION FOR EMPLOYMENT – *EQUAL OPPORTUNITY EMPLOYERS*

1. Name: \_\_\_\_\_  
*Last*
*First*
*Middle*

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4. Telephone Number(s): (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

6. Have you ever been convicted of a felony? \_\_\_\_\_Yes \_\_\_\_\_No  
If "yes" provide crime classification and date of conviction. \_\_\_\_\_

1.	<u>High School</u>	<u>City &amp; State</u>	<u>Graduate?</u>
	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

3. College/University Attended \_\_\_\_\_  
 City & State \_\_\_\_\_ Exp. Grad. Date \_\_\_\_\_  
 Major/Minor \_\_\_\_\_ Degree Rec'd, if any \_\_\_\_\_  
 Currently attending? ☐ NO ☐ YES; credit hours earned as of date of application: \_\_\_\_\_

4. College/University Attended \_\_\_\_\_  
 City & State \_\_\_\_\_ Exp. Grad. Date \_\_\_\_\_  
 Major/Minor \_\_\_\_\_ Degree Rec'd, if any \_\_\_\_\_  
 Currently attending? ☐ NO ☐ YES; credit hours earned as of date of application: \_\_\_\_\_
5. List other schools attended (Trade, Vocational, Business, etc). Give name and dates attended, course of study, certificate and any other pertinent information.  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Were you ever expelled or suspended from any school? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_
7. List other formal education beyond high school you may have, including special training courses:  
 \_\_\_\_\_  
 \_\_\_\_\_
8. List any special licenses or certificates you hold or have held:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### C. EMPLOYMENT HISTORY

1. Have you ever taken a civil service exam? \_\_\_\_\_ Yes \_\_\_\_\_ No *If yes, please specify below.*
- | <u>Agency</u> | <u>Date</u> | <u>Position on List</u> | <u>Status</u> |
|---------------|-------------|-------------------------|---------------|
| _____         | _____       | _____                   | _____         |
| _____         | _____       | _____                   | _____         |
| _____         | _____       | _____                   | _____         |
2. Are you now on any eligibility list? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_
3. Were you ever placed on a civil service list and not hired? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_
4. Were you ever rejected for any civil service position? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If yes, explain \_\_\_\_\_

5. Have you ever been a law enforcement officer or held a similar position? \_\_\_\_Yes \_\_\_\_No  
If yes, Position\_\_\_\_\_Dates\_\_\_\_\_Location\_\_\_\_\_  
Position\_\_\_\_\_Dates\_\_\_\_\_Location\_\_\_\_\_  
Position\_\_\_\_\_Dates\_\_\_\_\_Location\_\_\_\_\_
6. Were you ever discharged or forced/asked to resign because of misconduct or unsatisfactory service or while under investigation? \_\_\_\_Yes \_\_\_\_No  
If yes, explain \_\_\_\_\_
7. Are you now, or have you ever been, engaged in any business as an owner, partner, or corporate member?  
\_\_\_\_Yes \_\_\_\_No  
If yes, explain \_\_\_\_\_

Beginning with your present or most recent job, list all employment for the past 5 years, including part-time, temporary or seasonal employment. Include all periods of unemployment. Attach/submit extra pages if necessary.

1. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
Address\_\_\_\_\_  
Phone Number \_\_\_\_\_  
Job Title \_\_\_\_\_  
Duties \_\_\_\_\_  
\_\_\_\_\_  
Supervisor\_\_\_\_\_Name of a co-worker\_\_\_\_\_  
Reason for Leaving \_\_\_\_\_
2. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_  
Address\_\_\_\_\_  
Phone Number \_\_\_\_\_  
Job Title \_\_\_\_\_  
Duties \_\_\_\_\_  
\_\_\_\_\_  
Supervisor\_\_\_\_\_Name of a co-worker\_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

3. From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_
- Address \_\_\_\_\_
- Phone Number \_\_\_\_\_
- Job Title \_\_\_\_\_
- Duties \_\_\_\_\_
- \_\_\_\_\_
- Supervisor \_\_\_\_\_ Name of a co-worker \_\_\_\_\_
- Reason for Leaving \_\_\_\_\_

INDICATE BY NUMBER ANY OF THE ABOVE EMPLOYERS WHOM YOU DO NOT WISH FOR US TO CONTACT.

\_\_\_\_\_

#### **D. SPECIAL QUALIFICATIONS & SKILLS**

1. List any special licenses you hold (such as Paramedic, Pilot, Radio Operator, Scuba, etc.). Show licensing authority, original dates of issue and date of expiration.

\_\_\_\_\_  
\_\_\_\_\_

2. List any special specialized machinery or equipment that you can operate.

\_\_\_\_\_  
\_\_\_\_\_

3. If you are fluent in a foreign language, indicate in each area your level of fluency (Excellent, Good, Fair)

<u>Language</u>	<u>Reading</u>	<u>Speaking</u>	<u>Understanding</u>	<u>Writing</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**E. REFERENCES – List four persons who you know well enough to provide current information about you. Do not list relatives or former employers.**

1. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ City/State \_\_\_\_\_
2. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ City/State \_\_\_\_\_
3. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ City/State \_\_\_\_\_
4. Name \_\_\_\_\_ Residence Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Years Known \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Business Address \_\_\_\_\_ City/State \_\_\_\_\_

**F. MEMBERSHIP IN ORGANIZATIONS (Past and/or Present)**

<u>Name &amp; Address</u>	<u>Type (Social, Fraternal, Professional etc.. Do not include any religious or ethnic affiliations.)</u>	<u>From</u>	<u>To</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



**G. PERSONAL DECLARATIONS**

1. Have you ever made an application for employment with this municipality? \_\_\_\_\_Yes \_\_\_\_\_No

If yes, give date(s) and status of application.

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2. Are there any incidents in your life or details not mentioned herein which may influence this department's evaluation of your suitability for employment as a police officer? \_\_\_\_\_Yes \_\_\_\_\_No

If yes, explain

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**H. BACKGROUND INFORMATION – Information provided in the following sections will only be used for background checks if you are offered a position and will not affect your status as an applicant in any manner.**

1. Name: \_\_\_\_\_

2. Driver's license number: \_\_\_\_\_

3. Height: \_\_\_\_\_

4. Weight: \_\_\_\_\_

5. Color of eyes: \_\_\_\_\_

6. Color of hair: \_\_\_\_\_

8. Place of birth:

\_\_\_\_\_  
*City*                      *County*                      *State*

9. List every member of your immediate family who is still living; include father, mother, sisters & brothers.

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>Occupation</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**J. MILITARY RECORD**

1. Have you served in the U.S. Armed Forces?      \_\_\_\_Yes    \_\_\_\_No
  
2. Date of service: From \_\_\_\_\_ To \_\_\_\_\_ Branch of Service \_\_\_\_\_
  
3. Unit Designation \_\_\_\_\_ Military Service Record \_\_\_\_\_
  
4. Highest Rank Held \_\_\_\_\_
  
5. Type of Discharge and Rank at Discharge \_\_\_\_\_
  
6. Give date and location of entrance to active duty \_\_\_\_\_
  
7. Give date and location of discharge \_\_\_\_\_
  
8. List period(s) of active service:      From \_\_\_\_\_ To \_\_\_\_\_
  
9. List all draft classifications you have had (i.e. 1-A, etc.) \_\_\_\_\_
  
10. If you are not a veteran, list the following:  
  
Local Board No. \_\_\_\_\_ Address \_\_\_\_\_
  
11. Are you now, or were you ever, a member of any branch of the U.S. Reserve Forces?      \_\_\_\_Yes    \_\_\_\_No  
  
If yes, \_\_\_\_Active \_\_\_\_Inactive      Branch \_\_\_\_\_ Unit \_\_\_\_\_ Rank \_\_\_\_\_  
  
Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

12. Are you now, or were you ever, a member of the National Guard? \_\_\_\_Yes \_\_\_\_No

If yes, what state? \_\_\_\_\_ Regiment \_\_\_\_\_ Unit \_\_\_\_\_ Rank \_\_\_\_\_

Type of Discharge \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

13. Were you ever disciplined while in the Military Service? (*include court martial, captain's masts, company punishments in active service, reserve unit or National Guard*) \_\_\_\_Yes \_\_\_\_No

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

**K. RESIDENCE – List ALL addresses where you have lived during the past ten years beginning with present address. List date by month and year. Attach extra page if necessary.**

<u>From</u>	<u>To</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

With whom do you live at your current address? List full names & relationships

\_\_\_\_\_

## **L. CRIMINAL HISTORY**

1. Have you ever been reported as a missing person or runaway? \_\_\_\_Yes \_\_\_\_No

If yes, explain \_\_\_\_\_

2. Have you ever been the victim of a crime? \_\_\_\_Yes \_\_\_\_No

3. Have you ever been fingerprinted by a police agency other than for an arrest? \_\_\_\_Yes \_\_\_\_No

If yes, complete the following:

<u>Agency</u>	<u>Date</u>	<u>Purpose</u>
_____	_____	_____

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**M. TRAFFIC RECORD**

1. Can you operate an automobile?    ☐ Yes    ☐ No
2. Do you possess a valid operator's or chauffer's license from Illinois?    ☐ Yes    ☐ No  
If yes, date of expiration \_\_\_\_\_
3. Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_
4. Have you ever been refused an operator's or chauffer's license in any other state?    ☐ Yes    ☐ No  
If yes, please explain \_\_\_\_\_
5. Have you ever had an operator's or chauffer's license in any other state?    ☐ Yes    ☐ No
6. Has your driver's license ever been suspended or revoked?    ☐ Yes    ☐ No  
If yes, give dates, location & reasons below:  
\_\_\_\_\_
7. Has your license ever been placed on probation?    ☐ Yes    ☐ No  
If yes, explain \_\_\_\_\_
8. List to the best of your memory all traffic citations you have received, excluding parking tickets?
- | <u>Month &amp; Year</u> | <u>Charge</u> | <u>City &amp; State</u> | <u>Disposition</u> |
|-------------------------|---------------|-------------------------|--------------------|
| _____                   | _____         | _____                   | _____              |
| _____                   | _____         | _____                   | _____              |
| _____                   | _____         | _____                   | _____              |
9. Describe in a brief narrative any traffic accidents in which you have been involved, giving approximate dates and locations:

**I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the statements and answers to questions I have provided in this application. I am fully aware that any such willful misrepresentation, omissions, or falsifications may be grounds for immediate rejection or termination of employment.**

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*